

Provider Bulletin February 2023

### **HEDIS well-child and immunizations coding tips**

We want to help reduce your administrative burden in reporting HEDIS<sup>®</sup> data to us each year during HEDIS medical review season, so we have prepared the following list of CPT<sup>®</sup>, ICD-10-CM, and HCPCS codes. Adding these codes to your claims will help us identify additional information about each visit and improve the accuracy of reporting quality measures.

## Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)

The codes below identify weight assessment, counseling for nutrition, and physical activity. Member-collected biometric values (height, weight, BMI percentile) are eligible for use in the ways outlined below:



Description	СРТ	ICD-10-CM	HCPCS
BMI percentile		<ul> <li>Z68.51: Body mass index (BMI) pediatric, less than 5th percentile for age</li> <li>Z68.52: Body mass index (BMI) pediatric, 5th percentile to less than 85th percentile for age</li> <li>Z68.53: Body mass index (BMI) pediatric, 85th percentile to less than 95th percentile for age</li> <li>Z68.54: Body mass index (BMI) pediatric, greater than or equal to 95th percentile for age</li> </ul>	
Nutrition counseling	97802, 97803, 97804	<b>Z71.3:</b> Dietary counseling and surveillance	<b>G0270:</b> Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face-to-face with the patient, each 15 minutes <b>G0271:</b> Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), group (2 or more individuals), each 30 minutes

HEDIS<sup>®</sup> is a registered trademark of the National Committee for Quality Assurance (NCQA).

#### https://providers.anthem.com/oh

Anthem Blue Cross and Blue Shield Medicaid is the trade name of Community Insurance Company, an independent licensee of the Blue Cross Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc. OHBCBS-CD-013787-22 February 2023

Description	СРТ	ICD-10-CM	HCPCS
			<ul> <li>G0447: Face-to-face behavioral counseling for obesity, 15 minutes</li> <li>S9449: Weight management classes, non-physician provider, per session</li> <li>S9452: Nutrition classes, non-physician provider, per session</li> <li>S9470: Nutritional counseling, dietitian visit</li> </ul>
Physical activity counseling		<b>Z02.5:</b> Encounter for examination for participation in sport <b>Z71.82:</b> Exercise counseling	<b>G0447:</b> Face-to-face behavioral counseling for obesity, 15 minutes <b>S9451:</b> Exercise classes, non-physician provider, per session

# Well-Child Visits in the First 30 Months of Life (W30) and Child and Adolescent Well-Care Visits (WCV)

Codes to identify well-care visits:

CPT	HCPCS	ICD-10-CM
99381-99385,	<b>G0438:</b> Annual wellness visit;	<b>Z00.00:</b> Encounter for general adult medical examination
99391-99395,	includes a personalized prevention	without abnormal findings
99461	plan of service (PPS), initial visit	<b>Z00.01</b> : Encounter for general adult medical examination
	<b>G0439:</b> Annual wellness visit,	with abnormal findings
	includes a personalized PPS,	<b>Z00.110:</b> Health examination for newborn under 8 days old
	subsequent visit	<b>Z00.111:</b> Health examination for newborn 8 to 28 days old
	<b>S0302:</b> Completed early periodic	<b>Z00.121:</b> Encounter for routine child health examination with
	screening diagnosis and treatment	abnormal findings
	(EPSDT) service (list in addition to	<b>Z00.129:</b> Encounter for routine child health examination
	code for appropriate evaluation and	without abnormal findings
	management service)	<b>Z00.2:</b> Encounter for examination for period of rapid growth
	<b>S0610:</b> Annual gynecological	in childhood
	examination, new patient	<b>Z00.3:</b> Encounter for examination for adolescent
	<b>S0612:</b> Annual gynecological	development state
	examination, established patient	<b>Z01.411:</b> Encounter for gynecological examination (general)
	<b>S0613:</b> Annual gynecological	(routine) with abnormal findings
	examination; clinical breast	<b>Z01.419:</b> Encounter for gynecological examination (general)
	examination without pelvic	(routine) without abnormal findings
	evaluation	<b>Z02.5:</b> Encounter for examination for participation in sport
		Z76.1: Encounter for health supervision and care of foundling
		<b>Z76.2:</b> Encounter for health supervision and care of other
		healthy infant and child

Anthem Blue Cross and Blue Shield Medicaid HEDIS well-child and immunizations coding tips Page 3 of 5

#### **Childhood Immunizations Status (CIS)**

Vaccines administered by their second birthday:

- Four diphtheria, tetanus, and acellular pertussis (DTaP) — Do not give prior to 42 days after birth.
- Three polio (IPV) *Do not give prior to 42 days after birth.*
- One measles, mumps, and rubella (MMR) *Must be given between the first and second birthday.*
- Three hepatitis B (Hep B) One of the three vaccinations can be a newborn Hep B vaccination.



- Three haemophilus influenza type B (HiB) Do not give prior to 42 days after birth.
- One chicken pox (VZV) *Must be given between the first and second birthday.*
- Four pneumococcal conjugate (PCV) *Do not give prior to 42 days after birth.*
- One hepatitis A (Hep A) *Must be given between the first and second birthday.*
- Two-three rotavirus (RV) Do not give prior to 42 days after birth.
- Two influenza (flu) vaccines Do not give prior to six months (180 days) after birth. One of the two vaccines can be LAIV vaccination on the child's second birthday.

Description	СРТ
Diphtheria, tetanus, pertussis (DTaP)	90697, 90698, 90700, 90723
Inactivated polio vaccine (IPV)	90697, 90698, 90713, 90723
Measles, mumps, and rubella (MMR)	90707, 90710
Haemophilus influenzae type b (HiB)	90644, 90647, 90648, 90697, 90698, 90748
Varicella zoster (VZV)	90710, 90716
Hepatitis B (HBV)	90697, 90723, 90740, 90744, 90747, 90748
Pneumococcal conjugate (PCV)	90670
Hepatitis A	90633
Rotavirus (RV): Two dose schedule	90681
Rotavirus (RV): Three dose schedule	90680
Influenza	90655, 90657, 90661, 90673, 90685-90689, 90756 LAIV: 90660, 90672

#### Codes to identify vaccine procedures:

#### Immunizations for Adolescents (IMA)

Vaccines administered on or before their 13th birthday:

- One MCV/meningococcal vaccine on or between their 11th and 13th birthday.
- One Tdap vaccine on or between their 10th and 13th birthday.
- Three doses of HPV vaccine administered on or between ninth and 13th birthday or two doses of HPV with at least 146 days between first and second dose.

#### Codes to identify vaccine procedures:

Description	CPT
Meningococcal	90619, 90733, 90734
Tdap	90715
HPV	90649, 90650, 90651

#### Lead Screening in Children (LSC) prior to second birthday

Description	CPT
Lead Tests	83655

#### Follow-Up Care for Children Prescribed ADHD Medication (ADD)

Description	СРТ
Health and behavior assessment or intervention	96150-96154, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171

#### Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)

Description	СРТ
Cholesterol lab test	82465, 83718, 83722, 84478
Glucose lab test	80047, 80048, 80050, 80053, 80069, 82947, 82950, 82951
HbA1c lab test	83036, 83037
LDL-C lab test	80061, 83700, 83701, 83704, 83721

#### Use of First-Line Psychosocial Care for Children and Adolescents on Antipsychotics (APP)

Description	СРТ	HCPCS
Psychosocial care	90832-90834, 90836- 90840, 90845-90847, 90849, 90853, 90875, 90876, 90880	<ul> <li>G0176: Activity therapy, such as music, dance, art, or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)</li> <li>G0177: Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)</li> <li>G0409: Social work and psychological services, directly relating to and/or furthering the patient's rehabilitation goals, each 15 minutes, face-to-face; individual (services provided by a CORF-qualified social worker or psychologist in a CORF)</li> <li>G0410: Group psychotherapy other than of a multiplefamily group, in a partial hospitalization setting, approximately 45 to 50 minutes</li> <li>G0411: Interactive group psychotherapy, in a partial hospitalization setting, approximately 45 to 50 minutes</li> <li>H0004: Behavioral health counseling and therapy, per 15 minutes</li> <li>H0036: Community psychiatric supportive treatment, face-to-face, per 15 minutes</li> <li>H0037: Community psychiatric supportive treatment program, per diem</li> <li>H0038: Self-help/peer services, per 15 minutes</li> </ul>

Description	СРТ	HCPCS
		H0039: Assertive community treatment, face-to-face, per
		15 minutes
		H0040: Assertive community treatment program, per
		diem
		H2000: Comprehensive multidisciplinary evaluation
		H2001: Rehabilitation program, per half day
		H2011: Crisis intervention service, per 15 minutes
		H2012: Behavioral health day treatment, per hour
		H2013: Psychiatric health facility service, per diem
		H2014: Skills training and development, per 15 minutes
		H2017: Psychosocial rehabilitation services, per 15
		minutes
		H2018: Psychosocial rehabilitation services, per diem
		<b>H2019:</b> Therapeutic behavioral services, per 15 minutes
		<b>H2020:</b> Therapeutic behavioral services, per diem
		<b>S0201:</b> Partial hospitalization services, less than 24 hours,
		per diem
		<b>S9480:</b> Intensive outpatient psychiatric services, per diem
		<b>S9484:</b> Crisis intervention mental health services, per
		hour
		<b>S9485:</b> Crisis intervention mental health services, per
		diem

#### **Topical Fluoride for Children (TFC)**

Description	CPT
Application of fluoride varnish	99188



\* The codes listed are for informational purposes only and are not intended to suggest or guide reimbursement. If applicable, refer to your provider contract or health plan contact for reimbursement information. For a complete list of CPT codes, go to the American Medical Association website at **ama-assn.org**.