To: All Indiana Health Coverage Programs Acute Care Hospitals, Federally Qualified Health Clinics, Rural Health Clinics, Medical Clinics, Title V Clinics, Pediatric Nurse Practitioners, Family Nurse Practitioners, County Health Departments, Family Practice Physicians, General Practice Physicians, Internists, Pediatricians, and General Pediatric Providers

Subject: Documentation of Early and Periodic Screening, Diagnosis, and Treatment (HealthWatch) Screening Exams

Overview

HealthWatch, Indiana’s Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program, is a preventive health care program designed to improve the overall health of Indiana Health Coverage Programs (IHCP)-eligible infants, children, and adolescents (excluding those enrolled in the 590 Program). The goal of the program is to identify health problems and treat them early to reduce the risk of costly treatment or hospitalization later.

For a provider to receive the higher EPSDT reimbursement rate for initial and subsequent HealthWatch/EPSDT screens, EPSDT services must be adequately documented in patient records. No special forms are required. However, providers have requested examples of forms or checklists that may be used to document provision of EPSDT screen components. The following examples may be adapted to suit documentation needs for EPSDT services. The IHCP recognizes that providers use various methods for documenting patient care and does not require the use of any specific form for chart documentation.
This bulletin addresses the components of care, the suggested practice guidelines for each component, and a list of available forms and resources to assist with patient record documentation.

This bulletin includes the following sections that describe each group component of care and the suggested practice guidelines when administering the care.

- Physical (Core) Components of Care
- Preventive Components of Care
- Additional Components of Care

Additional detail and screening techniques for each component are discussed in the HealthWatch Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Provider Manual. The periodicity for each procedure is listed in Appendix 1 of the manual.

**Physical (Core) Components of Care**

**General Physical Examination** – At each visit, a complete physical examination is essential. Infants must be totally unclothed and older children must be undressed and suitably draped. A general physical examination includes screening for the following:

- General appearance and behavior
- Skin and hair
- Head
- Face
- Eyes
- Ears

**Measurements** – The following measurements are required at each visit for all ages:

- Height
- Weight
- Weight for height
- Head circumference (birth through two years old)
- Blood pressure (older than four years old)
Preventive Components of Care

- Development and behavior assessment, and physical examination that includes the following procedures:
  - Immunization (Reminder: record of immunizations must be included in chart even if given by another provider.)
  - Lead screening
  - Hematocrit or Hemoglobin
  - Urinalysis
- Vision observation
- Hearing observation
- Dental observation
- Anticipatory guidance that includes the following:
  - Age-appropriate disease and injury prevention
  - Newborn infant screen

Additional Components of Care

- Nutritional status – All ages
- Tuberculin skin test – Infants only
- Hearing-audiometric testing – Children and adolescents
- Vision referral – Children and adolescents
- Dental referral – Children and adolescents

Billing Information

Examination Procedure Codes

EPSDT screens are billed on a standard HCFA-1500 claim form. Providers are required to use examination codes that are classified as initial or established and are appropriate for the age of the member. Providers must use the preventive health diagnosis code, V20.2, as the primary diagnosis code when a HealthWatch screen is billed in order to receive the enhanced EPSDT screening rate. The primary diagnosis code must be indicated with the diagnosis cross-reference code of 1 in field 24E of the HCFA-1500 claim form for the procedure code billed. Procedure codes are listed in Table 1.1.
Table 1.1 – Procedure Codes

<table>
<thead>
<tr>
<th>Age</th>
<th>Initial Patient Exam</th>
<th>Established Patient Exam</th>
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<tbody>
<tr>
<td>Under 1 Year</td>
<td>99381</td>
<td>99391</td>
</tr>
<tr>
<td>1-4 Years</td>
<td>99382</td>
<td>99392</td>
</tr>
<tr>
<td>5-11 Years</td>
<td>99383</td>
<td>99393</td>
</tr>
<tr>
<td>12-17 Years</td>
<td>99384</td>
<td>99394</td>
</tr>
<tr>
<td>18-20 Years</td>
<td>99385</td>
<td>99395</td>
</tr>
</tbody>
</table>

Reimbursement

Reimbursement for the initial patient exam is limited to the first HealthWatch/EPSDT screen performed by the screening provider during the patient’s lifetime. Claims submitted with charges other than the designated amounts for screening exams will be paid at the lower of the HealthWatch/EPSDT rate or the charged amount. Providers must bill V20.2 as the primary diagnosis code to receive the higher EPSDT reimbursement for these procedure codes. Table 1.2 provides the EPSDT reimbursement rates for initial and established patient exams.

Table 1.2 – Reimbursement Rates

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Patient Exam</td>
<td>$50</td>
</tr>
<tr>
<td>Established Patient Exam</td>
<td>$37</td>
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</table>

Please consult the *HealthWatch Early Periodic Screening, Diagnosis, and Treatment Provider Manual* for more information on billing and proper coding procedures for EPSDT screens and additional services (such as immunizations) when provided during an EPSDT exam.

Tools for Physicians to Improve Documentation of EPSDT Visits in Medical Records

The tools and the organizations listed in this bulletin are provided for information only. This information does not constitute endorsement, approval, or support of these organizations by the Office of Medicaid Policy and Planning or the state of Indiana.
**Bright Futures**

*Bright Futures* is a national child health promotion and disease prevention initiative launched in 1990 with the support of the Maternal and Child Health Bureau – Health Resources and Service Administration, and the Medicaid Bureau – Health Care Financing Administration. Bright Futures is dedicated to developing educational materials for health and education professionals and families and implementing the Bright Futures content, philosophy, and materials through technical assistance, training, and outreach. The mission of Bright Futures is to promote and improve the health, education, and well being of children, adolescents, families, and communities.

For more information contact:

Bright Futures
2000 15th Street North
Suite 701
Arlington, VA 22012-2617

Telephone:  (703) 524-7802
Fax: (703) 524-9335
E-mail: brightfutures@ncemch.org
Web site: www.brightfutures.org

**Indiana State Department of Health**

The Indiana State Department of Health has designed *Recommendations for Preventative Pediatric Health Care* for the care of children who are receiving competent parenting, have no manifestations of any important health problems, and are growing and developing in satisfactory fashion. These guidelines represent a consensus by the Committee of Practice and Ambulatory Medicine in consultations with the national committees and sections of the American Academy of Pediatrics. For more information contact:

**Kim Nelson**
Maternal and Child Health Services
Indiana State Department of Health
2 North Meridian Street, Section 7C
Indianapolis, IN 46204
American Academy of Pediatrics

Form: Guidelines for Health Supervision

Telephone: 1-800-433-0746
Web Site: www.aap.org

Georgia Chapter, American Board of Pediatrics

A detailed medical chart designed for each age group is available from the Georgia Chapter, American Board of Pediatrics. Contact this organization in one of the following ways:

Georgia Chapter, American Board of Pediatrics
1330 W. Peachtree Street, NW
Atlanta, GA 30309-2904

Telephone: 1-800-282-0224
Fax: (404) 249-9503
Web Site: www.gaaap.org


To order a printed copy of the Guide to Clinical Preventive Services, 2nd Edition, contact:

<table>
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<tr>
<th>Contact Information</th>
<th>Price</th>
</tr>
</thead>
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<tr>
<td>Agency for Health Care Policy and Reform Publications Clearinghouse 1-800-358-9295</td>
<td>The single-copy price is $20.</td>
</tr>
<tr>
<td>Or view the document on the Internet at <a href="http://158.72.20.10/pubs/guidecps/">http://158.72.20.10/pubs/guidecps/</a></td>
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