

Well-Child Visit Billing Reference Guide

FOR AMERIHEALTH CARITAS DISTRICT OF COLUMBIA PROVIDERS

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 ZOO.121. 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 WELL-CHILD VISIT.

TABLE 1: Age-Based Preventive Visit CPT Codes

Patient's Age	CPT Code (new/established)	ICD-10 Code		
		Without abnormal findings	With abnormal findings	
<1 year	99381/91	Z00.110, Z00.111, Z00.129	Z00.121	
1 – 4 years	99382/92	Z00.129	Z00.121	
5 – 11 years	99383/93	Z00.129	Z00.121	
12 – 17 years	99384/94	Z00.129	Z00.121	
18 – 21 years	99385/95	Z00.00	Z00.01	

TABLE 2: Screening/Assessment CPT Codes

Component	CPT Code	
Oral Health Assessment	D0191	
Fluoride Varnish (for children under 3)	99188	
Vision Screening	99173, 99174, 99177	
Hearing Screening	92551, 92552, 92583, 92587, 92568, 92567	
Developmental Assessment	96110	
Behavioral Health Assessment	96127	
Immunizations [*]	90460, 90461, 90471, 90472, 90473, 90474	
Maternal Depression Screening	96161	

Note: 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).

For billing questions or assistance, please contact your Provider Account Executive or call the Provider Services department at 202–408–2237.

* 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.



Examples of Different Billing Scenarios

• 2-year-old established patient

During the 2-year-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:

Screening	CPT Code	Modifier	ICD-10
Preventive Medicine Visit	99382		ZOO.121
Oral Health Assessment	DO191		
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		

• 8-year-old new patient

During the 8-year-old visit for a new 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:

Screening	CPT Code	Modifier	ICD-10
Preventive Medicine Visit	99383		Z00.129
Vision Screen	99173		
Hearing Screen	92551		
Behavioral Health Assessment	96127		
Immunization Administration	90460		
Immunization Admin* (each additional if warranted)	90461*		

*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.