



Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents

Purpose: Members ages 3 to 17 years who have an outpatient visit with a PCP need evidence of *BMI percentile* documented and evidence of nutrition and physical activity *counseling* or a *referral for nutrition and physical activity counseling* documented in their medical records for compliance with HEDIS requirements. **Per the Bright Futures Periodicity Schedule, BMI should be documented beginning at the 24 month visit. Compliance with the Bright Futures guidelines will lead to compliance with this HEDIS measure.**

Assessment and Counseling must be done per the Periodicity Schedule regardless of BMI results or appearance of over/under weight

Acceptable Documentation		*HEDIS Acceptable Codes
<p><i>BMI percentile</i></p> <p>The percentage of members 3 – 17 years of age who had an outpatient visit with a PCP or OB/GYN who had evidence of a BMI percentile documentation during the measurement year.</p>	<p>Per the Bright Futures Periodicity Schedule, documentation of BMI must begin at age 24 months. BMI percentiles should be calculated and plotted per the Periodicity Schedule’s timeframes.</p> <p>HEDIS Requirements: Documentation must include, height, weight and BMI Percentile documented as a value (i.e. 85th percentile) or plotted on an age-appropriate growth chart</p> <p>The following notations or examples of documentation <i>do not count</i> as compliant:</p> <ul style="list-style-type: none"> • Notation of BMI value only • Notation of height and weight only <p>BMI percentile may be calculated during a well or sick visit – MUST be documented per the Bright Futures Periodicity schedule beginning at age 24 months, regardless of BMI results or appearance of over/under weight</p>	<p>ICD10CM:</p> <p>Z68.51 - Body Mass Index (BMI) pediatric, less than 5th percentile for age</p> <p>Z68.52 - Body Mass Index (BMI) pediatric, 5th percentile to less than 85th percentile for age</p> <p>Z68.53 - Body Mass Index (BMI) pediatric, 85th percentile to less than 95th percentile for age</p> <p>Z68.54 - Body Mass Index (BMI) pediatric, greater than or equal to 95th percentile for age</p>
<p><i>Counseling for Nutrition</i></p> <p>The percentage of members 3 – 17 years of age who had an outpatient visit with a PCP or OB/GYN who had evidence of counseling for nutrition or referral for nutrition education</p>	<p>HEDIS Requirements: Documentation must include a note indicating the date and at least one of the following:</p> <ul style="list-style-type: none"> • Discussion of current nutrition behaviors (e.g., eating habits, dieting behaviors). • Checklist indicating nutrition was addressed. • Counseling or referral for nutrition education (e.g. referral to Women, Infants and Children (WIC) services) • Member received educational materials on nutrition during a face-to-face visit. • Anticipatory guidance for nutrition. • Weight or obesity counseling. <p>Counseling for Nutrition can be rendered during a well or sick visit – MUST be done at least annually, regardless of BMI results or</p>	<p>CPT: 97802, 97803, 97804</p> <p>HCPCS** G0270, G0271, G0447, S9452, S9470</p> <p>ICD-10-CM: Z71.3 Dietary counseling and surveillance</p>



<p>during the measurement year.</p>	<p>appearance of over/under weight</p> <p><i>The following notations or examples of do not count as compliant:</i></p> <ul style="list-style-type: none"> • Notation of “health education” or “anticipatory guidance” without specific mention of nutrition. • A physical exam finding or observation alone (e.g., well-nourished) is not compliant because it does not indicate counseling for nutrition. 	
<p><i>Counseling for Physical Activity</i></p> <p>The percentage of members 3 – 17 years of age who had an outpatient visit with a PCP or OB/GYN who had evidence of Counseling for physical activity or referral for physical activity education during the measurement year.</p>	<p>HEDIS Requirements: Documentation must include a note indicating the date and at least one of the following:</p> <ul style="list-style-type: none"> • Discussion of current physical activity behaviors (e.g., exercise routine, participation in sports activities, exam for sports participation). • Checklist indicating physical activity was addressed. • Counseling or referral for physical activity • Member received educational materials on physical activity during a face-to-face visit. • Anticipatory guidance specific to the child’s physical activity. • Weight or obesity counseling <p>Counseling for Physical Activity can be rendered during a well or sick visit – MUST be done at least annually, regardless of BMI results or appearance of over/under weight</p> <p><i>The following notations or examples of documentation do not count as compliant:</i></p> <ul style="list-style-type: none"> • Notation of “Cleared for gym class” alone without documentation of a discussion • “Health education” or “anticipatory guidance” without specific mention of physical activity • Developmental milestones as discussion of physical activity, such as “can ride a bike”, “child can crawl, child can jump on one foot • Anticipatory guidance related solely to safety (e.g., wears helmet or water safety) without specific mention of physical activity recommendations • Notation solely related to screen time (computer or television) without specific mention of physical activity 	<p>HCPCS* G0447, S9451</p> <p>ICD-10-CM: Z02.5 Encounter for examination for participation in sport</p>

A chart review by the health plan will not be necessary if the HEDIS acceptable codes are submitted by the PCP at least annually.

*Based on HEDIS® 2017 specifications

**HCPCS codes may not be covered for PCPs. Note: Acceptable documentation and codes are based on HEDIS® 2017