

HEDIS® News You Can Use

Aetna Better Health® of West Virginia

April 2026



Early years matter: Together, let's prioritize early child well-being!

Childhood Immunization Status (CIS-E)

i Measure Requirements:

- Children who turn **2 years old** during the measurement year must receive all required immunizations **on or before their second birthday**. Required doses include:
 - **4 doses:** DTaP, PCV
 - **3 doses:** IPV, Hib, Hep B
 - **1 dose:** MMR, VZV, Hep A
 - **2 or 3 doses:** Rotavirus (Rotateq vs Rotarix)
 - **2 doses:** Influenza
- ⇒MMR, VZV, and Hep A **must be administered** on or between the **first & second birthday**
- ⇒Coding/billing for the Rotavirus vaccine **must accurately reflect which vaccine was administered** -Rotateq or Rotarix

i Coding Information:

DTaP Vaccine: 90697, 90698, 90700, 90723
IPV Vaccine: 90697, 90698, 90713, 90723
MMR Vaccine: 90707, 90710
Hib Vaccine: 90644, 90647, 90648, 90697, 90698, 90748
Hep A Vaccine: 90633
Hep B Vaccine: CPT: 90697, 90723, 90740, 90744, 90747, 90748, **HCPCS:** G0010
VZV Vaccine: 90710, 90716
PCV Vaccine: CPT: 90670, 90671, 90677, **HCPCS:** G0009
RV Vaccine: 90681 (2 dose), 90680 (3 dose)
Flu Vaccine: 90655 - 90658, 90660, 90661, 90672, 90674, 90685 - 90689, 90756
LOINCS available by contacting Quality Management.

Recommendations for Flu Gaps in Care

Delayed or missed influenza vaccinations are a leading cause of Childhood Immunization Status (CIS) compliance gaps, and applying these strategies can help improve member outcomes and HEDIS performance.

- Begin offering the flu vaccine **as soon as it becomes available**
- Offer vaccinations to **siblings who accompany the patient** to the appointment
- Use **automated reminder systems** (e.g., phone calls, text messages, or emails) to notify patients and caregivers when immunizations are due
- Establish **dedicated nurse-only appointment slots** to streamline vaccine administration and improve access
- Consider offering **extended-hours**, including evenings or weekend clinics, during flu season to accommodate caregiver schedules
- **Schedule follow up appointments** before patients and families leave the office
- Continue to **recommend and offer flu vaccine** even if a parent/guardian has previously declined
- Explore participation in the **Vaccines for Children (VFC) program** to expand vaccine access and potentially improve coverage rates

Well-Child Visits in the First 30 Months of Life (W30)

i Measure Requirements:

Well-Child Visits: First 15 months

To meet measure requirements, members must satisfy **all** of the following:

- Child turned **15 months old** during the measurement year
- Complete **Six (6) or more** well-child visits with a **PCP** by the **15-month birthday**

Well-Child Visits: Ages 15-30 months

To meet measure requirements, members must satisfy **all** of the following:

- Child turned **30 months old** during the measurement year
- Complete **Two (2) or more** well-child visits with a **PCP between 15 and 30 months of age**, and **no later than the 30-month birthday**

Coding Information:

CPT: 99381-99385, 99391-99395, 99461

HCPCS: G0438, G0439, S0302, S0610, S0612, S0613

**Good news! Aetna Better Health® of West Virginia will cover a well-child visit even if it falls outside the 12-month cycle.*

Lead Screening in Children (LSC-E)

Measure Requirements:

Children who turn 2 years old during the measurement year and receive at least one capillary or venous lead blood tests **on or before their 2nd birthday.**

Coding Information:

Lead Testing: 83655

LOINCS available by contacting Quality Management.

Member Incentives Program:

For more details and the most up-to-date information, please call our office at **888-348-2922.**

Earn \$50: Members who turn **2 years old** and complete their Influenza vaccinations on or before their 2nd birthday

Earn \$25: Members who turn **2 years old** and complete a blood lead test on or before their 2nd birthday

Common Reasons for Gaps in Care:

- Birth dose of Hepatitis B not found in claims data
- Two-dose rotavirus not billed as a 2-dose series (e.g., GlaxoSmithKline/Rotarix®, monovalent) Accurate product coding is required for proper series completion
- Influenza and rotavirus series missing or incomplete
- Rotavirus series not completed within the required measure window for series completion
- (4th) DTaP and pneumococcal vaccines not completed
- Immunizations received by outside providers or health departments not captured in claims
- Vaccine was given, but the vaccine product code was missing from the claim
- Inconsistent documentation of vaccines in the WV Immunization Registry
- Lead screening and CIS required vaccines administered after the second birthday
- Early well-child visits were billed to Medicaid prior to MCO enrollment

Great Resources

[American Academy of Pediatrics Issues Recommended Childhood and Adolescent Immunization Schedule for 2026](#)

[AAP-Immunization-Schedule.pdf](#)

[WV Blood Lead Guidelines](#)

[WV Periodicity Schedule.pdf](#)

Here for you!

Thank you for caring for our members! For questions on how we can assist you, contact WVMedicaidQuality@AETNA.com.



Best Practices

- Review immunization status at every visit and provide **catch-up vaccines**
- Ensure **birth dose Hep B** is captured through claims
- Ensure claim coding accurately reflects rotavirus vaccine type: Rotarix (2-dose) or RotaTeq (3-dose)
- Use **Gap in Care Reports** to schedule needed vaccine visits
- **Submit immunization information** from external providers or health departments via approved electronic data submissions
- Consistently submit immunizations to the **WV Immunization Registry**
- Ensure the vaccine product code is billed on the claim or submitted through approved supplemental data to close gap
- Ensure **blood lead tests** (lab, health department, or WIC) are completed and reported through claims or approved ECDS
- Consider offering **in-office testing**, including blood lead analyzer testing
- **Schedule 2 year well-child visits** on or before the child's 2nd birthday
- When appropriate, use sick visits to address overdue well-care visits
- Verify **MCO enrollment and any updates** at each well-child visit
- Confirm current insurance information at each visit
- Use **accurate and complete coding** to ensure services count toward HEDIS ECDS measures

www.AetnaBetterHealth.com/WestVirginia