



Healthchek (EPSDT) Billing Guideline

To receive proper payment for the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services, you must use the appropriate preventive medicine CPT codes, diagnosis codes and EPSDT referral indicators. Molina Healthcare requires the referral field indicator (field 24h) be populated on EPSDT claims. Claims missing this information will be denied.

Electronic Claims

Completion of CRC02 and CRC03 are required for electronic claims. Select the response in Loop 2300 Segment CRC02, “Was an EPSDT referral given to the patient?” as follows:

- Enter “Y” in Loop 2300 Segment CRC02 if the service was an EPSDT, follow-up is required and a referral is made.
- Enter “N” in Loop 2300 Segment CRC02 if the service is an EPSDT and no follow-up services were required.

Paper Claims

Report the referral field indicator in field 24h for EPSDT services as follows:

Lower, Unshaded Area

- Enter “E” if the service was related to EPSDT.
- Enter “F” if the service was related to family planning.
- Enter “B” if the service was related to both EPSDT and family planning.

Select the condition indicators in Loop 2300 Segment CRC03. If response to CRC02 is “N”, use NU (Not Used). If response to CRC02 is “Y”, use one of the following:

- AV (Available – not used)
- S2 (Under treatment)
- ST (New services requested)

Upper, Shaded Area

If either “E” or “B” is entered in the lower, unshaded area, add the appropriate condition indicator in the upper, shaded area using one of the following:

- NU (No EPSDT referral was given)
- AV (Referral was offered, but the individual refused it)
- ST (New services requested)
- S2 (Under treatment)

Note: Use the following diagnosis as well as any specific condition related diagnosis codes, as applicable.

Preventive Medicine
Diagnosis
Age appropriate codes to be billed with a EPSDT (Healthchek) exam
Routine infant (over 28-days-old) and child – well check up to age 17
Health check for child under 8-days-old
Health check for child 8- to 28-days-old
Routine medical exam, age 18 and older
Medical exam for administrative purposes
Medical exam for students, preschool children, occupational or pre-employment exams, armed forces, etc.
Medical exam for surveys
Other medical exam
Preventive Medicine – Individual Counseling
99401 Counseling and risk reduction intervention, 15-minute discussion
99402 Counseling and risk reduction intervention, 30-minute discussion
99403 Counseling and risk reduction intervention, 45-minute discussion
99404 Counseling and risk reduction intervention, 60-minute discussion

Preventive Medicine – Individual Counseling (continued)
99406 Behavior change smoking, three to 10 minutes
99407 Behavior change smoking, >10 minutes
97802 Medical nutrition individual, initial, each 15 minutes
97803 Medical nutrition individual, subsequent, each 15 minutes
97804 Medical nutrition, group (two or more individuals), each 30 minutes
New Patient Services
99381 Initial well child visit, younger than 1-year-old
99382 Initial well child visit, age 1 to 4
99383 Initial well child visit, age 5 to 11
99384 Initial well child visit, age 12 to 17
99385 Initial well child visit, age 18 to 39
99354 Prolonged service, office (additional face-to-face care, 30 to 75 minutes)
99355 Prolonged service, office (additional face-to-face care after 75 minutes)
Established Patient Service
99391 Yearly well child visit, younger than 1-year-old

Established Patient Service (continued)	
99392	Yearly well child visit, age 1 to 4
99393	Yearly well child visit, age 5 to 11
99394	Yearly well child visit, age 12 to 17
99395	Yearly physical exam, age 18 to 39
Hearing Services	
All covered hearing services in accordance with Ohio Administrative Code (OAC) 5160-10-01 and payable per Appendix DD, OAC 5160-1-60	
92551	Hearing test, limited study using headphones to verbally respond to sounds
92552	Hearing test, using earphones and an audiometer, more extensive
92553	Includes 92552 with the addition of sounds conducted through the patient's facial bones
92567	Hearing test to check the eardrums (tympanometry)
92568	Acoustic reflex testing
92570	Acoustic immittance testing
Developmental Screening	
96110	Limited developmental testing
96111	Developmental testing, extended
Dental Services	
Providers are encouraged to refer children to a dentist starting at 2-years-old	
Vision Services	
A vision screening is a required component of the EPSDT visit. Providers are encouraged to refer children for a comprehensive vision examination, when medically necessary.	
Other Physician Services	
All covered physician services in accordance with OAC 5160-4-01, 5160-5-01 or 5160-6-01	
Laboratory Services	
All covered lab services in accordance with OAC 5160-11-01 and payable per Appendix DD, OAC 5160-1-60	
Immunizations	
All covered immunization services in accordance with OAC 5160 as of April 2014	
90471	Vaccine administration, IM, SQ, ID
90472	Vaccine administration, each additional vaccine
90473	Vaccine administration, intranasal or oral
90474	Vaccine administration, each additional vaccine, intranasal or oral
90633	Hepatitis A, pediatric/adolescent, two dose schedule
90634	Hepatitis A, pediatric/adolescent, three dose schedule
90646	HIB, vaccine for booster only (covered by VFC only)
90647	HIB vaccine prp,omp
90648	HIB vaccine prp-t

Immunizations (continued)	
90649	Human papilloma virus (HPV) four valent
90650	HPV two valent
90654	Flu vaccine, split virus, no preserv ID
90655	Flu vaccine, 6 to 35 months of age, no preserv ID (covered by VFC only)
90656	Flu vaccine, no preserv ID, 3 years and older
90657	Influenza, split virus, 6 to 35 months (covered by VFC only)
90658	Flu vaccine, 3 years and older
90660	Flu vaccine, live intranasal
90672	Flu vaccine quad nasal
90673	Flu vaccine trivalent IM
90686	Flu vaccine quad IM, no preserv ID 3 years and older
90688	Flu vaccine quad 3 years and older
90669	Pneumococcal conjugate, polyvalent, under 5-years-old (covered by VFC only)
90670	Pneumococcal vaccine 13 val IM
90680	Rotavirus vaccine (covered by VFC only)
90681	Rotavirus vaccine, live, oral (covered by VFC only)
90696	DTaP IVP (covered by VFC only)
90698	DTaPIPvHIB (covered by VFC only)
90700	DTaP for children younger than 7-years-old (covered by VFC only)
90702	DT for children younger than 7-years-old
90703	Tetanus immunization
90707	MMR immunization
90710	MMRV immunization
90713	Poliomyelitis virus, inactivated, (IPV) subcutaneous (covered by VFC only)
90714	TD preservative free, age 7 and older
90715	TDAP, age 7 and older
90716	Varicella (chickenpox), live
90723	DTaP Hepatitis B, IPV inactivated (covered by VFC only)
90732	Pneumococcal vaccine
90733	Meningococcal vaccine, SQ
90734	Meningococcal vaccine, IM
90744	Hepatitis B vaccine, under age 11 (covered by VFC only)
90748	Hepatitis B HIB, combined vaccine (covered by VFC only)
90664,66,67,68	Flu vaccines, pandemic (covered by VFC only)