

Billing guidelines for developmental and mental health screening and assessment in primary care

Amerigroup Community Care would like to inform you about billing guidelines for developmental and mental health screenings and assessment in primary care. Recommendations from the *Maryland Healthy Kids Preventive Health Schedule*, examples of acceptable standardized tools, code-specific billing guidelines and limitations are outlined in these tables.

Table 1: Pediatric screening/assessments in the *Maryland Healthy Kids Preventive Health Schedule*

	Recommendation from the <i>Maryland Healthy Kids Preventive Health Schedule</i>	Examples of acceptable standardized tools	Billing guidelines	Limitations
Postpartum depression screening	Screening recommended at 1-, 2-, 4- and 6-month well-child checks. Providers may prescreen with <i>Patient Health Questionnaire-2 (PHQ-2)</i> to determine if a longer standardized screening tool is needed.	<ul style="list-style-type: none"> • <i>PHQ-9</i> • <i>Edinburgh Postnatal Depression Scale</i> 	<p>96161: Caregiver-focused health risk assessment may be billed only when a standardized screening tool is used. PHQ-2 may not be billed.</p> <p>Billing should occur under child's MA number.</p>	<p>96161 will be reimbursed up to 4 units total per child through age 12 months. Zero units will be reimbursed age 13 months and older.</p>
Developmental screening	Surveillance recommended at every well-child visit; use of standardized screening tool required for all children at 9, 18 and 24 months (and whenever concern).	<ul style="list-style-type: none"> • <i>Ages and Stages Questionnaires</i> • <i>Parents' Evaluation of Developmental Status</i> 	<p>96110: Developmental screening may be billed only when a standardized screening tool is used and results are documented.</p>	<p>96110 will be reimbursed up to 8 units total per child through age 5 years. Zero units will be reimbursed age 6 years and older.</p> <p>A maximum of 2 units of 96110 will be reimbursed per visit when both a general developmental screen and an autism screen are conducted, OR 96110 may be combined with other screening codes when appropriate (e.g., 96127) for a maximum of 2 units of screening reimbursed per visit.</p>

	Recommendation from the Maryland Healthy Kids Preventive Health Schedule	Examples of acceptable standardized tools	Billing guidelines	Limitations
Autism screening	Surveillance recommended at every well-child visit; use of standardized screening tool required for all children at 18 and 24 months (and whenever concern).	<ul style="list-style-type: none"> • <i>Modified Autism Checklist in Toddlers, Revised with Follow-Up: 16-30 months</i> 	96110: Developmental screening may be billed only when a standardized screening tool is used and results documented.	96110 will be reimbursed up to 8 units total per child through age 5 years. Zero units will be reimbursed age 6 years and older. A maximum of 2 units of 96110 will be reimbursed per visit, OR 96110 may be combined with other screening codes (e.g., 96127) for a maximum of 2 units of screening per visit.
Mental health/behavioral assessment	Annually beginning at 3 years of age. Use of standardized screening tool is recommended.	<ul style="list-style-type: none"> • <i>Pediatric Symptom Checklist (PSC-Y)</i> • <i>Strengths and Difficulties Questionnaire</i> • <i>Ages and Stages Questionnaire — Social Emotional (ASQ-SE)</i> • <i>Early Childhood Screening Assessment</i> 	96127: Brief emotional/behavioral assessment may be billed only when a standardized screening tool is used and results are documented.	A maximum of 2 units of 96127 will be reimbursed per visit, OR 96127 may be combined with other screening codes (e.g., 96110) for a maximum of 2 units of screening per visit.
Depression screening	Screening recommended annually beginning at 11 years of age. If providers choose, they can prescreen with <i>PHQ-2</i> to determine if a longer standardized screening tool is needed.	<ul style="list-style-type: none"> • <i>PHQ-9 Modified for Teens</i> • <i>PSC-Y</i> • <i>Center for Epidemiological Studies Depression Scale for Children</i> • <i>Beck Depression Inventory (BDI)</i> 	96127: Brief emotional/behavioral assessment may be billed only when a standardized screening tool is used and results documented. PHQ-2 may not be billed.	A maximum of 2 units of 96127 will be reimbursed per visit, OR 96127 may be combined with other screening codes (e.g., W7000) for a maximum of 2 units of screening per visit.

	Recommendation from the Maryland Healthy Kids Preventive Health Schedule	Examples of acceptable standardized tools	Billing guidelines	Limitations
Substance use assessment	<p>Annually beginning at 11 years of age; use of brief screening tool is recommended.</p> <p>Positive screens should be followed by brief intervention and referral for treatment when indicated (SBIRT: Screening, Brief Intervention and Referral to Treatment).</p>	<ul style="list-style-type: none"> • CRAFFT • CAGE-AID 	<p>W7000: Alcohol and/or substance use disorder screening may be billed only when a standardized screening tool is used and results are documented.</p> <p>W7020: Intervention; > 3 minutes up to 10 minutes</p> <p>W7021: Intervention; > 10 minutes up to 20 minutes</p> <p>W7022: Intervention; > 20 minutes</p>	<p>A maximum of 1 unit of W7000 will be reimbursed annually for recipients age 11 and up.</p> <p>W7000 may be combined with other screening codes (e.g., 96127) for a maximum of 2 units of screening per visit.</p> <p>A maximum of 4 interventions will be reimbursed annually per recipient age 11 and up.</p>

Table 2: Other pediatric mental health screening/assessments

	Recommendation from the Maryland Healthy Kids Preventive Health Schedule	Examples of acceptable standardized tools	Billing guidelines	Limitations
ADHD assessment	AAP clinical policy recommends use of ADHD-focused parent and teacher ratings scales as a component of screening/diagnosis when there is concern.	<ul style="list-style-type: none"> • <i>Vanderbilt ADHD Diagnostic Rating Scales – Parent and Teacher</i> • <i>Conners-3 Ratings Scales</i> • <i>ADHD Rating Scale-5 for Children and Adolescents</i> 	96127: Brief emotional/behavioral assessment may be billed only when a standardized screening tool is used and results are documented.	A maximum of 2 units of 96127 will be reimbursed per visit.
Other disorder-focused mental health screening/assessment	Disorder-focused mental health screening and assessment tools may be used when there is a specific concern (e.g., anxiety).	<ul style="list-style-type: none"> • <i>Screen for Childhood Anxiety Related Disorders</i> • <i>Spence Children’s Anxiety Scale</i> 	96127: Brief emotional/behavioral assessment may be billed only when a standardized screening tool is used and results are documented.	A maximum of 2 units of 96127 will be reimbursed per visit.

Table 3: Adult screening/assessments for mental health and substance use

	Recommendation from the Maryland Healthy Kids Preventive Health Schedule	Examples of acceptable standardized tools	Billing guidelines	Limitations
Depression screening	Standardized screening tool is recommended; if providers choose, they can prescreen with <i>PHQ-2</i> to determine if a longer screen is needed.	<ul style="list-style-type: none"> • <i>PHQ-9</i> • <i>BDI</i> 	96127: Brief emotional/behavioral assessment may be billed only when a standardized screening tool is used and results documented. <i>PHQ-2</i> may not be billed.	96127 may be combined with other screening codes (e.g., W7000) for a maximum of 2 units of screening per visit.
Substance use screening	Standardized screening tool is recommended. Positive screens should be followed by brief intervention and referral for treatment when indicated (SBIRT: Screening, Brief Intervention and Referral to Treatment).	<ul style="list-style-type: none"> • <i>Alcohol Use Disorders Identification Test (AUDIT)</i> • <i>Drug Abuse Screening Test (DAST)</i> • <i>Alcohol, Smoking, and Substance Involvement Test</i> • CRAFFT (under 21) 	<p>W7000: Alcohol and/or substance use disorder screening, self-administered, may be billed only when a standardized self-administered tool is used.</p> <p>W7010: Alcohol and/or substance use disorder screening, provider administered, may be billed only when a standardized provider administered tool is used.</p> <p>W7020: Intervention; > 3 minutes up to 10 minutes</p> <p>W7021: Intervention; > 10 minutes up to 20 minutes</p> <p>W7022: Intervention; > 20 minutes</p>	<p>A maximum of 1 unit of W7000 or W7010 will be reimbursed annually for recipients age 11 and up.</p> <p>W7000 and W7010 may be combined with other screening codes (e.g., 96127) for a maximum of 2 units of screening per visit.</p> <p>A maximum of 4 interventions will be reimbursed annually per recipient age 11 and up.</p>

Procedure codes

Code	Description	Current reimbursement 2018
96110	Developmental screening (e.g., developmental milestone survey, speech and language delay screen) with scoring and documentation, per standardized instrument	\$8.86
96127	Brief emotional/behavioral assessment (e.g., depression inventory, attention deficit/hyperactivity disorder scale), with scoring and documentation, per standardized instrument	\$4.71
96161	Administration of caregiver-focused health risk assessment instrument (e.g., depression inventory) for the benefit of the patient, with scoring and documentation, per standardized	\$4.06
W7000	Alcohol and/or substance (other than tobacco) use disorder screening; self-administered	\$5.14
W7010	Alcohol and/or substance (other than tobacco) use disorder screening; provider administered structured screening (e.g., <i>AUDIT</i> , <i>DAST</i>)	\$17.13
W7020	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 3 minutes up to 10 minutes	\$5.71
W7021	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 10 minutes up to 20 minutes	\$11.42
W7022	Alcohol and/or substance (other than tobacco) use disorder intervention; greater than 20 minutes	\$22.36

Links to publically available screening tools

PSC and PCS-Y:

- <https://mmcp.dhmd.maryland.gov/epsdt/healthykids/Documents/PSC-Y%20Teen%20Screen.pdf>
- https://www.brightfutures.org/mentalhealth/pdf/professionals/ped_symptom_chklist.pdf

Strengths and Difficulties Questionnaire: <http://www.sdqinfo.org/py/sdqinfo/b0.py>

Early Childhood Screening Assessment Tool: <http://www2.tulane.edu/som/tecc/upload/ECSA-Screen.pdf>

Early Childhood Screening Assessment Scoring Guide: <http://www2.tulane.edu/som/tecc/upload/ECSA-at-a-glance.pdf>

PHQ-2: http://www.cqaimh.org/pdf/tool_phq2.pdf

PHQ-9: Modified for Teens:

- <https://mmcp.dhmh.maryland.gov/epsdt/healthykids/AppendixSection4/PHQ-9%20Modified.pdf>
- https://www.aacap.org/App_Themes/AACAP/docs/member_resources/toolbox_for_clinical_practice_and_outcomes/symptoms/GLAD-PC_PHQ-9.pdf

Center for Epidemiological Studies Depression Scale for Children (CES-DC):

https://www.brightfutures.org/mentalhealth/pdf/professionals/bridges/ces_dc.pdf

CRAFFT Screening Tool — self-administered:

- <https://mmcp.dhmh.maryland.gov/epsdt/healthykids/Appendix2Risks%20Assessment%20Forms/CRAFFT%20Adolescent%20Substance%20Abuse%20Assessment%20%20Form-English.pdf>
- <http://www.ceasar-boston.org/CRAFFT/selfCRAFFT.php>

CRAFFT Screening Tool — clinician administered: <http://www.ceasar-boston.org/CRAFFT/screenCRAFFT.php>

CAGE-AID: <http://www.integration.samhsa.gov/images/res/CAGEAID.pdf>

AUDIT (Alcohol Use Disorders Identification Test): http://www.talkingalcohol.com/files/pdfs/WHO_audit.pdf

DAST-A (Drug Abuse Screening Test — Adolescent): <http://www.nams.sg/resources/Documents/DAST-A.pdf>

Vanderbilt Assessment Scales: <http://www.nichq.org/childrens-health/adhd/resources/vanderbilt-assessment-scales>

Screen for Childhood Anxiety Related Disorders: <http://www.pediatricbipolar.pitt.edu/content.asp?id=2333>

Spence Children's Anxiety Scale: http://www.scaswebsite.com/1_1_.html