# Oregon SBHC Key Performance Measures Guidance Document
# Core Measure 1: Well-care visit (Effective 7/1/2022)

## Measure Description

The percentage of SBHC clients ages 5-21 with evidence of a completed comprehensive well-care visit during the measurement school year

## Eligible Population

All SBHC clients seen for any reason (including physical, mental, dental health visits) either in-person or telehealth during the measurement school year (July 1 – June 30) ages 5-21 at the time of their visit.

## Exclusions

SBHC clients are excluded from Well-Care Visit denominator if:

- Client of any age refuses comprehensive well-care visit;
- Parent consent for comprehensive well-care visit is unable to be obtained after 1 attempt for client under 15 years of age; OR
- Client/parent claims comprehensive well-care visit has been provided elsewhere AND clinic makes 1 documented unsuccessful attempt to obtain clinical records; OR
- Clients with two documented no-shows for a scheduled appointment when a KPM service was to be provided; OR
- Client makes documented request for confidential visit and there is concern that obtaining information from a non-SBHC provider may compromise the client's confidentiality.

## Measure Specifications

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| Denominator: | Eligible population |
| Numerator: | Unique counts of SBHC clients ages 5-21 during the measurement school year (July 1 – June 30) who received a well-care visit |
| Required Codes: | ICD-10-CM Diagnosis: Z00.00, Z00.01, Z00.121, Z00.129, Z02.5, Z76.1, Z76.2; **OR**<br>CPT: 99383-99385, 99393-99395; **OR**<br>HCPCS: G0438, G0439 |
| State Benchmark: | 70% of charts sampled with documented comprehensive well-care visit during the measurement school year |
| Chart Audit Requirements: | SBHCs should audit 20% of their charts of the eligible population, with a floor of 30 charts and a ceiling of 50. If the SBHC has fewer than 30 eligible charts, they should review all eligible charts. |

## What "counts" as a well-care visit?

This measure is based on administrative (billing) data. The well-care visit should be documented using one of the required numerator CPT codes listed in the Measure Specifications. To use the billing codes listed above, the following components must be present for a visit to count as a well-care visit:

- A health and developmental history, e.g. social and emotional well-being, health behavior, academic history, physical development and mental health
- A physical exam, e.g., weight, height, vision, hearing, lungs, skin, genitals etc.
- Health education/anticipatory guidance provided based on results of health assessment

OR

- Documentation of well-care visit conducted at non-SBHC provider

## FAQ

*Does the Health Assessment need to be completed at the same time as the comprehensive well-care visit and physical exam?*
No. We understand that the health assessment may be conducted over multiple visits, rather than within the context of a single well visit.

## Resources

Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents. American Academy of Pediatrics. Available at: http://brightfutures.aap.org/

Anoshiravani, A. et al. (2012). Special requirements for electronic medical records in adolescent medicine. Journal of Adolescent Health, 51, 409-414. Available at: https://www.sciencedirect.com/science/article/abs/pii/S1054139X12003357

Reuland, C, Gillespie, RJ, Case, K. 2014. Enhancing Adolescent Well-Visits: Getting Them In, Setting the Stage, and Implementing Strength & Risk Screening Tools. Portland, OR: Patient Centered Primary Care Institute. Available at: https://www.q-corp.org/resources/webinars/enhancing-adolescent-well-visits