

Pediatric Screening Tool



Pediatric Screenings	CPT Code	CPT Description	Age Restriction	Frequency	Modifiers	Standardized Tests Used	Healthy Steps	Rules
Developmental Screening	96110	Developmental screening (eg, developmental milestone survey, speech, and language delay screen), with scoring and documentation, per standardized instrument	9, 18, 30 months and when medically indicated	Payable twice in a 12-month period		ASQ-3, PEDS, PEDS-DM, SWYC, BDI-ST, BINS, CDI	YES	Ages 0-5 when medically indicated up to twice a year
Autism Spectrum Disorder Screening	96110	Developmental screening (eg, developmental milestone survey, speech, and language delay screen), with scoring and documentation, per standardized instrument	18, 24 months	Payable twice in a 12-month period	КХ	MCHAT	YES	Can be billed in same day with developmental screening
Developmental Surveillance	N/A	The AAP recommends that routine developmental surveillance occur at every preventive visit. This surveillance is not separately reimbursable when billing for the appropriate preventive visit E&M code.						
Psychosocial/Behavioral Assessment	96127	Brief emotional/behavioral assessment (e.g., depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument	None	2 per day, per provider	N/A	ASQ-SE-2	YES	As medically necessary

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Tobacco, Alcohol, or Drug Use Assessment*	G0442	Annual alcohol misuse screening, 15 minutes	11 and up	1 per 12- month period	N/A	DAST-10, DAST- 20, AUDIT, AUDIT-C, CRAFFT (non-pregnant adolescents), CAGE-AID, TAPS, NIDA (adults), 4P (pregnant women and adolescents)		When initial brief screening tool is positive, use a validated screening tool like NM-ASSIST, DAST-20, AUDIT * G0442 is reimbursable when the single NIDA Quick Screen is used
Tobacco, Alcohol, or Drug Use Assessment cont.*	H0049	Alcohol and/or drug screening	11 and up	1 per 12- month period, per vendor	N/A	DAST-10, DAST- 20, AUDIT, AUDIT-C, CRAFFT, CAGE-AID,		When initial brief screening tool is positive, use a validated screening tool like NM-ASSIST, DAST-20, AUDIT
	H0050	Alcohol and/or drug services, brief intervention, per 15 minutes	18 and up	Up to 12 services per 12 mo	N/A	DAST-10, DAST- 20, AUDIT, AUDIT-C, CRAFFT, CAGE-AID,		When initial brief screening tool is positive, use a validated screening tool like NM-ASSIST, DAST-20, AUDIT
Depression Screening**	G8431	Screening for depression is documented as being positive and a follow-up plan is documented	12 and up	1 per year	N/A	PHQ-2, PHQ-9, BDI, GDS, EPDS		Modifier U1 for screenings on dyadic caregivers
	G8510	Screening for depression is documented as negative, a follow-up plan is not required	12 and up	1 per year	N/A	PHQ-2, PHQ-9, BDI, GDS, EPDS		Modifier U1 for screenings on dyadic caregivers
Maternal Depression Screening**	G8431	Screening for depression is documented as being positive and a follow-up plan is documented	Pregnant, postpartum and at the Infants 1mo, 2mo, 4mo, 6mo visits	See rules	N/A	EDPS, PHQ-9, Beck Depression Inventory, Beck Depression Inventory-II, Center for	YES	Can be billed once during pregnancy and once during postpartum And then billed under baby's Medi-Cal ID at

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						Epidemiologic Studies Depression Scale, and Zung Self- rating Depression Scale		Infants 1mo, 2mo, 4mo, 6mo visits
	G8510	Screening for depression is documented as negative, a follow-up plan is not required	Pregnant, postpartum and at the Infants 1mo, 2mo, 4mo, 6mo visits	See rules	N/A	EDPS, PHQ-9, Beck Depression Inventory, Beck Depression Inventory–II, Center for Epidemiologic Studies Depression Scale, and Zung Self- rating Depression Scale	YES	Can be billed once during pregnancy and once during postpartum And then billed under baby's Medi-Cal ID at Infants 1mo, 2mo, 4mo, 6mo visits
SDOH	N/A	DHCS SDOH APL 21-009	N/A	N/A	N/A	PRAPARE	YES	ICD-10 used to report
ACE	G9919	Screening performed and positive and provision of recommendations	0-21 and 21 and up	1 per year	N/A	ACE Screening	YES	Payable once a year under age 21. 21 and up payable once in a lifetime. Provider must self-attested to the completion of the DHCS ACEs training before billing.
	G9920	Screening performed and negative	0-21 And 21 and up	1 per lifetime	N/A	ACE Screening	YES	Payable once a year under age 21. 21 and up payable once in a lifetime. Provider must self-attested to the completion of the

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								DHCS ACEs training before billing.
ВМІ	N/A	Z68.51 Body mass index (BMI) pediatric, less than 5th percentile for age	0-17 years		N/A	N/A		May not be listed as a primary diagnosis
		Z68.52 Body mass index (BMI) pediatric, 5th percentile to less than 85th percentile for age	0-17 years		N/A	N/A		May not be listed as a primary diagnosis
		Z68.53 Body mass index (BMI) pediatric, 85th percentile to less than 95th percentile for age	0-17 years		N/A	N/A		May not be listed as a primary diagnosis
		Z68.54 Body mass index (BMI) pediatric, greater than or equal to 95th percentile for age	0-17 years		N/A	N/A		May not be listed as a primary diagnosis
Medical Nutrition Therapy	97802	Medical Nutrition Therapy; Initial Assessment and Intervention, Individual, Face- To-Face with The Patient, Each 15 Minutes	N/A	12 allowed in 12 mo	N/A	N/A	YES	Billed with diagnosis Z71.3 and/or Z71.82 Adults with cardiovascular risk
	97803		N/A N/A	N/A	YES	E66.01, E66.3, E66.9, E78.0-E78.5 I10-I15.9, I67.4 Z68.41, Z68.42, Z82.49, Z87.891		
	97804	Medical Nutrition Therapy; Group (2 Or More Individual(s)), Each 30 Minutes	N/A	12 allowed in 12 mo	N/A	N/A	YES	
Hearing +	92551	Screening test, pure tone, air only	0-21 years	Payable 1 per day	N/A	N/A		Diagnosis requirements

Age

Standardized

Healthy

CPT

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	92552	Pure tone audiometry	0-21 years	Payable 1	N/A	N/A		Z00.121, Z00.129,
		(threshold); air only		per day				Z01.10 or Z01.11
Vision ++	N/A	Considered a Routine component of	N/A	N/A	N/A	N/A		99173 may be payable for some
		a well-child exam						providers.
Lead	83655	Lead	N/A	Payable 1 per day	QW	N/A		Billed by laboratory or by CLIA-waived provider with CLIA-waived test kit using modifier QW. Blood Lead screening test to be performed at 12 months, 24 months and between 24-72 months with no documented lead test. Anticipatory guidance provided between 6mo through 72 months
ТВ	86580	Skin test; tuberculosis, intradermal	6mo-72mo	Payable 1 per day		N/A		amougn / 2 monans
Fluoride Varnish	99188	Application of topical fluoride varnish by a physician or other qualified health care professional	Up to 5 years	3 per 12- month period	N/A	N/A		Billed with diagnosis Z00.129, Z13.84 Personnel must be legally permitted to apply fluoride varnish.

^{*}Reimbursable to physicians, physician assistants, nurse practitioners, certified nurse midwives, licensed midwives, licensed clinical social workers, licensed professional clinical counselors, psychologists and licensed marriage and family therapists

CMS CDF Child measure "Adolescent Screening Tools (12-17 years)": Patient Health Questionnaire for Adolescents (PHQ-A), Beck Depression Inventory-Primary Care Version (BDI-PC), Mood Feeling Questionnaire (MFQ), Center for Epidemiologic Studies Depression Scale (CES-D), Patient Health Questionnaire (PHQ-9), Pediatric Symptom Checklist (PSC-17), and PRIME MD-PHQ2

^{**} CMS CDF Adult measures states these tools for "18 yr+ "= Patient Health Questionnaire (PHQ-9), Beck Depression Inventory (BDI or BDI-II), Center for Epidemiologic Studies Depression Scale (CES-D), Depression Scale (DEPS), Duke Anxiety- Depression Scale (DADS), Geriatric Depression Scale (GDS), Cornell Scale for Depression in Dementia (CSDD), PRIME MD-PHQ2, Hamilton Rating Scale for Depression (HAM-D), and Quick Inventory of Depressive Symptomatology Self-Report (QID-SR).

Both Adult and Child CDF measures state "Perinatal Screening Tools": Edinburgh Postnatal Depression Scale, Postpartum Depression Screening Scale, Patient Health Questionnaire 9 (PHQ-9), Beck Depression Inventory, Beck Depression Inventor

- + Screen with audiometry including 6,000 and 8,000 Hz high frequencies once between 11 and 14 years, once between 15 and 17 years, and once between 18 and 21 years. See "The Sensitivity of Adolescent Hearing Screens Significantly Improves by Adding High Frequencies"
- ++ A visual acuity screen is recommended at ages 4 and 5 years, as well as in cooperative 3-year-olds. Instrument-based screening may be used to assess risk at ages 12 and 24 months, in addition to the well visits at 3 through 5 years of age. See "Visual System Assessment in Infants, Children, and Young Adults by Pediatricians

Medi-Cal Guidelines:

https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/prev.pdf https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/eval.pdf

SDOH APL (ICD10):

https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2021/APL21-009.pdf

Bright Futures:

https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf

ACEs

https://www.acesaware.org/

https://www.acesaware.org/learn-about-screening/billing-payment/

https://www.medi-cal.ca.gov/TSTA/TSTAattest.aspx

Dyadic Caregiver

https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/nonspecmental.pdf

Lead

https://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2020/APL20-016.pdf

Additional Resources

Social Emotional Tools – Healthcare Provider Developmental Screening (cascreenbto5.org)

https://downloads.aap.org/AAP/PDF/coding_factsheet_developmentalscreeningtestingandEmotionalBehvioraassessment.pdf?_ga=2.131547215.1122463277.1655087352-974186796.1654882403

https://downloads.aap.org/AAP/PDF/Coding%20Preventive%20Care.pdf