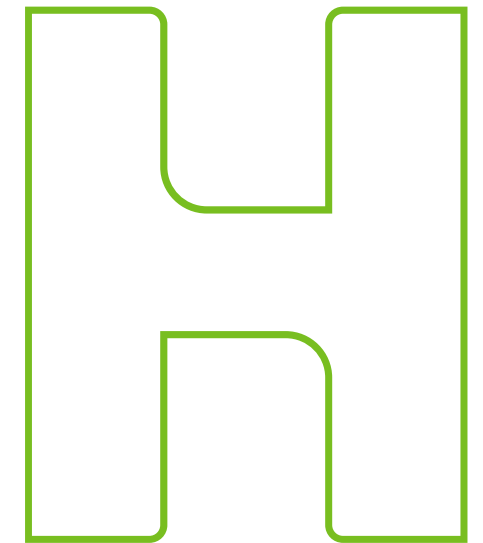




# Medicaid well-child visit



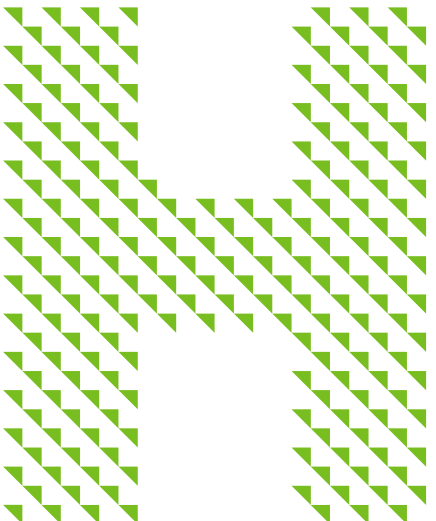
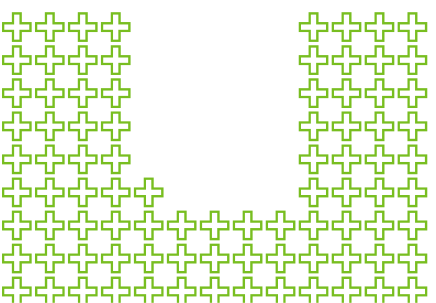
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# Agenda

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# Introduction



## Medicaid well-child visit

The Medicaid well-child visit is a comprehensive, preventive health screening service for children from birth to 21 years of age. Well-child visits are performed according to an age-driven periodicity schedule that promotes comprehensive health supervision, early identification of health conditions and continuity of care. The well-child visit is part of the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program.



## EPSDT Program

The EPSDT program is designed to identify health and developmental issues early through regular preventive visits and further diagnosis and treatment. EPSDT includes special services coverage for other healthcare deemed medically necessary to correct or improve health conditions, regardless of whether such services are covered under the state's Medicaid plan. EPSDT special services require prior authorization.



To learn more about EPSDT, visit [Early and Periodic Screening, Diagnostic, and Treatment | Medicaid](#).

# Making the most of the visit while the child is in the office

Some patients have a hard time getting to the doctor's office, so it's important to maximize each visit. In general, a well-child visit should not be performed on an obviously sick child, but there may be times when a well-visit is appropriate even if the patient shows some mild symptoms of illness (e.g., runny nose/cold).

**The decision whether to proceed with a well-visit is always up to the discretion of the physician and is made with the patient's best interest in mind.**



To learn more about EPSDT, visit [Early and Periodic Screening, Diagnostic, and Treatment | Medicaid](#).

# What are the components of the Medicaid well-child visit?

## A Medicaid well-child visit is composed of the following

- Comprehensive health and developmental history, including assessment of past medical history, developmental history and behavioral health status
- Nutritional assessment
- Developmental assessment and screening
- Comprehensive physical examination
- Dental screening, including dental referral (when required)
- Vision screening, including objective testing (when required)
- Hearing screening, including objective testing (when required)
- Laboratory test, including blood-lead testing (when required)
- Appropriate immunizations
- Health education and anticipatory guidance
- Diagnosis and treatment
- Referral and follow-up, as appropriate



To learn more about EPSDT, visit [Early and Periodic Screening, Diagnostic, and Treatment | Medicaid](#).

# Importance of lead testing

Federal regulation requires that all children receive a blood test for lead at



12 months and  
24 months

Anytime between  
25 months through  
72 months (six years) for children  
who have not had a previous  
blood lead screening



To learn more about EPSDT, visit [Lead Screening | Medicaid](#)

# Importance of developmental screening and CMS Core Set measure

Developmental screening is a regular part of the well-child visits for all children even if there is not a known concern. The American Academy of Pediatrics (AAP) recommends standardized developmental screening test at 9-, 18- and 30-months visit.

CMS Child Core Set		
Measure	Service needed	What to report (sample of codes)
<p><b>Developmental Screening in the First Three Years of Life (DEV-CH)</b></p> <p>The percentage of children screened for risk of developmental, behavioral, and social delays using a standardized screening tool in the 12 months preceding or on their first, second, or third birthday</p>	<p>A completed screening for risk of developmental, behavioral, and social delays using a standardized screening tool on their 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup></p>	<p><b>Provider codes</b></p> <ul style="list-style-type: none"> <li>• <b>ICD-10:</b> Z13.42</li> <li>• <b>CPT:</b> 96110</li> </ul> <p>Tools must meet the following criteria:</p> <ol style="list-style-type: none"> <li>1. <b>Developmental domains:</b> The following domains must be included in the standardized developmental screening tool: motor (fine and gross), language, cognitive, and social-emotional</li> <li>2. <b>Established Reliability:</b> Reliability scores of approximately 0.70 or above</li> <li>3. <b>Established Findings Regarding the Validity:</b> 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)</li> <li>4. <b>Established Sensitivity/Specificity:</b> Sensitivity and specificity scores of approximately 0.70 or above</li> </ol>



To learn more about EPSDT, visit [Child Core Set Reporting Resources](#) | [Medicaid](#)

# How do the Medicaid well-child visit measures compare to other HEDIS® measures?

**Medicaid well-child visit components and Healthcare Effectiveness Data and Information Set (HEDIS®) measures address annual wellness visits for children and adolescents:**

- Well-child visits in the First 30 Months of Life (W30)
- Child and Adolescent well-care visits (WCV)
- Adults' Access to Preventive/Ambulatory Health Services (AAP) (adolescents ages 20-21)

**Additional HEDIS® measures address certain components of an EPSDT well-child/adolescent visit. These include:**

- Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)
- Lead Screening in Children (LSC)
- Childhood Immunization Status (CIS-E)
- Immunization for Adolescents (IMA-E)

**The main difference is based on the child's continuous enrollment in the plan, as well as the measurement periods for both groups of measures.**

# How do the Medicaid well-child visit measures compare to other HEDIS measures?

With Medicaid well-child visit measures, children are placed in the health plan's denominator (children meeting criteria for the service) once the child has been enrolled for 90 days or more.

**The measurement period is Oct. 1 through Sept. 30.**

HEDIS® measures typically place children in the health plan's denominator when the child is enrolled with the health plan as of December 31 of the measurement period with no more than a 45-day gap in enrollment.

**The measurement period for many HEDIS® measures is Jan. 1 through Dec. 31.**

Most procedure codes detailed in later slides cover both well-child visit and HEDIS® well-child visit measures, depending on the type of care rendered to the patients.

# What is Humana Healthy Horizons' approach to improve the well-child visit measures?

**Humana Healthy Horizons works to improve well-child visit measures through a variety of methods, including**

- Conducting member outreach campaign to promote well-child visits
- Empowering provider engagement and/or clinical quality team to work directly with physician practices to promote well-child visits and improve HEDIS scores
- Implementing a patient reward program: Go365 for Humana Healthy Horizons®. It is a wellness program that offers opportunity to earn rewards for taking healthy actions
- Allowing physicians and other healthcare professionals to bill for a well-child visit and a sick visit on the same day



To learn more about EPSDT, visit [Early and Periodic Screening, Diagnostic, and Treatment | Medicaid](#).

# Well-child visits coding

Well-child visit age or description	Well-child visit ICD-10 codes	New patient CPT codes	Established patient CPT codes
Neonatal exam	N/A	99461, 99463	N/A
Two to four days for newborns discharged less than 48 hours after delivery	N/A		
By 1 month	N/A	99381	99391
2 months	N/A		
4 months	N/A		
6 months	N/A		
9 months	N/A		
12 months	N/A	99382	99392
15 months	N/A		
18 months	N/A		
2 years to younger than 5 years	N/A	99383	99393
5 years to younger than 12 years	N/A		
12 years to younger than 18 years	N/A		
18 years to younger than 21 years	N/A		
		99384	99394
		99385 EP	99395 EP



Note: The coding included above is based on the [CMS 416 Reporting Instructions](#), but each state's fee schedule determines which codes are reimbursed. Please consult your respective state's fee schedule for reimbursement information.

# Well-child visits coding

Well-child visit age or description	Well-child visit ICD-10 codes	New patient CPT codes	Established patient CPT codes
Encounter for health supervision and care of other healthy infant and child	Z76.2	99202 – 99205	99213 – 99215
Encounter for routine child health exam with abnormal findings	Z00.121		
Encounter for routine child health exam without abnormal findings	Z00.129		
Health exam for newborns younger than eight days	Z00.110		
Health exam for newborns 8 to 28 days old	Z00.111		
Encounter for general adult medical exam with/without abnormal findings	Z00.00-01		
Encounter for exam for admission to educational institution	Z02.0		
Encounter for pre-employment exam	Z02.1		
Encounter for exam for admission to residential institution	Z02.2		
Encounter for exam for recruitment to armed forces	Z02.3		
Encounter for exam for driving license	Z02.4		



Note: The coding included above is based on the [CMS 416 Reporting Instructions](#), but each state's fee schedule determines which codes are reimbursed. Please consult your respective state's fee schedule for reimbursement information.

# Additional resource

The Bright Futures/American Academy of Pediatrics periodicity schedule includes more information about the recommendations for preventive screening and is available at [Preventive Care/Periodicity Schedule](#).

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