



**HEALTH PLAN OF NEVADA**  
A UnitedHealthcare Company

**Dear Health Plan of Nevada Medicaid Provider,**

Health Plan of Nevada Inc. (HPN) is committed to working with you to provide the highest quality care to our members. In our efforts to provide you and your team with the most accurate plan information we are providing the information below.

HPN is dedicated to providing our Medicaid children with regular, preventive healthcare to ensure they are growing up healthy. As a HPN Medicaid member, children are eligible to receive Early Periodic Screening Diagnosis and Treatment (EPSDT) services. As a HPN Medicaid Provider, we encourage you to complete EPSDT visits with our members, as necessary, according to the recommended periodicity schedule set forth by the American Academy of Pediatrics (AAP). EPSDT visits are recommended at the following ages:

- |            |                             |
|------------|-----------------------------|
| * Newborn  | * 9 Months                  |
| * 1 Month  | * 12 Months                 |
| * 2 Months | * 15 Months                 |
| * 4 Months | * 18 Months                 |
| * 6 Months | * Annually, ages 2-20 years |

**What is an EPSDT visit?**

Early Periodic Screening, Diagnosis and Treatment (EPSDT) can consist of:

- 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.

Following the EPSDT visit, if a referral is needed, a dated written referral should be given to the member, parent/guardian or referral service provider that documents the need for a referral or follow-up.

Additionally, please ensure EPSDT visits are being billed using the most appropriate codes (99381-99385 or 99391-99395) with either modifier EP or TS. Use of modifier EP indicates a routine screening. Use of modifier TS indicates that a referral or follow-up is needed.

**What if I need more information or assistance?**

If you have questions about this communication, received it in error or need assistance with any other item, contact your Provider Advocate directly or call Provider Services at (702) 242-7088 or (800) 745-7065.

Good health takes a good plan.<sup>SM</sup>