



WELL-CHILD VISITS

KEY IN A CHILD'S FIRST 15 MONTHS

Well-child visits are the hallmark of preventive care for infants and children. They provide an excellent opportunity for prevention or early intervention of physical, developmental and behavioral problems.

Through regular contact with parents, pediatricians and other health care providers can assess and monitor a child's development and screen for developmental problems and risk behaviors.¹ Although each child develops at his or her own pace, all children progress through an identifiable sequence of physical and emotional growth and change. Age-appropriate health care visits encourage positive parenting behaviors, help promote optimal development and initiate early intervention when problems appear imminent.²

The well-child periodicity schedule for infants 0–15 months is as follows: An evaluation at birth for newborns; 48 to 72 hours after discharge from the hospital if breastfeeding; at 2 to 4 days for newborns discharged less than 48 hours after delivery; by 1 month; 2 months; 4 months; 6 months; 9 months; 12 months; and 15 months.³

As this schedule indicates, by 15 months, a child should have had at least six well-child visits.

Each year, WellCare of Florida, Inc. collects data on performance measures using the Healthcare Effectiveness Data and Information Set (HEDIS®) methodology, including for well-child visits in the first 15 months of life.⁴ The data collected shows an opportunity for improvement in the compliance rate of well-child visits being performed on children 0–15 months of age. A well-child measure has been selected as a project for improvement in order to raise the rates of children receiving six or more well-child visits by their 15-month birthday.

Primary care physicians have the opportunity to greatly affect these rates. Please remind parents of the importance of bringing in their children for age-appropriate screenings and encourage them to keep their appointments. The codes used to identify well-child visits for the 0–15 months age group include: 99381, 99382, 99391, 99392, 99432 (CPT), and V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9 (ICD-9 CM diagnosis).⁵

A well-child visit should not be performed on an obviously sick child where findings may be distorted. The provider should evaluate the degree of illness to determine if a well-child visit should be performed. Providers may bill only for a sick visit or a well-child visit—not for both.⁶

Also, please note that well-child visits must be performed by the 15-month birthday or before. Well-child visits will not count as compliant if completed after the exact date of the 15-month birthday.

