

## 8.18 EPSDT/ Well-Baby/Well-Child Visit – Infant & Adolescent

The Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) is a screening assessment for children under age 21 who are enrolled in Medicaid. Nevada Check Up members are eligible to receive well-baby/well-child visits. Assessments should include documentation/charting of, at a minimum, the following components:

- A health and developmental history (physical and mental)
- A physical exam and findings
- Health Education/Anticipatory Guidance (i.e., nutrition, exercise, etc.)

Screenings include:

- |                                       |                    |   |
|---------------------------------------|--------------------|---|
| ✓ A medical and developmental history | ✓ Laboratory tests | ✓ Hearing services  |
| ✓ An unclothed physical exam          | ✓ Health education | ✓ Other medical needed services                             |
| ✓ Immunizations                       | ✓ Vision services  | ✓ Comprehensive health and developmental/Behavioral History |

Please make sure that your Medicaid members and Nevada Check Up members have EPSDT screenings! We are conducting regular outreach programs to educate eligible parents/guardians about the EPSDT program.

Members that are due for this program are sent postcard notifications that their well-child screenings are due. They are encouraged to call their PCP to schedule an appointment.

Providers will also be provided quarterly reports of their members that are due for preventive care or disease management services per HEDIS performance measures as evidenced by claim submission. Providers are asked to review these reports and contact the patients to schedule an appointment.

Providers may also conduct EPSDT/well-baby/well-child exams on members, when needed and/or when the member makes such a request. Medicaid/Nevada Check Up members should have EPSDT/well-baby/well-child visits completed in accordance with the American Academy of Pediatrics/Bright Futures periodicity schedule and the Medicaid Services Manual (MSM) Chapter 1500 at the following intervals listed.

Age Range			
Infancy	Early Childhood	Middle Childhood	Adolescence
Prenatal	12 months	5 years	11 years
Newborn	15 months	6 years	12 years
3-5 days	18 months	7 years	13 years
1 month	24 months	8 years	14 years
2 months	30 months	9 years	15 years
4 months	3 years	10 years	16 years
6 months	4 years		17 years

## 2023 HPN Provider Summary Guide

9 months			18 years
			19 years
			20 years
			21 years
<b>8</b>	<b>7</b>	<b>6</b>	<b>11</b>
<b>Total</b>			<b>32</b>

### EPSDT/ Well-Baby/Well-Child Billing

EPSDT/Well-Baby/Well-Child services must be billed on a CMS 1500. Industry standard preventive visit codes must be used. The CPT codes acceptable for billing these services are 99381-99385 and 99391-99395. Please refer to your CPT book for descriptions of these codes.

Please utilize the following modifiers when billing EPSDT/well-baby/well-child services:

- EP to identify the visit as an EPSDT/Well-Baby/Well-Child exam
- FP to indicate family planning services were provided
- TS to indicate a referral to a specialist as a result of an EPSDT/well-baby/well-child exam

**To assist provider office staff, we have clarified the EPSDT billing codes for easy reference.**

#### NEW PATIENT

Description	Code	Modifier*
Infant (age under 1 year)	99381	EP or TS
Early Childhood (age 1 through 4 years)	99382	EP or TS
Late Childhood (age 5 through 11 years)	99383	EP or TS
Adolescent (age 12 through 17 years)	99384	EP or TS
Adult (age 18 through 20 years)	99385	EP or TS

#### ESTABLISHED PATIENT

Description	Code	Modifier*
Infant (age under 1 year)	99391	EP or TS
Early Childhood (age 1 through 4 years)	99392	EP or TS
Late Childhood (age 5 through 11 years)	99393	EP or TS
Adolescent (age 12 through 17 years)	99394	EP or TS
Adult (age 18 through 20 years)	99395	EP or TS

*\* Modifiers EP or TS should only be used with the examination codes above. Modifier EP is for the normal screening examination. Modified TS indicates that follow-up treatment or referral is indicated. You will need to complete Field 21 on the CMS-1500 with the appropriate ICD-9 code to reflect conditions requiring follow-up.*

#### OTHER

Description	Code	Modifier
Family Planning Services	99401	FP
Vaccines+	90476 through 90479	No modifier
Vaccine Administration – Single	90471	No modifier
Vaccine Administration - Multiple	90472	No modifier

+Non-VFC providers should bill the vaccine at usual and customary charges. VFC providers should bill the vaccine at a zero dollar amount.

### **Billing for Well-Child and Sick Visits on the Same Day**

HPN allows reimbursement for well-child visits and limited sick visits on the same day with appropriate billing. When a child presents for a sick visit and is due for a preventive visit, you may complete a well-child assessment, in addition to rendering care for the presenting problem.

#### **What guidelines should be followed?**

Early Periodic Screening, Diagnosis and Treatment (EPSDT) criteria apply:

- Comprehensive health and developmental assessment and history
- Unclothed physical exam
- Immunizations (use all visits, preventive and sick, if medically appropriate)
- Laboratory tests, as appropriate for the age of the child
- Health education and age-appropriate anticipatory guidance
- A vision examination
- A hearing examination
- A dental examination
- And many other medically-needed services.

<b>Allowable Sick Visits When Billing with a Wellness Visit</b>	<b>Allowable Sick Visit CPT Codes with Required Modifier</b>
	99201, 99202, 99203, <b>99204*</b> , <b>99205*</b> , 99211, 99212, 99213, <b>99214*</b> , <b>99215*</b>

\*If using these billing codes, HPN requires a copy of the chart/progress note to accompany the billing.

Bill the age appropriate EPSDT visit ICD-10-CM codes (i.e. Z00.00, Z00.01, Z00.110, Z00.111, Z00.121, Z00.129, Z00.5, Z00.8, Z02.0 - Z02.6, Z02.71, Z02.79 - Z02.83, Z02.89, Z02.9) and the age appropriate CPT codes (99381-99385 and 99391-99395) using one of the appropriate sick visit Evaluation and Management (E&M) codes with the modifier 25.

**Note:** Modifier 25 must be billed with the applicable E&M code for the allowed sick visit. When modifier 25 is not billed appropriately, the sick visit is denied. Appropriate diagnosis codes must also be documented for both wellness and sick visits. Appropriate diagnosis codes must be billed for respective visits.

### **EPSDT/Well-Baby/Well-Child Referrals**

When referring a child to a specialist as a result of an EPSDT/well-baby/well-child exam, please follow the steps outlined below:

- Assist the member in choosing a specialist from the HPN Medicaid-Nevada Check Up Provider Directories.
- Make an appointment with the specialist for the patient.
- If the referral was not submitted through HPN's online provider center, you must fax a copy of the referral to the specialist and give the patient the original copy of the referral form with instructions to take the referral form to the specialist appointment.

**When submitting the claim to the Health Plan, please follow the steps outlined below:**

## 2023 HPN Provider Summary Guide

- Attach a copy of the referral form to the CMS 1500 form and submit to HPN.
- Use the TS modifier with the EPSDT CPT code on the CMS 1500 form.
- Include the diagnosis code supporting the referral in Box 21 of the claim form.

### **Lead Testing as Part of EPSDT/Well-Baby/Well-Child**

Lead testing is part of the EPSDT/well-baby/well-child visit. All Medicaid and Nevada Check Up children need to have blood lead testing completed at 12 months and 24 months of age. HPN has contracted with MedTox Laboratories to provide pediatric offices with filter paper lead screening tests. The filter paper kits provide a convenient testing method for providers and patients because the test can be performed in the pediatrician's office with a finger stick. To obtain filter paper test kits at no cost please contact MedTox Laboratories at 1-800-FOR-LEAD. Providers may also conduct lead testing in the office with the required Clinical Laboratory Improvement Amendment (CLIA) Waiver or refer members to the contracted laboratory.

### **Dental Services as Part of EPSDT/Well-Baby/Well-Child**

Dental services are part of the EPSDT/well-baby/well-child screening. Please refer any child who needs preventative or restorative dental services to any of the contracted dentists listed in the applicable Provider Directory.

### **Hearing and Vision Services as Part of EPSDT/Well-Baby/Well-Child**

Hearing and vision services are part of the EPSDT/well-baby/well-child screening. Upon completion of the screenings, members requiring further testing or treatment need to be referred to a specialist. Please follow the steps outlined under, "**EPSDT/Well-Baby/Well-Child Referrals**". Please ensure the appropriate CPT code is used for the screening and use the TS modifier.

### **Developmental Assessment**

Assessment of developmental and behavioral status should be completed at each visit by observation, interview, history, and appropriate physical examination. The developmental assessment should include a range of activities to determine whether or not the child has reached an appropriate level of development for age. Developmental and behavioral assessments should include documentation/charting of at a minimum the following components:

- A health and developmental history (physical and mental)
- A physical Exam and findings
- Health Education/Anticipatory Guidance (i.e., nutrition, exercise, etc.)

### **Behavioral Health**

Please refer any child who needs behavioral services to Behavioral Healthcare Options (BHO) at 702-364-1484 or 1-800-873-2246.

## **8.19 Vaccines for Children (VFC) Program**

The VFC Program, administered by the Nevada Division of Public and Behavioral Health (DPBH), provides vaccine free-of-charge to providers. These vaccines may be administered to Medicaid and Nevada Check Up members through 18 years of age in accordance with the most current Advisory Committee on Immunization Practices (ACIP) schedule. This schedule can be found in the Medicaid Services Manual (MSM) Chapter 1500, Attachment B.

All Medicaid and Nevada Check Up primary care providers who are contracted with HPN must participate in the VFC Program. A primary care provider must complete an application and orientation program through the VFC Program. To obtain an application, please access the VFC website, [http://dpbh.nv.gov/Programs/VFC/VFC - Home/](http://dpbh.nv.gov/Programs/VFC/VFC_-_Home/). For additional information about this program, please contact the Nevada State Immunization Program at **775-684-5900**.

Please follow the steps outlined below when billing immunizations:

- Include the CPT codes for the immunizations given on the CMS-1500 form with a \$0.00 charge.
- Include the injection administration code 90471/90472 for the injections given.

## **8.20 Nevada Division of Public and Behavioral Health's Immunization Registry**

The Nevada Division of Public and Behavioral Health's Immunization Registry, known as WebIZ is a statewide registry that houses immunization information about Nevada's children. The goal is to ensure children up to age two are fully immunized HPN's Medicaid and Nevada Check Up contracted providers are required to participate in the Registry. NRS 439.265 requires that all providers who administer immunizations in Nevada to children under the age of 18 are required to report immunization data to the Registry. To enroll in this program please contact the registry coordinator at **775-684-4032**.

## **8.21 Children with Special Healthcare Needs (CSHCN)**

Children who have, or are at risk for, chronic physical, developmental, behavioral, or emotional conditions; and also require health and related services of a type and amount beyond that required by children in general; and are receiving services through family-centered, community-based, coordinated care systems are known as CSHCN. Examples of CSHCN are:

- Medicaid members who receive services through Nevada Early Intervention Services for physical and developmental delays
- Medicaid members who receive services through the Division of Child and Family Services for mental health issues
- Medicaid members who receive medical services through the school-based health clinics

Some of these members are case managed by HPN's pediatric case management team. HPN's pediatric case management team will develop a treatment plan as needed and will coordinate medical services to follow the treatment plan. The treatment plan is developed with the member's primary care provider. The pediatric case management team works closely with the member's primary care provider and specialists to meet the member's needs.