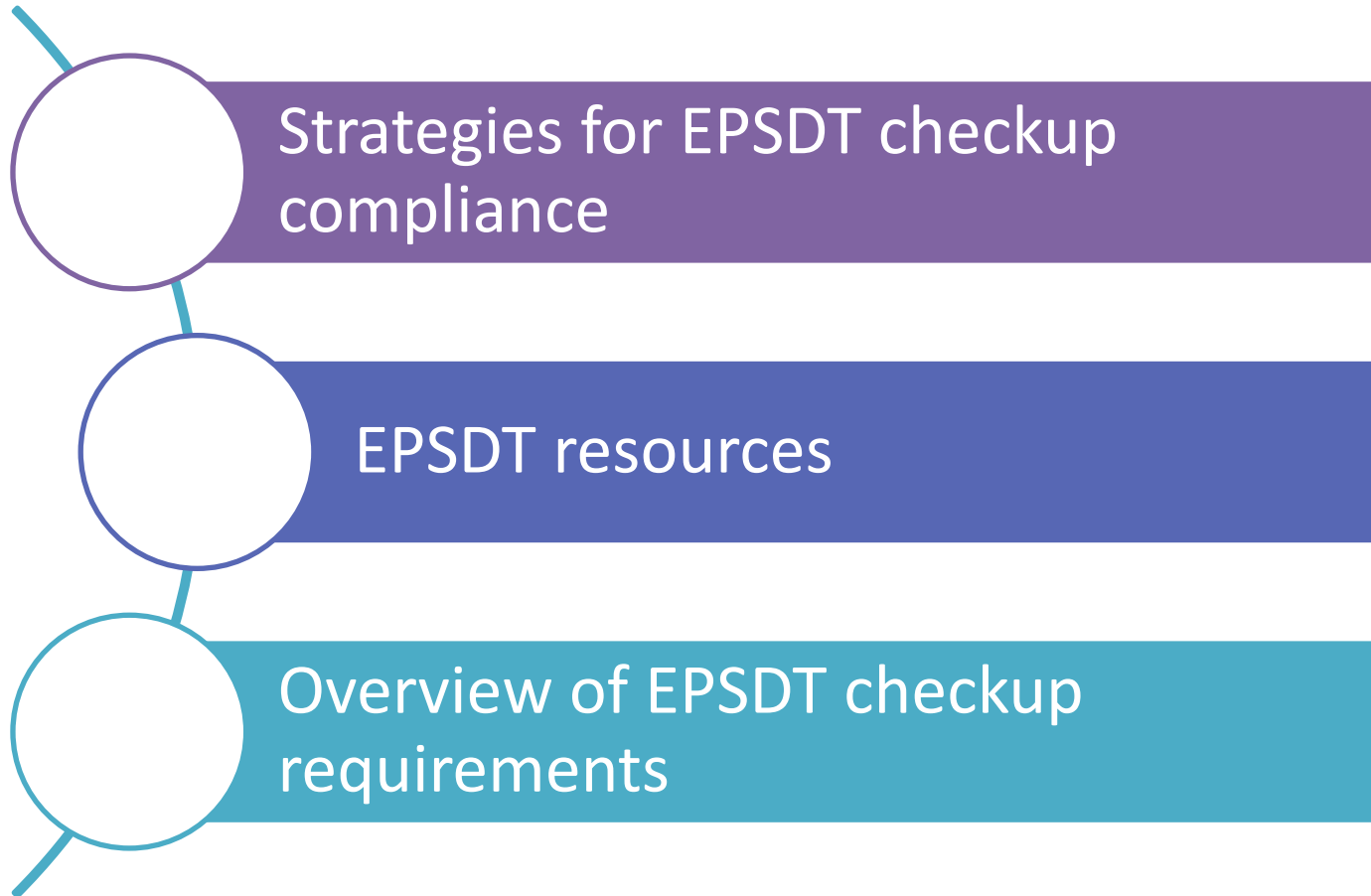




EPSDT Provider Presentation

What We'll Cover Today





Strategies to Promote Compliance

Opportunities for Outreach and Compliance

Team Huddles

**Converting a
Sports Physical
to a Well-Care
Visit**

**Appointment
Scheduling**

**Combining Well-
Care visits with
other visit types**

Chart Prep

**Dedicated EPSDT
staff**

**Alternate and
Extended Office
Hours**

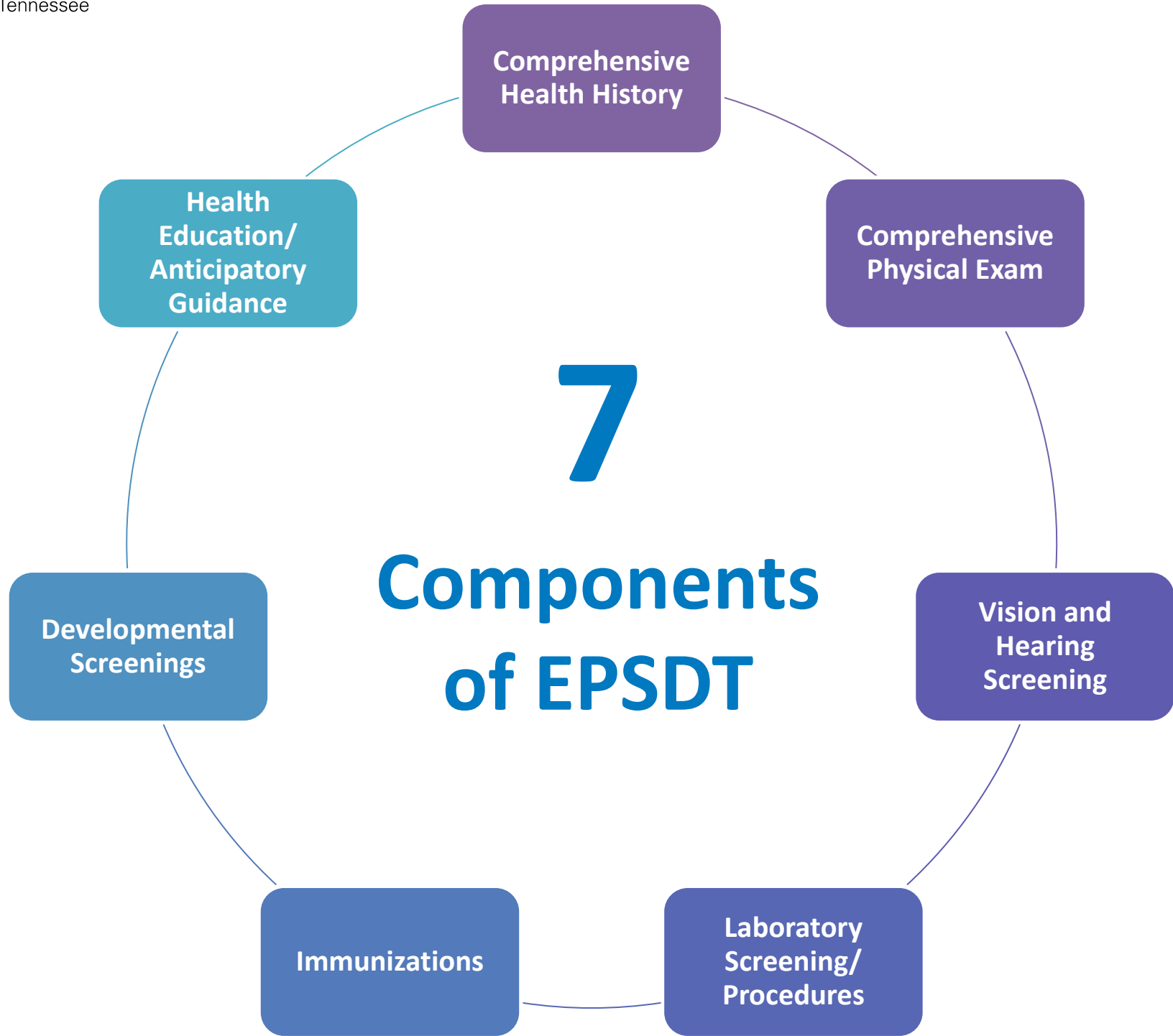
Floating Staff

**Transportation
Services**

What Can You Control with EPSDT Checkups?

Documentation

Coding



Medical Record Documentation

Required Documentation

- **TennCare Kids exams require completion and documentation of all seven components, including assessments of nutrition and physical activity.**

Annual Medical Review

- **The medical record review is conducted annually.**
- **Proper documentation of each TennCare Kids test and procedure is required.**
 - **See next slide for details**

EPSDT Required Documentation

Age appropriate elements, identification of risk factors, periodicity for procedures and immunizations should be provided at each TennCare Kids encounter **based on the most current *American Academy of Pediatrics Recommendations for Pediatric Health Care***. Documentation should provide reasons for not performing any element, or member refusal of any or all elements of this exam.

- **Comprehensive health and development history.**
 - **Update with documentation of an interval history, developmental/behavioral surveillance and screenings as appropriate for age and risk factors.**
- **Evidence of a comprehensive unclothed physical examination.**
- **Evidence of age-appropriate subjective/objective hearing exam.**
- **Evidence of age-appropriate subjective/objective vision exam.**

EPSDT Required Documentation, Continued

- **Immunizations as appropriate for age and risk factors.**
 - **Documentation of immunizations administered by other Providers should be requested and available in the medical record (record entry or photocopy) with antigen and date of administration noted.**
- **Procedures and tests performed as appropriate for age and risk factors, including lead screening, which is required at age twelve (12) and twenty-four (24) months of age.**
- **Evidence of an oral/dental screening with a referral for dental health care starting at age 1 or earlier as Medically Necessary.**
- **Evidence of appropriate referrals to other health care Practitioners, including Behavioral Health Providers, or for ancillary care as result of problems identified.**
- **Evidence of anticipatory guidance.**

Commonly Missing Documentation Elements

- Immunization Status not documented
- Screening for sexually transmitted diseases not documented
- No hemoglobin or hematocrit levels
- No lead assessments and no blood lead testing when applicable
- No nutritional counseling
- No developmental assessments
- Missing height/weight growth parameters
- No documentation of anticipatory guidance
- No dental referrals
- No documentation of the periodicity appointment
 - Return appointment for next scheduled EPSDT visit
- No documentation for the additional evaluation and management visit reimbursed (Example: Using Modifier 25)
- No documentation the exam was performed unclothed

Exam Refusals

- **Include detailed documentation in medical record**
- **If patient is a minor and accompanied by guardian – document that guardian refused care and reason if provided**
- **Document attempt to educate guardian about the importance of exams and plan for follow up**
- **Document additional attempts to schedule exams after refusal**

Credit for Well-Visits Performed

- **Screening rates are calculated from your claims**
- **Make sure to bill accurately and completely**
- **Submit claims for children with two insurance providers**

Appointment Cancellations

- **Investigate your EHR's capabilities – most can help manage and schedule patient visits**

Medical Record Documentation - Resources

Tennessee Chapter of the American Academy of Pediatrics (TNAAP)

- Has age specific forms to help providers document services provided at each TennCare Kids visit.
- These forms are not required by TennCare, but are recommended as tools to prompt for age appropriate services and for facilitate documentation.

TNAAP Website

- Available materials include resources and reference materials.

<https://www.tnaap.org/programs/epsdt-coding/epsdt-well-child-visits>



Coding Resources

Comprehensive Physical Exam- unclothed or appropriately draped

- A complete EPSDT includes coding for BMI
- BMI codes are often missing from claims

Pediatric – BMI Percentile	Diagnosis Code
BMI <5 th Pcntl for Age	Z68.51
BMI 5 th Pcntl - <85 th Pcntl	Z68.52
BMI 85 th Pcntl - <95 th Pcntl	Z68.53
BMI ≥ 95 th Pcntl	Z68.54

Adult BMI	Diagnosis Code
BMI ≤ 19	Z68.1
BMI 20.0-23.9	Z68.20-Z68.23
BMI 24.0-29.9	Z68.24-Z68.29
BMI 30.0-39.9	Z68.30-Z68.39
BMI 40.0-49.9	Z68.40-Z68.42
BMI 50.0-59.9	Z68.43
BMI 60.0-69.9	Z68.44
BMI ≥ 70.0	Z68.45

New vs Established Patient – For Coding Purposes

New Patient

- A new patient is one who has not received professional services (defined as face-to-face services reported with a CPT code) from a physician or any physician with in the same group practice of the exact same specialty with the past three years

Established Patient

- An established patient is one who has received a professional service (defined as face-to-face services reported with a CPT code) from a physician or any physician with in the same group practice of the exact same specialty with the past three years

**Booking appointments will follow your office guidelines.
Billing must follow above guidelines.**

Preventive Medicine/EPSTD

New Patient CPT Code	Established Patient CPT Code	Age	ICD-10-CM Codes
99381	99391	Infant < 1 year	Z00.110 – Health exam under 8 days Z00.111 – Health exam 8-28 days Z00.121 – Routine exam with abnormal findings Z00.129 – Routine exam without abnormal findings
99382	99392	Early Childhood 1-4 Years	Z00.121 Z00.129
99383	99393	Late Childhood 5-11 Years	Z00.121 Z00.129
99384	99394	Adolescent 12-17 Years	Z00.121 Z00.129
99385	99395	Adult 18-39 Years	Z00.00 – General adult exam without abnormal findings Z00.01 – General adult exam with abnormal findings
Newborn Codes		99460- Initial E/M normal newborn in the hospital or birthing center 99461 – Initial E/M normal newborn in other than a hospital or birthing center 99463 – Initial E/M normal newborn admitted and discharged on the same day *Report ICD-10 Code Z00.110	

If a child is present for a problem-oriented visit and is behind/due for their well-child exam, it is appropriate to perform and report a well child exam **99381-99395** in addition to the acute visit **99201-99215**. If all E/M requirements are met, **Modifier 25** should be appended to the problem oriented visit, **99201-99215**, when reported in conjunction with the preventive visit, **99381-99385**, on the same day.

*Information from TNAAP EPSTD Coding Guide

<https://www.tnaap.org/programs/epsdt-coding/epsdt-well-child-visits>

Coding and Modifiers

Key EPSDT Procedure Codes	
CPT Code	Description
92551	Hearing – Screening test, pure tone, air only
92552	Hearing – Pure tone audiometry, threshold, air only
92558	Hearing – Evoked otoacoustic emissions; screening
99173	Vision – Quantitative bilateral visual acuity exam
99174	Vision – Instrument-based ocular screening; remote analysis
99177	Vision – Instrument-based ocular screening; on-site analysis
96110	Developmental Screening
96127	Brief Emotional/Behavioral Assessment
96160	Health Risk Assessment – Patient Focused
96161	Health Risk Assessment – Caregiver Focused

Common Pediatric Modifiers	
-25	Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service
-22	Increased Procedural Service
-59	Distinct Procedural Service
-76	Repeat Procedure by the Same Physician
-90	Reference Outside Laboratory

*Information from TNAAP EPSDT Coding Guide
<https://www.tnaap.org/programs/epsdt-coding/epsdt-well-child-visits>

Immunizations

www.cdc.gov/vaccines/schedules/hcp/imz/child-adolescent.html

Immunization Administration

CPT Code	Description
90460	Immunization administration through 18, via any route, with counseling, first or only component of each vaccine
+90461	Each additional vaccine or component, with counseling
90460 and 90461 are reported when the patient is 18 years or younger and the physician or other qualified health care professional performs face-to-face vaccine counseling	
90471	Immunization administration ID, IM, subQ, one vaccine (single or combined vaccine)
+90472	Each additional vaccine ID, IM, subQ, one vaccine (single or combined vaccine)
90473	Immunization administration, oral, one vaccine (single or combination vaccine)
+90474	Each additional vaccine, oral (single or combination vaccine)

90471-90474 are reported when the patient is over the age of 18 or when counseling is not performed.

Modifier 25 should be appended to E/M visit codes reported in conjunction with immunization administration codes. If both a preventive and sick visit are reported on the same day, append **Modifier 25** to both E/M codes.

www.aap.org/en-us/Documents/coding_vaccine_coding_table.pdf

*Information from TNAAP EPSDT Coding Guide

<https://www.tnaap.org/programs/epsdt-coding/epsdt-well-child-visits>



Overview of EPSDT Importance and Compliance

TennCare EPSDT Goals

TennCare Kids is a full program of checkups and health care services for children who have TennCare.

These services make sure babies, children, teens and young adults receive the health care they need.

Children and teens need regular health checkups, even when they seem healthy.

Members under the age of 21 should receive at least 30 well-care visits.

EPSDT Defined

EPSDT Definition: 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.

Early – Assessing and identifying problems early

Periodic - Checking children's health at periodic, age-appropriate intervals

Screening - Providing physical, mental, developmental, dental, hearing, vision, and other screening tests to detect potential problems

Diagnosis - Performing diagnostic tests to follow up when a risk is identified

Treatment - Control, correct or reduce health problems found

EPSDT Importance

Opportunity to identify needs and put interventions in place early

Provide assessment opportunity for age group rarely seen in clinic—adolescents

Referral for needed care can only occur if exams are completed

State requirement to provide EPSDT annually for all Medicaid members under age 21

Services Based on Bright Futures/AAP

The American Academy of Pediatrics Periodicity Schedule defines the child's age and what is to be completed at each office visit.

Comprehensive TennCare Kids screenings follow the current, age-specific, preventive health care schedule based on the American Academy of Pediatrics recommendations.

The periodic intervals for these screenings are also based on the Academy's recommendations.

www.aap.org/en-us/Documents/periodicity_schedule.pdf

Recommended Ages for Preventive Visits

Infancy	Early Childhood	Middle Childhood	Adolescence
Newborn	12 Months	5 Year	11 Year
3-5 Days	15 Months	6 Year	12 Year
1 Month	18 Months	7 Year	13 Year
2 Months	24 Months	8 Year	14 Year
4 Months	30 Months	9 Year	15 Year
6 Months	3 Year	10 Year	16 Year
9 Months	4 Year		17 Year
			18 Year
			19 Year
			20 Year

The State Periodicity Schedule states patients should have 30 visits before age 21.							
<1	1-2	3-5	6-9	10-14	15-18	19-20	= 30 visits before age 21
7	4	4	4	5	4	2	

*Information from TNAAP EPSDT Coding Guide

<https://www.tnaap.org/programs/epsdt-coding/epsdt-well-child-visits>

Immunization and Periodicity Schedules Following Established Guidelines



Centers for Disease Control and Prevention Advisory Committee on Immunization Practices immunization schedules

www.cdc.gov/vaccines/acip/index.html



American Academy of Pediatrics (AAP) Periodicity Schedule

www.aap.org/en-us/Documents/periodicity_schedule.pdf



American Academy of Pediatric Dentistry (AAPD)

www.aapd.org/media/Policies_Guidelines/G_CariesRiskAssessmentChart.pdf



American Academy of Family Physicians

www.aafp.org/home.html

Laboratory Screening/Procedures

Blood Lead Levels

- Blood lead levels measure required by finger stick on all children at 12 and 24 months
- If the 12 and 24-month screenings are not documented, complete blood level tests as soon as possible between ages 3 to 6

Developmental/Behavioral Screenings

Age appropriate developmental checklists to record milestones during the preventive care visits and as part of the developmental surveillance.

It is appropriate to bill for more than one screening tool administered during a visit. Append Modifier **25** to E/M visit.

When reporting the health risk assessment codes **96160** and **96161** with developmental screening and/or emotional/behavioral screening, Modifier **59** should be appended to the health risk assessment code.

Summary of tools available:

www.tnaap.org/documents/summary-of-developmental-and-behavioral-health-scr.pdf

Dental Benefits

Dental Checkups include: complete dental exam, cleaning, x-ray (as needed) and oral health advice

**Children should begin dental visits
at age 1
(or earlier if needed)**

**Eligible for
benefits
until age 21**

**Dental visits
should take
place every 6
months**

**DentaQuest = Dental Benefits Manager
(DBM) for all TennCare Enrollees under
Age 21**

***Try to get teens to see the dentist since
benefits will end at age 21**

There should be evidence of an oral/dental screening with a referral for dental health care starting at age 1 or earlier as Medically Necessary.



Scenarios

Example Scenarios

2-year-old in office for sick visit

- Evaluate if EPSDT is needed
- If time to complete EPSDT in addition to sick visit, add **Modifier 25**
- Evaluation of immunization status should be completed, but would only be administered if not contraindicated by sick visit
- If no time on schedule to complete EPSDT, schedule patient for future visit

Teen in office for sports physical

- Convert to well-visit
- Ensure referral to dentist
- Schedule next visit before patient leaves office

1-month-old in office for scheduled checkup

- Educate parents on extra visits needed during first year
- Schedule visits up to 12 months before patient leaves



MCO Resources

All MCOs

Care Coordination Tool (CCT)

Use the CCT to identify
when gaps exist and
extra coordination is
needed

- <https://www.tn.gov/tenncare/health-care-innovation/primary-care-transformation/care-coordination-tool.html>

BlueCare Resources

Transportation

Southeasterns can help
get patients to
TennCare Kids
appointments at no
charge

- **BlueCare East Region – 1-866-473-7563**
- **BlueCare Middle Region – 1-866-473-7564**
- **BlueCare West Region – 1-866-473-7564**
- **TennCareSelect –1-866-473-7565**
- **CHOICES/ECF CHOICES –1-888-747-8955**
- **SelectCommunity –1-800-292-8196**

BlueCare Resources

BlueCare Tennessee Website Resources

- bluecare.bcbst.com/forms/Provider%20Information/BCT_PAM.pdf
- bluecare.bcbst.com/providers/tools-resources/general/tenncare-kids-toolkit.html

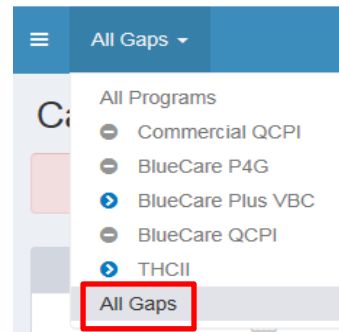
Provider/BlueCare Tennessee Outreach Partnership

- To partner with us on a Community Outreach event, please call us at 1-800-771-0217 or
- Complete the form at:
bluecare.bcbst.com/forms/Provider%20Forms/Community_Outreach_Referral_Fax_Form.pdf
and Fax it to (423) 591-9165

BlueCare Resources

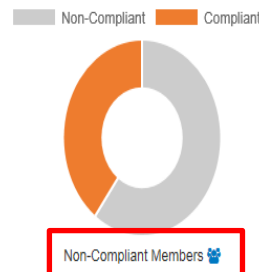
Quality Care Rewards (QCR) EPSDT Portal

- All providers can now see their assigned members with EPSDT gaps in the QCR. EPSDT can be found under All Gaps.



- When All Gaps is selected, a comparison of Non-Complaint vs Complaint members is shown.

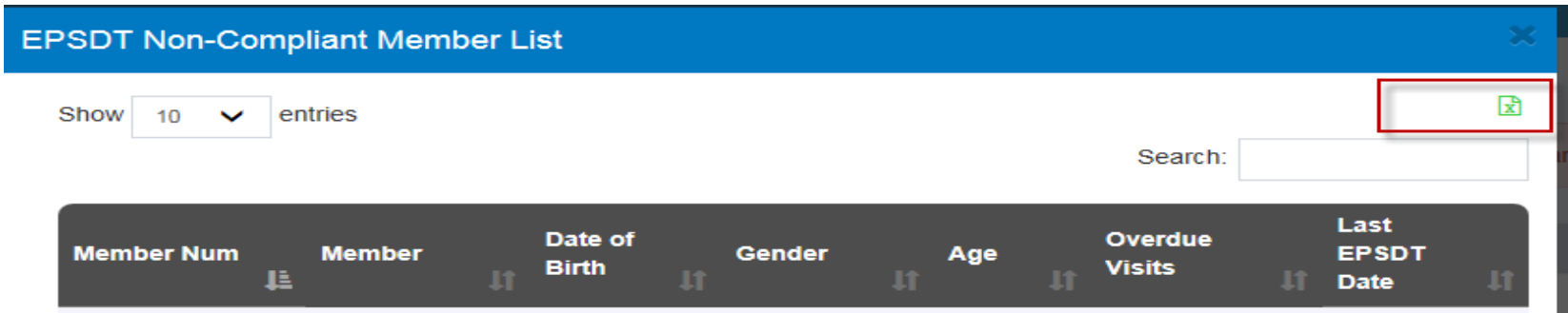
EPSDT Compliance



BlueCare Resources

Quality Care Rewards (QCR) EPSDT Portal

- Providers can click on Non-Compliant Members to get a member detail list that includes the number of missed visits as well as the last EPSDT date. The member list can be exported to excel by clicking on the green X in the top corner.



The screenshot shows a web interface titled "EPSDT Non-Compliant Member List". At the top left, there is a "Show 10 entries" dropdown menu. To the right of this is a search box labeled "Search:". In the top right corner of the interface, there is a green "X" icon inside a red-bordered box, which is the export to Excel button. Below the search bar is a table header with the following columns: "Member Num", "Member", "Date of Birth", "Gender", "Age", "Overdue Visits", and "Last EPSDT Date". Each column header has a small icon below it indicating sorting or filtering options.

- Non-Compliant Member lists are updated monthly.

Amerigroup Resources

Transportation

- Tennessee Carriers
1-866-680-0633

Provider/ Amerigroup Outreach Partnership

- To partner with us on a Community Outreach event, please contact:

Madeline Mays
Health Promotions and Outreach
Manager
615-319-6409

Amerigroup Resources

Amerigroup TN Website Resources

- <https://providers.amerigroup.com/pages/tn-2012.aspx>
- https://providers.amerigroup.com/Provider Documents/TNTN_CAID_Prov_Man.pdf
- <https://providers.amerigroup.com/Pages/EPSDT.aspx>
- https://providers.amerigroup.com/Provider Documents/TNTN_PanelListingGuide.pdf

United Healthcare Resources

Transportation

- 1-866-405-0238

Provider Call Center

- 1-800-690-1606
8:00am – 6:00pm EST

United Healthcare Resources

Provider Website

- <https://www.uhccommunityplan.com/health-professionals/tn.html>

UHC Provider Portal UnitedHealthcareOnline

- <https://www.unitedhealthcareonline.com/b2c/CmaAction.do?viewKey=PreLoginMain&forwardToken=PreLoginMain>

Thank You



BlueCare Tennessee, an Independent Licensee of BlueCross BlueShield Association