

# ***Coding for Pediatric Preventive Care, 2019***



99401



99383

99391



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prevention and health promotion  
for infants, children, adolescents,  
and their families™

**American Academy  
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A stable chronic condition (whether addressed or not) would *not* warrant the use of an “abnormal finding” code.

## Counseling, Risk Factor Reduction, and Behavior Change Intervention Codes

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- ❖ Used to report services provided for the purpose of promoting health and preventing illness or injury.
- ❖ They are distinct from other E/M services that may be reported separately when performed. However, one exception is you cannot report counseling codes (**99401–99404**) in addition to preventive medicine service codes (**99381–99385** and **99391–99395**).
- ❖ Counseling will vary with age and address such issues as family dynamics, diet and exercise, sexual practices, injury prevention, dental health, and diagnostic or laboratory test results available at the time of the encounter.
- ❖ Codes are time-based, where the appropriate code is selected according to the approximate time spent providing the service. Codes may be reported when the midpoint for that time has passed. For example, once 8 minutes are documented, one may report **99401**.
- ❖ Extent of counseling or risk factor reduction intervention must be documented in the patient chart to qualify the service based on time.
- ❖ Counseling or interventions are used for persons without a specific illness for which the counseling might otherwise be used as part of treatment.

- ❖ Cannot be reported with patients who have symptoms or established illness.
- ❖ For counseling individual patients with symptoms or established illness, report an office or other outpatient service code (**99201–99215**) instead.
- ❖ For counseling groups of patients with symptoms or established illness, report **99078** (physician educational services rendered to patients in a group setting) instead.

## PREVENTIVE MEDICINE, COUNSELING

### *CPT® Codes*

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|--------------|--|
| <b>99401</b> | Preventive medicine counseling or risk factor reduction intervention(s) provided to an individual; approximately 15 minutes                  |
| <b>99402</b> | approximately 30 minutes   |
| <b>99403</b> | approximately 45 minutes   |
| <b>99404</b> | approximately 60 minutes   |
| <b>99411</b> | Preventive medicine counseling or risk factor reduction intervention(s) provided to individuals in a group setting; approximately 30 minutes |
| <b>99412</b> | approximately 60 minutes   |

### *ICD-10-CM Codes for Preventive Counseling*

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- ❖ The diagnosis codes reported for preventive counseling will vary depending on the reason for the encounter.
- ❖ Remember that the patient cannot have symptoms or established illness; therefore, the diagnosis codes reported cannot reflect symptoms or illnesses.

❖ Examples of some possible diagnosis codes include

- Z28.3** Underimmunized status (Also include an additional code, eg, **Z28.82** [caregiver refusal].)
- Z71.3** Dietary surveillance and counseling
- Z71.82** Exercise counseling
- Z71.89** Other specified counseling
- Z71.9** Counseling, unspecified

## BEHAVIOR CHANGE INTERVENTIONS, INDIVIDUAL

- ❖ Used only when counseling a patient on smoking cessation (**99406, 99407**).
- ❖ If counseling a patient's parent or guardian on smoking cessation, do not report these codes (**99406, 99407**) under the patient; instead, refer to preventive medicine counseling codes (**99401–99404**) if the patient is not currently experiencing adverse effects (eg, illness), or include under the problem-related E/M service (**99201–99215**).
- ❖ Codes **99406–99409** may be reported in addition to the preventive medicine service codes.

- 99406** Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes
- 99407** intensive, greater than 10 minutes
- 99408** Alcohol or substance (other than tobacco) abuse structured screening (eg, Alcohol Use Disorder Identification Test [AUDIT], Drug Abuse Screening Test [DAST]) and brief intervention (SBI) services; 15 to 30 minutes
- 99409** greater than 30 minutes

## ICD-10-CM Codes for Risk Factor Reduction and Behavior Change Interventions

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<b>F10.10</b>	Alcohol abuse, uncomplicated
<b>F11.10</b>	Opioid abuse, uncomplicated
<b>F12.10</b>	Cannabis abuse, uncomplicated
<b>F13.10</b>	Sedative, hypnotic or anxiolytic abuse, uncomplicated
<b>F13.90</b>	Sedative, hypnotic, or anxiolytic use, unspecified, uncomplicated
<b>F15.90</b>	Other stimulant use, unspecified, uncomplicated
<b>F16.90</b>	Hallucinogen use, unspecified, uncomplicated
<b>Z71.41</b>	Alcohol abuse counseling and surveillance of alcoholic
<b>Z71.51</b>	Drug abuse counseling and surveillance of drug abuser
<b>Z71.6</b>	Tobacco abuse counseling
<b>Z87.891</b>	Personal history of nicotine dependence
<b>Z91.89</b>	Other specified personal risk factors, presenting as hazards to health not elsewhere classified

## Other Preventive Medicine Services

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### ORAL HEALTH

#### CPT® Code

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**99188** Application of topical fluoride varnish by a physician or other qualified health care professional

Refer to pages 17 and 18 for definition of *qualified health care professional*.

- Z30.46** Encounter for surveillance of implantable subdermal contraceptive
- Z30.49** Surveillance of other contraceptives

## HEALTH RISK ASSESSMENTS

### CPT® Codes

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- 96160** Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument (eg, CRAFFT)
- 96161** Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument

*NOTE:* Code **96161** can be reported for a postpartum screening administered to a mother as part of a routine newborn check but billed under the baby's name. Link to *ICD-10-CM* code **Z00.121** or **Z00.129** for normal screening results during a routine well-baby examination. Do *not* report *ICD-10-CM* code **Z13.31** or **Z13.32** under the baby, as those are *only for the maternal record*.

- ❖ Used to report administration of standardized health risk assessment instruments on the patient (**96160**) or a primary caregiver (eg, parent) on behalf of the patient (**96161**). Code **96161** requires that the questions and answers relate to the primary caregiver's health and behaviors, not the patient's.



- ❖ For newborn hearing screenings for young patients, including those patients who are nonverbal or have developmental delays, other hearing assessment methods may be more appropriate (refer to *CPT* codes **92558** and **92585–92588**).
- ❖ Codes **Z01.10** (encounter for examination of ears and hearing without abnormal findings) and **Z01.118** (encounter for examination of ears and hearing with other abnormal findings) are reported only when a patient presents for an encounter specific to ears and hearing, not for a routine well-child examination at which a hearing screening is performed.
- ❖ Failed hearing screenings will most likely result in a follow-up office visit (eg, **99212–99215**). Code **Z01.110** (encounter for hearing examination following failed hearing screening) is reported when a specific disorder cannot be identified or when the follow-up hearing screening findings are normal. You can also report **Z01.118** (encounter for examination of ears and hearing with other abnormal findings) and include the code for the abnormal findings (eg, **R94.120** [abnormal auditory function study]).

## DEVELOPMENTAL/AUTISM SCREENING AND EMOTIONAL/BEHAVIORAL ASSESSMENT

<i>CPT®</i> Codes		<i>ICD-10-CM</i> Codes	
<b>96110</b>	Developmental screening, per instrument, scoring and documentation	• <b>Z13.41</b>	Encounter for autism screening
		• <b>Z13.42</b>	Encounter for screening for global developmental delays (milestones)
<b>96127</b>	Brief emotional/behavioral assessment (eg, depression inventory) with scoring and documentation, per standardized instrument	<b>Z13.831</b>	Encounter for screening for depression

- ❖ Used to report administration of **standardized** developmental/autism screening instruments (**96110**) or behavioral/emotional assessments (**96127**).
- ❖ Often reported when performed in the context of preventive medicine services but may also be reported when screening or assessment is performed with other E/M services (eg, acute illness or follow-up office visits).
- ❖ Clinical staff (eg, registered nurse) typically administers and scores the completed instrument, while the physician incorporates the interpretation component into the accompanying E/M service.
- ❖ When a standardized screening or assessment is administered along with any E/M service (eg, preventive medicine service), both services should be reported, and modifier **25** (significant, separately identifiable E/M service by the same physician on the same day of the procedure or other service) may need to be appended to the E/M code to show the E/M service was distinct and necessary at the same visit.
- ❖ Examples of both **96110** and **96127** instruments can be found online at [https://www.aap.org/en-us/Documents/coding\\_factsheet\\_developmentalscreeningtestingandEmotionalBehvioreaassessment.pdf](https://www.aap.org/en-us/Documents/coding_factsheet_developmentalscreeningtestingandEmotionalBehvioreaassessment.pdf).

## Immunizations

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### IMMUNIZATION ADMINISTRATION

#### Pediatric Immunization Administration Codes

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**90460** Immunization administration (IA) through 18 years of age via any route of administration, with