

HEDIS MY 2023 PEDIATRIC PROVIDER TOOLKIT



Peach State Health Plan
1-866- 874-0633
pshp.georgia.com

Ambetter from Peach State Health Plan
1-877-687-1180
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What is EPSDT?

The Early and Periodic Screening Diagnostic and Treatment (EPSDT) benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. EPSDT is key to ensuring that children and adolescents receive appropriate preventive, dental, mental health, developmental, and specialty services.

- E** **ARLY:** Assessing and identifying problems early
- P** **ERIODIC:** Checking children's health at periodic, age-appropriate intervals
- S** **CREENING:** Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems
- D** **IAGNOSTIC:** Performing diagnostic tests to follow-up when a risk is identified and,
- T** **REATMENT:** Control, correct or reduce health problems found



SCREENING SERVICES

- Comprehensive health and developmental history
- Comprehensive physical exam
- Appropriate immunizations (according to ACIP)
- Laboratory tests, including lead screening
- Health Education, including anticipatory guidance
- Vision Services
- Dental Services
- Hearing Services
- Other necessary healthcare – diagnostic services and treatment to correct or reduce physical and mental illnesses, and conditions discovered by during screening services



PREVENTIVE CARE/PERIODICITY SCHEDULE RESOURCE INFORMATION

- The Bright Futures/American Academy of Pediatrics (AAP)
- URL: <https://www.aap.org/en/practice-management/care-delivery-approaches/periodicity-schedule/>
- CDC Advisory Committee on Immunizations Practice (ACIP)
- URL: <https://www.cdc.gov/vaccines/acip/recommendations.html>
- Core Set of Children's Health Care Quality Measures for Medicaid and CHIP (Child Core Set)
- URL: <https://www.medicaid.gov/medicaid/quality-of-care/performance-measurement/adult-and-child-health-care-quality-measures/childrens-health-care-quality-measures/index.html>



Well-Child Visits — HEDIS Measures



W30

WELL-CHILD VISIT IN THE FIRST 30 MONTHS OF LIFE

Members who had the following number of well-child visits with a PCP during the last 15 months.

Two reported rates:

- 1. Well-Child Visits in the first 15 months:** Children who turned 15 months old during the measurement year. The member should have 6 or more visits on or before 15 months.
- 2. Well-Child Visits age 15 months – 30 months:** Children who turned 30 months old during the measurement year. The member should have 2 or more visits on or before 30 months.

EPSDT preventive visits that occur at 15 months and 1 day old, will **NOT** count towards W30 for 0 – 15 months HEDIS rates.

→ Helpful Tips

- Members **0 through 30 months** should receive preventive visits throughout the year according to specific timeframe.
- Handouts given to a parent without documentation of discussion does not meet the criteria for health education /anticipatory guidance.
- Document all appropriate screening requirements according to AAP/Bright Futures.
- Perform a well-visit exam during a **follow-up or sick visit** when medically appropriate.
- EPSDT preventative medical visits that occur at 15 months and 1 day old will **not count towards (W30) 0-15 months HEDIS care gap outcomes.**



Members 3–21 years of age who had at least 1 comprehensive Well-Care Visit with a PCP or OB/GYN practitioner during the measurement year.

✓ **Components of comprehensive Well-Care Visit includes:**

- Health history
- Physical developmental history
- Mental developmental history
- Physical exam
- Health education/ anticipatory guidance

→ **Helpful Tips**

- Perform Well-Child Visits during a sports physical visit. Use the appropriate CPT and ICD-10 codes to ensure HEDIS care gap outcomes
- A handout given to a parent without documentation of a discussion does not meet the criteria for health education /anticipatory guidance.
- During every visit, it is important to discuss weight, BMI, nutrition counseling, and the importance of physical activity.

✱ **Appropriate Codes for W30 and WCV HEDIS Measure**

Preventative Visits

CPT	New Patient	CPT	Established Patient	Modifier
99381	Age < 1 year	99391	Age < 1 year	EP
99382	Age 1 – 4	99392	Age 1 – 4	EP
99383	Age 5 -11	99393	Age 5 – 11	EP
99384	Age 12 – 17	99394	Age 12 – 17	EP
99385	Age 18 – 21	99395	Age 18 – 21	EP
ICD-10 – CM Codes with Age parameters				
Z00.110		Age: 0 – 7 days		
Z00.111		Age: 8 – 28 days		
Z00.121 or Z00.129		Age: 29 day – 14 years		
Z00.121 or Z00.129 Z00.00 or Z00.01		Age: 15 years – 17 years		
Z00.00 or Z00.01		Age: 18 years – 20 years		
Z02 – Z02.89		Age: 0 – 20 years		

Codes subject to change..

→ Helpful Tips

- Documentation must include patient's height, weight, and BMI percentile notated in the medical record or plotted on a BMI age growth chart.
- Use every office visit (including sick visits) as an opportunity to provide education on physical activity, nutrition counseling, and BMI percentile calculations.
- Use appropriate CPT/ICD-10 codes to ensure HEDIS care gaps outcomes. This reduces medical record/chart review.

**WCC**

WEIGHT ASSESSMENT AND COUNSELING FOR NUTRITION PHYSICAL ACTIVITY FOR CHILDREN/ADOLESCENTS

Members 3–17 years of age who had an outpatient visit with a PCP or OB/GYN and who had evidence of the following during the measurement year:

- BMI Percentile documentation*
- Counseling for Nutrition
- Counseling for Physical Activity

**Because BMI norms for youth vary with age and gender, this measure evaluates whether BMI percentile is assessed rather than an absolute BMI value.*

* Appropriate Codes for WCC HEDIS Measure

Description	ICD-10-CM - Codes	CPT - Codes	HCPCS Codes
BMI percentile (use for 2–20 years of age)	Z68.51 - Z68.54		
Encounter for examination of participation in sport	Z02.5		
Exercise counseling	Z71.82		
Nutrition Counseling	Z71.3	97802, 97803, 97804	G0270, G0271, G0447, S9449, S9452, S9470

Codes subject to change.

→ Helpful Tips

- Documentation must include patient's height, weight, and BMI percentile notated in the medical record or plotted on a BMI age growth chart.
- Use every office visit (including sick visits) as an opportunity to provide education on physical activity, nutrition counseling, and BMI percentile calculations.
- Use appropriate CPT/ICD-10 codes to ensure HEDIS care gaps outcomes. This reduces medical record/chart review

GROWTH CHART BMI -AGE – PERCENTILE – BOYS:

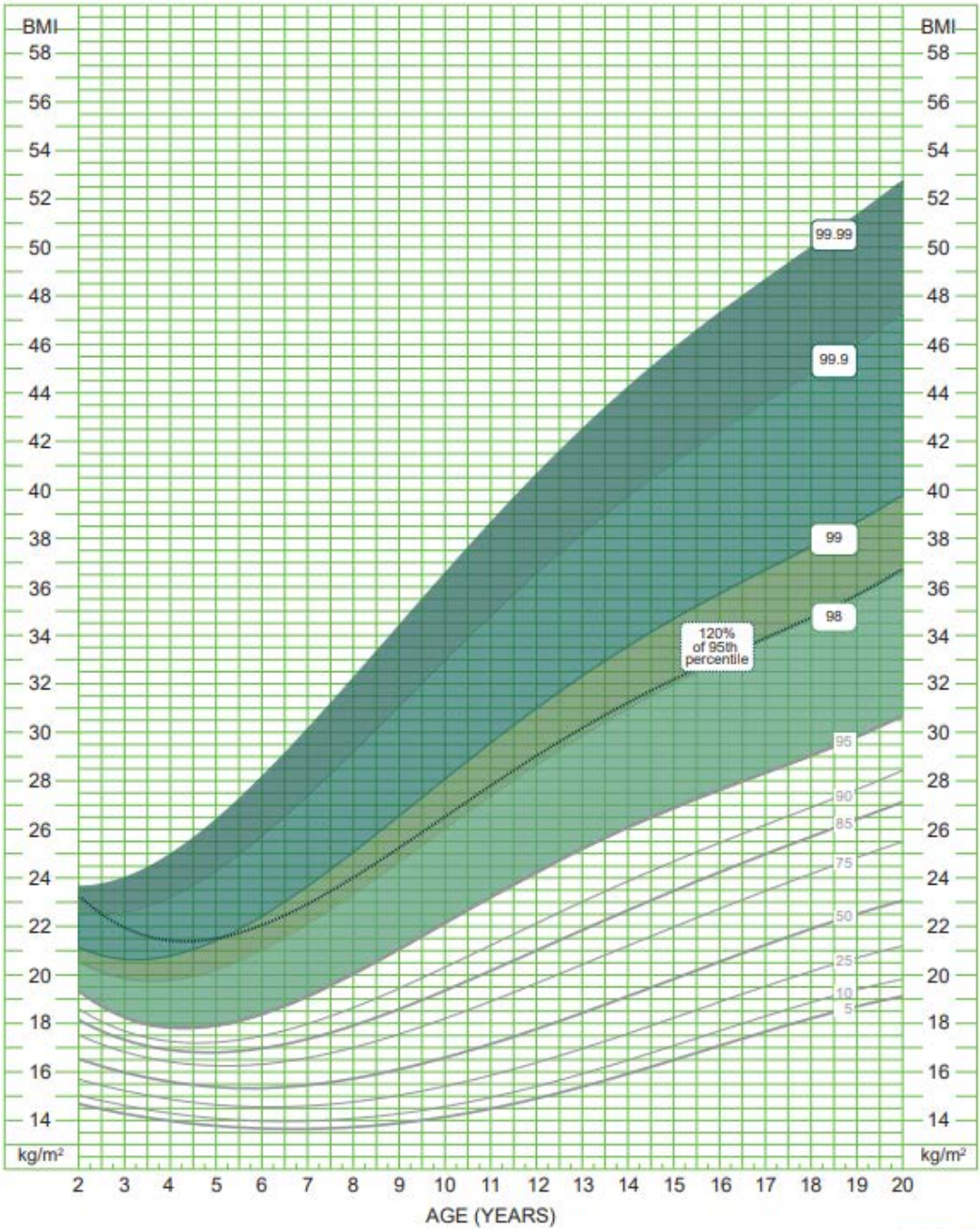
Boys: Ages 2–20 Years Body Mass Index-for-age Percentiles Printable Chart (cdc.gov)

Boys: Ages 2–20 years

Body mass index-for-age percentiles

NAME _____

RECORD # _____



December 15, 2022.
Data source: National Health Examination Survey and National Health and Nutrition Examination Survey.
Developed by: National Center for Health Statistics in collaboration with National Center for Chronic Disease Prevention and Health Promotion, 2022.
CG333338



GROWTH CHART BMI -AGE – PERCENTILE – GIRLS:

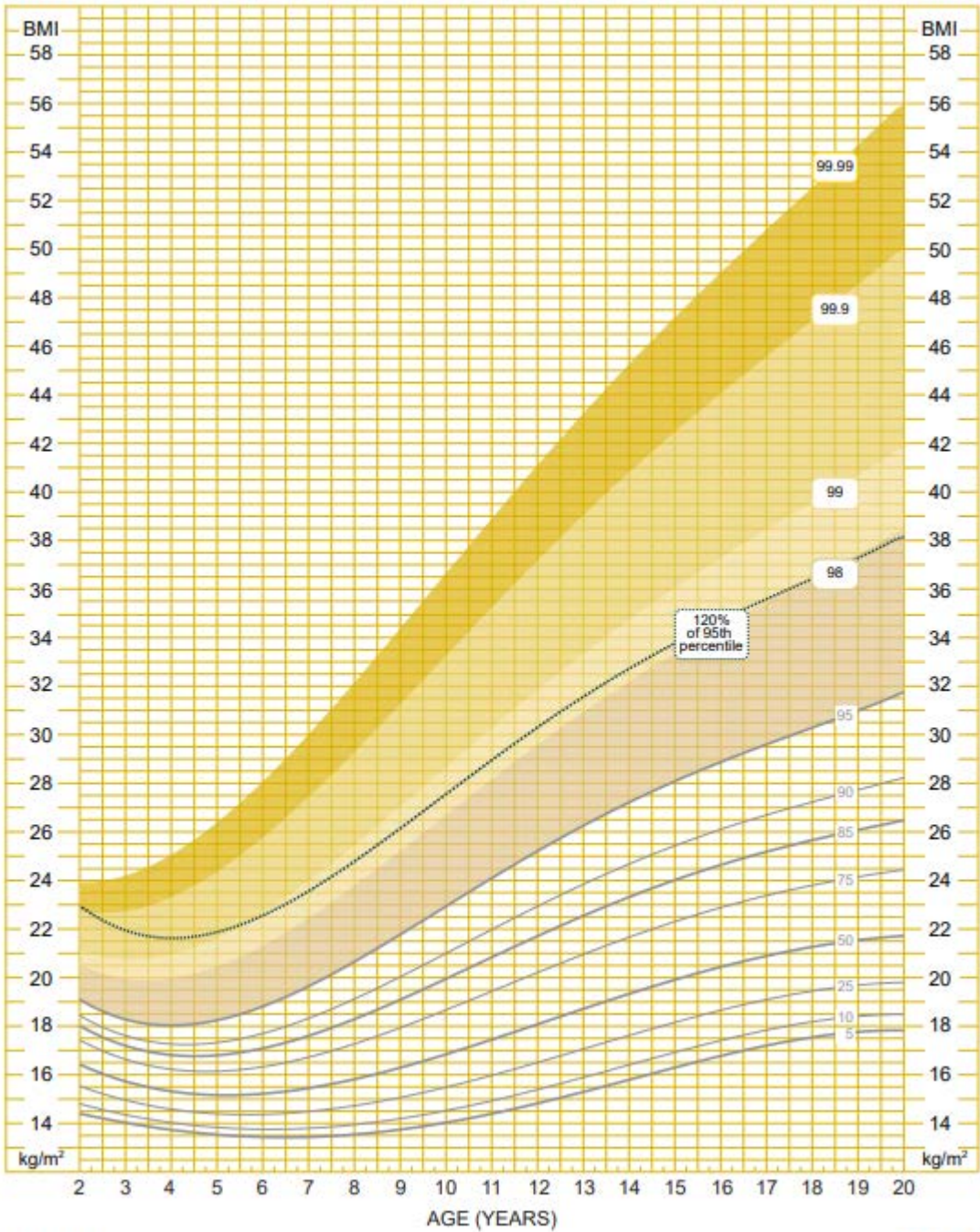
[Girls: Ages 2–20 Years Body Mass Index-for-age Percentiles Printable Chart \(cdc.gov\)](#)

Girls: Ages 2–20 years

Body mass index-for-age percentiles

NAME _____

RECORD # _____



December 15, 2022
Data source: National Health Examination Survey and National Health and Nutrition Examination Survey.
Developed by: National Center for Health Statistics in collaboration with National Center for Chronic Disease Prevention and Health Promotion, 2022.
CS220334





If a patient presents with an abnormality(ies) or a preexisting problem during the EPSDT Periodic Visit and it is significant enough to require additional work; perform the key components of a problem-oriented E/M (evaluation and management) service, using the following:

*** Appropriate Codes for EPSDT and Sick Visit Same Day**

New patient: EPSDT Periodic Visit and Sick Visit on Same Day

Description	CPT Code	ICD-10 CM Codes
Preventive Visit	99381-99385 Modifier: EP	Z00.110, Z00.111, Z00.121, Z00.129, Z000.00, Z00.01, Z02.0 – Z02.89
E/M – Office/Outpatient Visit	99211 or 99212 Modifier: 25	*Use applicable diagnosis code for a sick visit

Established Patient: EPSDT Periodic Visit and Sick Visit on Same Day

Description	CPT Code	ICD-10 CM Codes
Preventive Visit	99391-99395 Modifier: EP	Z00.110, Z00.111, Z00.121, Z00.129, Z000.00, Z00.01, Z02.0 – Z02.89
E/M – Office/Outpatient Visit	99211 or 99212 Modifier: 25	*Use applicable diagnosis code for a sick visit

For guidelines reference Department of Community Health: EPSDT Services—Health Check Program Manual for additional information www.mmis.georgia.gov



Peach State Health Plan will reimburse our primary care providers (PCPs) for performing sports physicals for our members 8 to 18 years old when the Well-Check Screening service is performed on the same date of service or for members who are current on their EPSDT Periodic Health Screening.

- If the member is scheduled for a Well Child Visit and needs a Sports Physical Exam on the same day report the following when submitting a claim

*** Appropriate Codes for Well Child Visit and Sports Physical Exam**

Member requires both a Well Child Visit and Sports Physical Exam – Same Day

Description	CPT Code	ICD-10 CM Codes
Well Child Visit	99383-99385 or 99393-99395 Modifier: EP	Z00.121, Z00.129
Sports Physical Exam	99212 Modifier: 25	Z02.5

- If the member is up to date with their EPSDT Periodic Health Screening perform a Sports Physical Exam and submit a claim with appropriate codes.

Sports Physical Exam only for members up to date with EPSDT Periodic Health Screening

Description	CPT Code	ICD-10 CM Codes
Sports Physical Exam	99212 Modifier: 25	Z02.5

Note: This is a Peach State Health Plan Value Added Benefit which is subject to change.



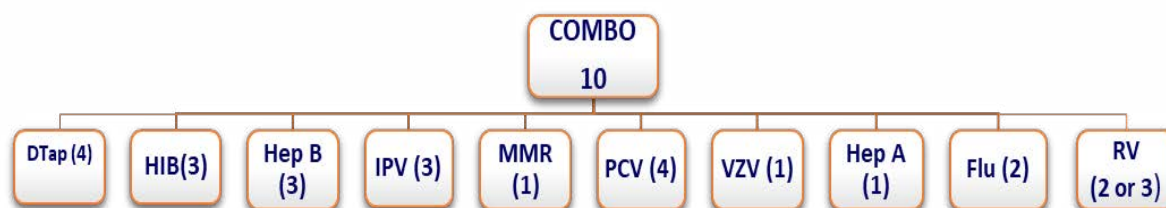
Immunizations



CIS

CHILDHOOD IMMUNIZATION STATUS

Children 2 years of age who had the recommended vaccines by their second birthday.



The measure calculates a rate for each vaccine and three combination rates.

* Appropriate Codes for CIS HEDIS Measure

Immunizations

Vaccine	CPT - Codes
DTap	90697, 90698, 90700, 90723
PV	90697, 90698, 90713, 90723
MMR	90707, 90710
Hib	90644, 90647, 90648, 90697, 90698, 90748
HepB	90697, 90723, 90740, 90744, 90747, 90748
VZV	90710, 90716

Vaccine	CPT - Codes
PCV	90670
HepA	90633
RV – 2 doses	90681
RV – 3 doses schedule	90680
FLU – 2 doses	90655, 90657, 90661, 90673, 90685-90689

Codes subject to change.

The appropriate vaccine administration codes, when administering VFC vaccines, as they apply:

CPT	Description
90460	Immunization administration through 18 years of age via any route of administration with counseling by physician or other qualified healthcare professional; first or only component of each vaccine or toxoid administered
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/ toxoid)
90472	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); one vaccine (single or combination vaccine/ toxoid) each additional vaccine (single or combination vaccine/ toxoid) List separately in addition to code for primary procedure
90473	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/ toxoid)
90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/ toxoid) List separately in addition to code for primary procedure

For guidelines reference Department of Community Health: EPSDT Services—Health Check Program Manual for additional information www.mmis.georgia.gov

→ Helpful Tips

- Timely submission of claims and encounter data to capture gap closure.
- Notate the name of the antigen and the date of the immunization.
- Document if the member received the immunization “at delivery” or “in the hospital” meet the criteria (e.g., Hep B).
- Overdue immunization and lead testing can be administered during a sick visit when medically appropriate.
- Anaphylaxis due to vaccine is numerator compliant for DTaP, HepB, HiB, and Rotavirus.
- Encephalitis due to vaccine is numerator complaint for DTaP only
- Document Anaphylactic reaction due to vaccination:
 - ▶ **Submit ICD-10-CM codes T80.52XA, T80.52XD, or T80.52XSZ**

Note:

- If the child is 2 years and 1 day old when services are rendered the member is non-compliant for HEDIS ratings.
- A Parent/guardian refusal of vaccinations is not a valid exclusion for HEDIS standards.

For additional information please reference The Centers for Disease Control and Prevention at: [Birth-18 Years Immunization Schedule – Healthcare Providers | CDC](#)

2023 Recommended Immunizations for Children from Birth Through 6 Years Old											
VACCINE	Birth	1 MONTH	2 MONTHS	4 MONTHS	6 MONTHS	12 MONTHS	15 MONTHS	18 MONTHS	19–23 MONTHS	2–3 YEARS	4–6 YEARS
HepB Hepatitis B	HepB	HepB			HepB						
RV* Rotavirus			RV	RV	RV*						
DTaP Diphtheria, Pertussis, & Tetanus			DTaP	DTaP	DTaP			DTaP			DTaP
Hib* Haemophilus influenzae type b			Hib	Hib	Hib*		Hib				
PCV13, PCV15 Pneumococcal disease			PCV	PCV	PCV		PCV				
IPV Polio			IPV	IPV		IPV					IPV
COVID-19** Coronavirus disease 2019								COVID-19**			
Flu† Influenza								Flu (One or Two Doses Yearly)†			
MMR Measles, Mumps, & Rubella						MMR					MMR
Varicella Chickenpox						Varicella					Varicella
HepA* Hepatitis A						HepA*		HepA*			

FOOTNOTES

RV*

Hib*

Administering a third dose at age 6 months depends on the brand of Hib or rotavirus vaccine used for previous dose.

COVID-19**

Number of doses recommended depends on your child's age and type of COVID-19 vaccine used.

Flu†

Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HepA*

Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

ADDITIONAL INFORMATION

1. If your child misses a shot recommended for their age, talk to your child's doctor as soon as possible to see when the missed shot can be given.

2. If your child has any medical conditions that put them at risk for infection (e.g., sickle cell, HIV infection, cochlear implants) or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.

Talk with your child's doctor if you have questions about any shot recommended for your child.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

FOR MORE INFORMATION
Call toll-free: 1-800-CDC-INFO (1-800-232-4636)
Or visit: cdc.gov/vaccines/parents

American Academy of Pediatrics
DEDICATED TO THE HEALTH OF ALL CHILDREN®

Continued --

Recommended Vaccines

Vaccine	7 Years	8 Years	9 Years	10 Years	11 Years	12 Years	13 Years	14 Years	15 Years	16 Years	17 Years	18 Years
COVID-19* Coronavirus disease 2019	COVID-19*											
Flu** Influenza	Flu (One or Two Doses Yearly)**		Flu (One Dose Yearly)									
Tdap Tetanus, Diphtheria, & Pertussis					Tdap							
HPV† Human papillomavirus					HPV†							
MenACWY Meningococcal disease					MenACWY					MenACWY		
MenB Meningococcal disease										MenB		

Catching Up On Missed Childhood Vaccination†

Vaccine	7 Years	8 Years	9 Years	10 Years	11 Years	12 Years	13 Years	14 Years	15 Years	16 Years	17 Years	18 Years
MMR Measles, Mumps, & Rubella	MMR											
Varicella Chickenpox	Varicella											
HepA Hepatitis A	HepA											
HepB Hepatitis B	HepB											
IPV Polio	IPV											

Key



Indicates when the vaccine is recommended for all children unless your doctor tells you that your child cannot safely receive the vaccine.



Indicates the vaccine series can begin at this age.



Indicates the vaccine **should** be given if a child is catching up on missed vaccines. A vaccine series does not need to be restarted, regardless of the time that has elapsed between doses.



Indicates children not at increased risk **may** get the vaccine if they wish after speaking to a provider.



The percentage of adolescents 13 years of age who completed immunizations on or before the member's 13th birthday.

The measure calculates a rate for each vaccine and two combination rates.



*The following criteria meet HPV HEDIS standards

- Two HPV doses **146 days apart** OR **three** HPV doses with different dates of service between the member's **9th** and **13th** birthday

* *Appropriate Codes for IMA HEDIS Measure*

Vaccine	CPT - Codes
Meningococcal	90619, 90733, 90734
Tdap	90715
HPV	90649 - 90651

Codes subject to change.

→ *Helpful Tips*

- Timely submission of claims and encounter data to capture gap closure.
- Notate the name of the antigen and the date of the immunization.
- Anaphylaxis due to vaccine is numerator compliant for any of the antigens.
- Document Anaphylaxis reaction and code appropriately:
 - ▶ **Submit ICD-10-CM codes: T80.5XA, T80.52XD, or TX80.52XS**

Note:

- If the child is 13 years and 1 day old when services are rendered the member is **non-compliant for HEDIS ratings**.
- Schedule a nurse-only immunization visit to ensure member has received 2nd HPV or other vaccines on or before 13th birthday.



LSC

LEAD SCREENING IN CHILDREN

Children 2 years of age who had one or more capillary or venous lead blood tests for lead poisoning by their second birthday.

* *Appropriate Code for LSC HEDIS Measure*

Description	CPT
Lead Screening	83655

Codes subject to change.

→ *Helpful Tips*

- Lead screening must be performed on or before the child's 2nd birthday to be compliant.
- Check for compliance with immunizations and lead screening at an 18-month well-child visit before 2 years old.
- A lead risk assessment does not satisfy the venous blood lead requirement for Medicaid members regardless of the risk score.
 - ▶ EPSDT: Blood lead testing is required at 12 months and 24 months for all Medicaid-eligible children regardless of the responses to the questions in the lead screening assessment.
- If using a Certified Lead Analyzer, then bill with the appropriate CPT code 83655.



OED

ORAL EVALUATION, DENTAL SERVICES

The percentage of members under 21 years of age who received a comprehensive or periodic oral evaluation with a dental provider during the measurement year.

* *Appropriate Codes for OED HEDIS Measure*

Description	ADA Codes
Periodic exam – established patient	D0120
Comprehensive Oral Evaluation, new or established patient	D0150
Patients under three years old, reported for the first, and any subsequent evaluation until child reaches the age 3	D0145

Codes subject to change.

→ Helpful Tips

- Educate the parent/caregiver on the importance of good oral health. Encourage them to start early and establish a primary dental provider (PDP) for Oral Evaluation and Dental Services.
- Refer patient to schedule with their Primary Care Dental Provider for dental services.
- Advise the parent to contact Peach State Health Plan or access to our website: www.pshp.com to “Find a Doctor” in their area with convenient office hours.
- Federally Qualified Health Centers (FHQC) and Rural Health Clinics/Centers (RHC) can serve as a Primary Care Dental Home.



TFC

TOPICAL FLUORIDE FOR CHILDREN

Members 1 to 4 years of age who received during the measurement year.

* Appropriate Codes for TFC HEDIS Measure

Description	CPT Code
Application of fluoride varnish by a primary care provider (PCP) during an EPSDT visit	99188

Codes subject to change.

→ Helpful Tips

- Primary care setting can start applying fluoride varnish with the first tooth eruption and apply it every 3- 6 months.
- Fluoride is essential for preventing dental caries and tooth decay.
- Perform an Oral Health Risk Assessment to determine any risk factors.
- Educate the parent/caregiver on the importance of good oral health. Encourage them to start early and establish a primary dental provider (PDP) for Oral Evaluation and Dental Services.
- Educate the parent on how to clean all surfaces of the teeth and gums twice a day, in the morning and before going to bed.



Developmental Screening



DEV-CH

DEVELOPMENTAL SCREENING IN THE FIRST THREE YEARS OF LIFE

A Developmental Screening using a **STANDARDIZED DEVELOPMENTAL SCREENING TOOL** must be performed at **9 months, 18 months, and 30 months** during a preventive Well Child Visit. **Tools must meet the following criteria:**

a. Developmental domains:

The following domains must be included in the standardized developmental screening tool:

- motor (fine and gross)
- cognitive
- language
- social-emotional

b. Established reliability: Reliability scores of approximately 0.70 or above.

c. Established findings regarding the validity: Validity scores for the tool must be approximately 0.70 or above. Measures of validity must be conducted on a significant number of children and using an appropriate standardized developmental or social-emotional assessment instrument(s).

d. Established sensitivity/specificity: Sensitivity and specificity scores of approximately 0.70 or above.

The following tools meet the above criteria and are included in the Bright Futures Recommendations for Preventive Care, which reference the updated January 2020 American Academy of Pediatrics (AAP) Statement:

Acceptable Screening Tools

- Ages and Stages Questionnaire - 3rd Edition (ASQ-3) – 1- 6 months
- Battelle Developmental Inventory Screening Tool (BDI-ST) - Birth to 95 months
- Bayley Infant Neurodevelopmental Screen (BINS) - 3 months to 2 years
- Brigance Screens-II - Birth to 90 months

- Child Development Inventory (CDI) - 18 months to 6 years
- Infant Development Inventory - Birth to 18 months
- Parents' Evaluation of Developmental Status (PEDS) - Birth to 8 years
- Parents' Evaluation of Developmental Status – Developmental Milestones (PEDS-DM)
- Survey of Well-being of Young Children (SWYC) – 1 to 65 months

Standardized tools focused on one domain, such as: M-CHAT, and ASQ-SE (social-emotional) are **NOT ACCEPTABLE**.

To meet requirements providers performing a developmental screening must bill CPT code **96110 with the EP modifier and the appropriate preventive ICD-10-CM code**. The provider can also send in medical records that indicate a date on which the test was performed, the **standardized tool used**, and evidence of a **screening result or score**.

Documentation

Evidence of the screening. Documentation in the medical record must include all the following: a note indicating the date on which the screening was performed; a copy of the completed standardized tool used; and documented evidence of a screening result or screening score. If indicated, document the follow-up assessment, therapeutic interventions used, referrals made, and treatments received.

Pediatric Care Resources and Tools

Source	Website
Georgia Department of Human Services	Georgia Department of Human Services
Medicaid EPSDT Program	Early and Periodic Screening, Diagnostic, and Treatment Medicaid
Ages and Stages Questionnaires (a fee may be associated)	ASQ-3 - Ages and Stages
American Academy of Family Physicians (AAFP)	Home AAFP
American Academy of Pediatrics – assessments, patient education, forms and other information	Bright Futures (aap.org)
Centers for Disease Control and Prevention (CDC) Growth and BMI charts	Growth Charts - Clinical Growth Charts (cdc.gov)
Health Resources and Service Administration (HRSA), Maternal and Child Health	Early Periodic Screening, Diagnosis, and Treatment MCHB (hrsa.gov)
Georgia Breastfeeding Coalition	Georgia Breastfeeding Coalition
March of Dimes	Help us improve the health of all moms and babies March of Dimes

Modified Checklist for Autism in Toddlers (M-CHAT) autism screening tool	https://www.aap.org/en/patient-care/screening-technical-assistance-and-resource-center/screening-tool-finder/modified-checklist-for-autism-in-toddlers-m-chat-rf/
National Domestic Violence Hotline	https://www.thehotline.org/ Hotline: 1-800-799-7233
CDC, Immunization Schedules	Immunization Schedules for Healthcare Professionals CDC
CDC, National Immunization Program	Vaccines and Immunizations CDC
Immunization Action Coalition	Immunization Action Coalition (IAC): Vaccine Information for Health Care Professionals (immunize.org)
Georgia Registry of Immunization Transactions and Services (G.R.I.T.S.)	Georgia Registry of Immunization Transactions and Services (state.ga.us)
Vaccine Safety	Home - Institute for Vaccine Safety



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