

Healthy Children and Youth/Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Billing and Coding Guide

Thank you for helping your patients live healthier lives through the Healthy Children and Youth/EPSDT program. We have created this guide to assist your practice with applicable billing and coding, which will help increase your program participation and screening rates. **Please refer to state, American Academy of Pediatrics/Bright Futures and Centers for Medicare & Medicaid Services billing protocols to help ensure the accuracy of EPSDT code submissions.**

Healthy Children and Youth/EPSDT preventive services billing codes^{1,2,3}

Age	CPT® Code: New Patient	CPT Code: Established Patient	ICD-10-CM Codes
< 1 year	99381	99391	Z00.110 – Newborn to < 8 days old Z00.111 – Newborns 8-28 days old Z00.121 – Routine child health exam with abnormal findings Z00.129 – Routine child health exam without abnormal findings
1-4 years	99382	99392	Z00.121 Z00.129
5-11 years	99383	99393	Z00.121 Z00.129
12-17 years	99384	99394	Z00.121 Z00.129
18-20 years	99385	99395	*Z00.121 – Routine child health exam with abnormal findings *Z00.129 – Routine child health exam without abnormal findings *When billed with EP Modifier
18-20 years	99385	99395	Z00.00 – General adult medical exam without abnormal findings Z00.01 – General adult medical exam with abnormal findings
Modifiers			

EP: EPSDT service.

52: Partial EPSDT screening; provider **must** complete Sections 1-5 of the Healthy Children and Youth Screening Guide

59: Distinct Service. Identify components of EPSDT screen related to developmental and mental health.

UC: EPSDT referral for follow-up care as a result of the EPSDT screening.

*25: Used with the appropriate office or outpatient service code (99201-99215) if an illness, abnormality or significant medical problem is encountered or a pre-existing problem is addressed in the process of performing the EPSDT service. The appropriate office/outpatient code, with Modifier 25, should be reported, **in addition to** the preventive medicine service code.

Components of a Healthy Children and Youth/EPSTD Exam:¹

Full screening must be performed by an enrolled Missouri HealthNet physician, nurse practitioner or nurse midwife (for infants ages 0-2 months and females ages 15-20 years) and must include all of the following components:

- Interval history
- Unclothed physical examination
- Anticipatory guidance
- Lab/immunizations (reimbursed separately)
- Lead assessment (Healthy Children and Youth Lead Risk Assessment Form)
- Development personal-social and language
- Fine motor/gross motor skills
- Hearing
- Vision
- Dental (referred to dental provider when medically indicated)

Partial screening: Unclothed physical and history screen (CPT 9938152EP-9938552EP and 9939152EP-9939552EP), including the first 5 sections of the age-appropriate screening guide:

- Interval history
- Unclothed physical examination
- Anticipatory guidance
- Lab/Immunizations
- Age-appropriate lead screening (Healthy Children and Youth Lead Risk Assessment Form)

Z00.121

Routine child exam **with** abnormal findings, may include, but not limited to:

- Acute injury
- Acute illness
- Abnormal screen
- Abnormal exam finding
- Abnormal exam finding
- Incidental or trivial finding that is diagnosed in the patient's chart
- Newly diagnosed chronic condition
- Chronic condition being controlled
- Chronic condition being uncontrolled
- Chronic condition that had to be addressed, due to exacerbation (except medication refills)
- New issues arising related to the chronic condition

Z00.129

Routine child health exam **without** abnormal findings and can be billed with chronic conditions, even if they are stable.

- If the stable/improving chronic condition has to be addressed for medication refill or routine follow-up, the chronic condition may be reported, in addition to the well-child exam "with normal findings."
- Verify the condition, medications, durable medical equipment, injections/infusions that are managed by the specialist.
- Address/rule out any suspected conditions.

Note: When an Annual Wellness Visit is performed, the Z00 code series should always be entered in the primary diagnosis position; Z02 codes (sports physicals, school physicals, etc.) should always be entered in the second diagnosis position or beyond.

Notes

- A care provider cannot bill for an office visit and a Healthy Children and Youth screen on the same date of service, unless documentation in the medical record indicates a medical need for the office visit.
- UnitedHealthcare Community Plan will reimburse care providers for a sick visit for the same date of service. (See Modifier 25.) Documentation must support that the sick visit was significant and separately identifiable.
- Initial newborn examinations have been identified as Healthy Children and Youth screenings; use either procedure code 99460 or 99461; field 24h on the CMS-1500 **must** be marked with an "E."
- Independent Rural Health Centers will bill HCPCS T1015, with the applicable CPT code(s) and modifier(s).
- **Always follow the state and CMS billing guidelines and ensure the EPSTD codes are covered prior to submission.**
- This document provides general EPSTD information for billing and coding. For more detailed information, please refer to the Missouri HealthNet Provider Manual.

¹ Section 8. Healthy Children and Youth Program. (November 2020). Retrieved December 2020. manuals.momed.com/collections/collection_phy/print.pdf

² Coding for Pediatric Preventive Care (2020). Retrieved December 2020. aap.org/en-us/Documents/coding_preventive_care.pdf

³ 2021-ICD-10-Official Guidelines for Coding and Reporting FY2021. Retrieved December 2020. cdc.gov/nchs/data/icd/10cmguidelines-FY2021.PDF

COVID-19 Telehealth guidance

For more information on COVID-19 telehealth guidance, visit UHCprovider.com/content/dam/provider/docs/public/commplan/mo/news/MO-telehealth-guidance.pdf.