

HEDIS® Pediatric Pocket Guide: 2025 Measurement Year

For a complete list of codes, please visit the NCQA website at [ncqa.org](https://www.ncqa.org), or see the HEDIS value sets. The following is a subset only of the NCQA approved codes. CPT Copyright 2024 American Medical Association. All rights reserved. CPT® is a registered trademark of the American Medical Association.

All well-child visits

Must include the following: Documentation of a visit with an acceptable provider type, the date of the visit and services to validate a well-child visit was performed.

Measure	Best practice	Codes
(W30) Well-child visits in the first 30 months of life (ages 0–30 months)	<p>Well-child visits in the first 15 months. Complete 6 or more well-child visits before the child turns 15 months old.</p> <p>Well-child visits for ages 15–30 months. Complete 2 or more well-child visits after the child turns 15 months old and before the child turns 30 months old.</p>	99381, 99382, 99391, 99392, 99461, G0438, G0439, S0302, Z00.110, Z00.111, Z00.121, Z00.129
(WCV) Child and adolescent well-care visits (ages 3–21)	One or more comprehensive well-care visits with a primary care physician (PCP) or obstetrician (OB/GYN) within the measurement year. Visits occurring anytime in the measurement year, including prior to or after the patient's birthday, close the gap.	99382–99385, 99391–99395, G0438, G0439, S0302, S0610, S0612, S0613, Z00.00, Z00.01, Z00.121, Z00.129, Z00.2, Z00.3, Z01.411, Z01.419, Z02.5, Z76.2
(DEV) Developmental screening in the first three years of life	<p>Conduct developmental and behavioral screenings for all children during regular well-child visits at 9 months, 18 months, and 30 months. Only utilize standardized developmental screening tools cited in Bright Futures/American Academy of Pediatrics.</p> <p>Children should also be screened for the autism spectrum disorder (ASD) at 18 months and 24 months. ASD screenings must be completed with another standardized developmental screening to be counted for HEDIS.</p>	96110

Dental

Measure	Best practice	Codes
(TFL-CH) Topical fluoride for children	<p>Administer fluoride varnish application at least once every six months for all children and every three months for children at high risk for dental caries.</p> <p>Perform oral health risk assessments on all children at every routine well-visit beginning at 6 months of age.</p> <p>Recommend use of fluoridated toothpaste starting at eruption of the first tooth: rice-grain sized amount for children younger than age 3, and a pea-sized amount for most children starting at age 3.</p>	CPT: 99188 CDT: D1206
(OED) Oral evaluation, dental services	Refer all children ages 1 and older to an in-network dentist.	Not applicable

(continued)

Respiratory conditions

Measure	Best practice	Codes
(CWP) Appropriate testing for pharyngitis	Episodes for members ages 3 and older where the member is: <ul style="list-style-type: none"> Diagnosed with pharyngitis Dispensed an antibiotic Received a group A Strep test Note: Test for group A Strep before dispensing an antibiotic.	Group A Strep test: 87070, 87071, 87081, 87430, 87650-87652, 87880
		Pharyngitis: J02.0, J02.8, J02.9, J03.00, J03.01, J03.80, J03.81, J03.90, J03.91

Weight assessment and counseling for nutrition and physical activity

Measure	Best practice	Codes
(WCC) Weight assessment and counseling for nutrition and physical activity for children/adolescents (ages 3–17)	Visit with a PCP or OB/GYN in measurement year with documentation of, or claim for, discussion of body mass index (BMI) percentile, and nutrition and physical activity.	BMI: Z68.51, Z68.52, Z68.53, Z68.54 Nutrition: 97802–97804, G0270, G0271, G0447, S9449, S9452, S9470 PA: G0447, S9451, Z02.5, Z71.82

Immunizations

Measure	Best practice	Codes
(CIS-E) Childhood immunizations (Completed on or before the 2nd birthday.)	Diphtheria, tetanus, and pertussis (DTaP) – 4 Doses	90697, 90698, 90700, 90723
	Pneumococcal conjugate vaccine (PCV) – 4 Doses	90670, 90671, G0009
	Inactivated poliovirus vaccine (IPV) – 3 Doses	90697, 90698, 90713, 90723
	Haemophilus influenzae type B (HiB) – 3 Doses	90644, 90647, 90648, 90697, 90698, 90748
	Hepatitis B – 3 Doses	90697, 90723, 90740, 90744, 90747, 90748, G0010
	Rotavirus vaccination (RV) – 2 or 3 Doses	2 Doses: 90681 3 Doses: 90680
	Flu – 2 Doses (Live, attenuated influenza vaccine (LAIV) meets criteria for one of the two required vaccinations if administered on or before the 2nd birthday.)	90655, 90657, 90660, 90661, 90672-90674, 90685-90689, 90756
	Varicella (VZV) – 1 Dose	90710, 90716
	Measles, mumps and rubella (MMR) – 1 Dose	90707, 90710
	Hepatitis A – 1 Dose	90633
(IMA-E) Immunizations for adolescents (Completed on or before the 13th birthday.)	Meningococcal – 1 Dose	90619, 90623, 90733, 90734
	Tetanus, diphtheria, and pertussis (Tdap) – 1 Dose	90715
	Human papilloma virus (HPV) – 2 or 3 Doses	90649–90651

Lead screening

Measure	Best practice	Codes
(LSC) Lead screening in children	Percentage of children who had one or more capillary or venous lead blood tests by their 2nd birthday. At least one lead screening result documented by age 2.	83655

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