

Weight Ass

Summary of Changes to HEDIS 2020

- Clarified in the *Notes* that referral to WIC may be used to meet crite
- Added the *Rules for Allowable Adjustments of HEDIS* section.

Description

The percentage of members 3–17 years of age who had an outpatient vi:

- BMI percentile documentation*.
- Counseling for nutrition.
- Counseling for physical activity.

* *Because BMI norms for youth vary with age and gender, the measure*

Definitions

BMI percentile The percentile ranking based on the CDC’s BMI.

Eligible Population

Note: *Members in hospice are excluded from the eligible population. If review, the member is removed from the sample and replaced by a mem*

Product lines Commercial, Medicaid (report each product line
Ages 3–17 years as of December 31 of the measureme

- 3–11 years.
- 12–17 years.
- Total.

The total is the sum of the age stratifications.

Continuous enrollment The measurement year.

Allowable gap No more than one gap in continuous enrollment c
member may not have more than a 1-month gap i

Anchor date December 31 of the measurement year.

Benefit Medical.

Event/diagnosis An outpatient visit (Outpatient Value Set) with a

Administrative Specification

Denominator The eligible population.

Numerators

BMI Percentile BMI percentile (BMI Percentile Value Set) durin

Counseling for Nutrition Counseling for nutrition (Nutrition Counseling V

Counseling for Physical Activity Counseling for physical activity (Physical Activit

Exclusions (optional)

Female members who have a diagnosis of pregnancy (Pregnancy Value

Hybrid Specification

Denominator

A systematic sample drawn from the eligible pop stratifications.

Organizations may reduce the sample size using 1 Refer to the *Guidelines for Calculations and San*

Numerators

BMI Percentile BMI percentile during the measurement year as i

Administrative

Refer to *Administrative Specification* to identify

Medical record

Documentation must include height, weight and 1 Either of the following meets criteria for BMI pe

- BMI percentile documented as a value (e.
- BMI percentile plotted on an age-growth

Only evidence of the BMI percentile or BMI perc

Ranges and thresholds do not meet criteria for this is evident (i.e., 100% or 0%).

Counseling for

Nutrition Documentation of counseling for nutrition or ref

Administrative

Refer to *Administrative Specification* to identify

Medical record

Documentation must include a note indicating th

- Discussion of current nutrition behavior
- Checklist indicating nutrition was adre
- Counseling or referral for nutrition educ
- Member received educational materials
- Anticipatory guidance for nutrition.
- Weight or obesity counseling.

**Counseling for
Physical Activity**

Documentation of counseling for physical activit

Administrative

Refer to *Administrative Specification* to identify

Medical record

Documentation must include a note indicating th

- Discussion of current physical activity b
- Checklist indicating physical activity wa
- Counseling or referral for physical activ
- Member received educational materials
- Anticipatory guidance specific to the ch
- Weight or obesity counseling.

Exclusions (optional)

Refer to *Administrative Specification* for exclusion criteria. Exclusiona
Note

- *The following notations or examples of documentation do not cou*
 - **BMI**
 - No BMI percentile documented in medical record or plotted on ag
 - Notation of BMI value only.
 - Notation of height and weight only.
 - **Nutrition**
 - No counseling/education on nutrition and diet.

- Counseling/education before or after the measurement year.
- Notation of “health education” or “anticipatory guidance” without s

▪ A physical exam finding or observation alone (e.g., well-nourishe

▪ Documentation related to a member’s “appetite” does not meet cr

– **Physical Activity**

- No counseling/education on physical activity.
- Notation of “cleared for gym class” alone without documentation c
- Counseling/education before or after the measurement year.

▪ Notation of “health education” or “anticipatory guidance” without s

▪ Notation of anticipatory guidance related solely to safety (e.g., we

▪ Notation solely related to screen time (computer or television) wit

- Services may be rendered during a visit other than a well-child visit. T or treatment of an acute or chronic condition do not count toward the Co

For example, the following documentation is specific to the assessment i

- Notation that a member with chronic knee pain is able to run withou
- Notation that a member has exercise-induced asthma.
- Notation that a member with diarrhea is following the BRAT diet.
- Notation that a member has decreased appetite as a result of an a

- Services rendered for obesity or eating disorders may be used to mee

- Referral to the Special Supplemental Nutrition Program for Women, Ir

- Refer to Appendix 3 for the definition of PCP and OB/GYN practitione

Data Elements for Reporting

Organizations that submit HEDIS data to NCQA must provide the follo

Table WCC-1/2: Data Elements for Weight Assessment and Counse

Measurement year
Data collection methodology (Administrative or Hybrid)

Eligible population
Number of numerator events by administrative data in eligible population (before exclusions)
Current year's administrative rate (before exclusions)
Minimum required sample size (MRSS)
Oversampling rate
Number of oversample records
Number of numerator events by administrative data in MRSS
Administrative rate on MRSS
Number of medical records excluded because of valid data errors
Number of administrative data records excluded
Number of medical records excluded
Number of employee/dependent medical records excluded
Records added from the oversample list
Denominator
Numerator events by administrative data
Numerator events by medical records
Numerator events by supplemental data
Reported rate

Benchmarks - National all LOB

Metric Identifier	Measure
WCC	Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

Assessment and Counseling for Nutrition and Physical Activity

Criteria for the Counseling for Nutrition indicator.

Member must be seen by a PCP or OB/GYN and who had evidence of the following during the measurement year:

Organization evaluates whether BMI percentile is assessed rather than an absolute BMI Value.

Member's BMI is assessed using age- and sex-specific BMI-for-age growth charts, which indicates the relative position of the patient's BMI number on the growth chart.

If an organization reports this measure using the Hybrid method, and a member is found to be ineligible for the measure, refer to General Guideline 17: Members in Hospice.

(Reported separately).

Report two age stratifications and a total for each of the three indicators:

Continuous enrollment for a measurement year is defined as enrollment for at least 90 days of up to 45 days during the measurement year. To determine continuous enrollment for a measurement year, a member whose coverage lapses for 2 months [60 days] is not considered continuously enrolled.

PCP or an OB/GYN during the measurement year.

g the measurement year.

Value Set) during the measurement year.

ty Counseling Value Set) during the measurement year.

Set) during the measurement year. The denominator for all rates must be the same. An org

ulation for each product line for the Total age band (3–17 years). The Total sample is stra

the current year's administrative rate or the prior year's audited, product line-specific rate
ipling for information on reducing the sample size.

identified by administrative data or medical record review.

positive numerator hits from the administrative data.

BMI percentile during the measurement year. The height, weight and BMI percentile must
percentile:

.g., 85th percentile).

chart.

percentile plotted on an age-growth chart meets criteria.

is indicator. A distinct BMI percentile is required for numerator compliance. Documentati

erral for nutrition education during the measurement year as identified by administrative d

positive numerator hits from administrative data.

e date and at least one of the following:

s (e.g., eating habits, dieting behaviors).

ssed.

ation.

on nutrition during a face-to-face visit.

y or referral for physical activity during the measurement year as identified by administrat

positive numerator hits from the administrative data.

e date and at least one of the following:

behaviors (e.g., exercise routine, participation in sports activities, exam for sports participa

as addressed.

ity.

on physical activity during a face-to-face visit.

ild's physical activity.

ry evidence in the medical record must include a note indicating a diagnosis of pregnancy.

nt as numerator compliant:

re-growth chart.

specific mention of nutrition.

d) is not compliant because it does not indicate counseling for nutrition.

criteria.

of a discussion.

specific mention of physical activity.

ears helmet or water safety) without specific mention of physical activity recommendations.

hout specific mention of physical activity.

These services count if the specified documentation is present, regardless of the primary inter-
counseling for Nutrition and Counseling for Physical Activity indicators.

or treatment of an acute or chronic condition and does not meet criteria:

ut limping.

cute or chronic condition.

et criteria for the Counseling for Nutrition and Counseling for Physical Activity indicators if the

nfants and Children (WIC) may be used to meet criteria for the Counseling for Nutrition indica

er.



wing data elements.

Counseling for Nutrition and Physical Activity for Children/Adolescents

Administrative	Hybrid
✓	✓
Each of the 3 rates	Each of the 3 rates

<i>For each age stratification and total</i>	<i>Each of the 3 rates, for each age stratification and total</i>
	<i>Each of the 3 rates, for each age stratification and total</i>
	<i>Each of the 3 rates, for each age stratification and total</i>
	<i>Each of the 3 rates</i>
	<i>Each of the 3 rates</i>
	<i>Each of the 3 rates</i>
	<i>Each of the 3 rates, for each age stratification and total</i>
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	<i>Each of the 3 rates</i>
	<i>Each of the 3 rates, for each age stratification and total</i>
<i>Each of the 3 rates, for each age stratification and total</i>	<i>Each of the 3 rates, for each age stratification and total</i>
	<i>Each of the 3 rates, for each age stratification and total</i>
<i>Each of the 3 rates, for each age stratification and total</i>	<i>Each of the 3 rates, for each age stratification and total</i>
<i>Each of the 3 rates, for each age stratification and total</i>	<i>Each of the 3 rates, for each age stratification and total</i>
50th Percentile	75th Percentile
71	81

WCC for Children/Adolescents (WCC)

for the past year.

among others of the same gender and age.

not be in hospice or using hospice services during medical record

Medicaid beneficiary for whom enrollment is verified monthly, the beneficiary must be continuously enrolled).

[Redacted]

organization that excludes these members must do so for all rates.

[Redacted]

tified by age to report rates for the 3–11 and 12–17 age

for the lowest of the three indicator rates for the Total age band.

t be from the same data source.

on of >99% or <1% meet criteria because a distinct BMI percentile

ata or medical record review.

ive data or medical record review.

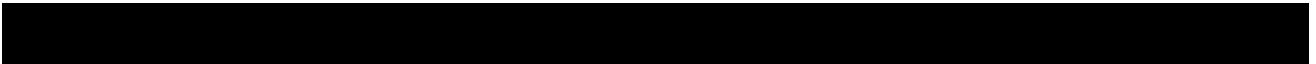
tion).

. The diagnosis must have occurred during the measurement year.

rt of the visit; however, services specific to the assessment

specified documentation is present.

tor.



90th Percentile
89

