



Amerigroup
RealSolutions
 in healthcare

Pediatric Encounter Form

Mail to:
 Claims Department
 Amerigroup
 P.O. Box 61010
 Virginia Beach, VA 23466-1010

Member Information	Provider Information
Last Name:	Provider Name:
First Name:	Phone #:
Member ID #:	Provider ID:
Date of Birth:	Fax:
Date of Visit:	Address:

Level of Care: Please check at least one CPT (Procedure) Code.

Preventive/Physical			Office Visit		Counseling	
Age	New	Established	New Patient	Established Patient	Code	Length of Time
< 1	99381	99391	99201	99211	99401	15 minutes
1-4	99382	99392	99202	99212	99402	30 minutes
5-11	99383	99393	99203	99213	99403	45 minutes
12-17	99384	99394	99204	99214	99404	60 minutes
18-39	99385	99395	99205	99215	99499	

Diagnosis Codes: Please indicate primary, secondary and tertiary codes (1, 2, 3).

If elements of wellness care were performed, please mark a well code as a secondary diagnosis.

Well-Child/Preventive ICD-9 Codes		
	285.9 Anemia, Unspec	278.00 Obesity, Unspec
V20.2 Check-Up Infant/Child	300.00 Anxiety Disorder	388.70 Otagia, Unspec
V70.0 Routine Physical (12+)	493.9 Asthma, Unspec	380.10 Otitis Externa, Unspec
V70.3 General Medical Exam	466.0 Bronchitis, Acute	381.00 Otitis Media, Acute Nonsupp
V70.5 Health Exam	490 Bronchitis	381.01 Otitis Media, Acute Serous
V70.6 Health Exam in Pop Survey	466.1 Bronchiolitis, Acute	382 Otitis Media, Acute Supp
V70.8 Other Specified Gen Med Exam	785.2 Cardiac Murmurs, Undx	382.9 Otitis Media, Unspec
V70.9 Gnrl Medical Exam, Unspec	380.4 Cerumen, Impacted	462 Pharyngitis, Acute
Counseling ICD-9 Codes	786.50 Chest Pain, Unspec	691.0 Rash, Diaper
V65.3 Dietary Counseling	372.00 Conjunctivitis, Acute	782.1 Rash, Nonspec
V65.41 Exercise	564.0 Constipation	795.5 Reaction to TB w/o

			Active TB
V65.42 Substance Use/Abuse	780.39 Convulsions		477.9 Rhinitis, Allerg, Unspec
V65.43 Injury Prevention	786.2 Cough		472.0 Rhinitis, Chronic
V65.44 HIV Counseling	464.4 Croup		110.9 Ringworm
V65.45 STD Counseling	311 Depression		461.9 Sinusitis, Acute, Unspec
Other Preventive ICD-9 Codes	691.8 Derm, Atopic and Related		034.0 Strep, Sore Throat
V72.0 Eye and Vision Exam	692.9 Derm, Contc/Eczma		110.5 Tinea Corporis
V72.1 Ear and Hearing Exam	787.91 Diarrhea		110.4 Tinea Pedis
V76.2 Routine Pap Smear	625.3 Dysmenorrhea		463 Tonsillitis, Acute
V22.1 Pregnancy, Supervision Other Norm	780.6 Fever		465.9 URI, Acute Unspec
V22.2 Pregnant State, Incidental	558.9 Gastroenteritis		599.0 UTI, Site Not Spec
Diagnoses	784.0 Headache		616.1 Vaginitis and Vulvovaginitis
789.00 Abd Pain, Unspec	487.1 Influenza w/Resp. Manif.		079.9 Other Viral Infection
706.1 Acne	132.9 Lice		Other
995.3 Allergy, Unspec	460 Nasopharyngitis		Other
Immunizations			
90646 Hib (booster)	90703 Tetanus	90716 Varicella	90748 HepB-Hib
90647 Hib (3 doses)	90718 DT (>7 yrs old)	90713 IPV	90723 DTaP-HepB-IPV (PEDIARIX)
90700 DTaP	90719 Diphtheria	90707 MMR	90657 Flu Shot (< 3 yrs old)
90701 DTP	90720 DTP-Hib	90710 MMRV	90658 Flu Shot (Split, > 3 yrs old)
90702 DT (<7 yrs old)	90721 DTaP-Hib	90744 Hep B	90669 PCV (Prevnar)
Laboratory Tests/Screening – For Data Collection Purposes			
83036 HbA1c	85025 CBC With Diff	82043 Microalbumin qty	86580 Tuberculosis, Mantoux
85018 Hemoglobin	85014 Hematocrit	81000 Urinalysis	87110 Chlamydia Culture
83655 Lead Screening	80061 Lipid Panel	87070 Throat Culture	Other
Print Physician Name			
Physician Signature and Date of Signature			