When conducting a well-child visit (WCV), a primary care provider (PCP) must perform all components required in a visit and all age-appropriate screenings and/or assessments as required in the DC Medicaid HealthCheck Periodicity Schedule. Covered screening services are medical, developmental/mental health, vision, hearing and dental. The components of medical screening include:

- Comprehensive health and developmental history that assesses for both physical and mental health as well as for substance use disorders
- Comprehensive, unclothed physical examination
- Appropriate immunizations (as established by ACIP)
- Laboratory testing (including blood lead screening appropriate for age and risk factors)
- Health education and anticipatory guidance for both the child and the caregiver.

To bill for a well-child visit:

- Use the age-based preventive visit CPT code and appropriate ICD-10 Code listed in Table 1.
- Bill for each separate assessment/screening performed using the applicable CPT code from Table 2.
- If a screening or assessment is positive use ICD-10 code Z00.121, and if it is an issue that requires follow-up or a referral append modifier TS to the applicable screening code that had a positive result.

DO NOT USE THE E&M OUTPATIENT VISIT CODES (99201-99205; 99213-99215) TO BILL FOR A WCV.

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Table 1: Age Based Preventive Visit CPT Codes

<table>
<thead>
<tr>
<th>Patient’s Age</th>
<th>CPT Code (new/established)</th>
<th>ICD-10 Code</th>
<th>With Abnormal Findings</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1 year</td>
<td>99381/91</td>
<td>Z00.110, Z00.111, Z00.129</td>
<td>Z00.121</td>
</tr>
<tr>
<td>1 – 4 years</td>
<td>99382/92</td>
<td>Z00.129</td>
<td>Z00.121</td>
</tr>
<tr>
<td>5 – 11 years</td>
<td>99383/93</td>
<td>Z00.129</td>
<td>Z00.121</td>
</tr>
<tr>
<td>12 – 17 years</td>
<td>99384/94</td>
<td>Z00.129</td>
<td>Z00.121</td>
</tr>
<tr>
<td>18 – 21 years</td>
<td>99385/95</td>
<td>Z00.00</td>
<td>Z00.01</td>
</tr>
</tbody>
</table>

Table 2: Screening/Assessment CPT Codes

<table>
<thead>
<tr>
<th>Component</th>
<th>CPT Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oral Health Assessment</td>
<td>D0191</td>
</tr>
<tr>
<td>Fluoride Varnish (for children under 3)</td>
<td>99188</td>
</tr>
<tr>
<td>Vision Screening</td>
<td>99173, 99174, 99177</td>
</tr>
<tr>
<td>Hearing Screening</td>
<td>92551, 92552, 92583, 92587, 92568, 92567</td>
</tr>
<tr>
<td>Developmental Assessment</td>
<td>96110</td>
</tr>
<tr>
<td>Behavioral Health Assessment</td>
<td>96127</td>
</tr>
<tr>
<td>Immunizations¹</td>
<td>90460, 90461, 90471, 90472, 90473, 90474</td>
</tr>
</tbody>
</table>

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¹ 90460 is used for the first immunization, 90461 is used for each additional immunization. Only use 90461 in conjunction with 90460. 90460-90461 are appropriate for immunization administration and counseling by physician or LIP (through 18 years of age). If immunization administration and counseling is provided by nurse-use codes 90471 – 90474.
DC EPSDT Well-Child Visit Billing Reference Guide

Notes:
- If an illness, abnormality, or pre-existing condition is encountered and/or addressed during a well-child visit, add the appropriate outpatient service code (99201-99215) to the claim and use the appropriate ICD-10 diagnosis code (not a Z code).

Examples of different billing scenarios:
- **Two Year Old Established Patient**
  - Example: During the 24-month old visit for an established patient all required components of the visit are completed: a physical, an oral health assessment, fluoride varnish application, developmental assessment using a standardized tool, behavioral health assessment using a standardized tool, any needed immunizations, and a blood lead screen. The behavioral health assessment has a positive result and requires a referral to another provider.
  - The visit should be billed for as follows:
    - Preventive medicine visit: CPT Code 99382, Modifier Z00.121
    - Oral Health Assessment: D0191
    - Fluoride Varnish Application: 99188
    - Developmental Assessment: 96110
    - Behavioral Health Assessment: 96127 (TS)
    - Immunization Administration: 90460
    - *Immunization Admin (each additional if warranted): 90461*
    - Blood Lead Screen (from lab): 83655

- **Eight Year Old New Patient**
  - Example: During the 8 year old visit for an established patient all required components of the visit are completed: a physical, vision screening, hearing screening, behavioral health assessment, and any needed immunizations. The screens/assessments did not produce any abnormal results.
  - The visit should be billed for as follows:
    - Preventive medicine visit: CPT Code 99383, Modifier Z00.129
    - Vision Screen: 99173
    - Hearing Screen: 92551
    - Behavioral Health Assessment: 96127
    - Immunization Administration: 90460
    - *Immunization Admin (each additional if warranted): 90461*

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Effective September 28, 2016