

## EPSDT Coding Guide

### New Patient

Age	CPT Code	Description	ICD-CM Diagnosis Codes	HEDIS Measure
Infant (under 1 year)	99381	Initial comprehensive preventative medical evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Infant
Early Childhood (1-4 years of age)	99382	Initial comprehensive preventative medical evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Child (age 3 & 4)
Late Childhood (5-11 years of age)	99383	Initial comprehensive preventative medical evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Child (age 5 & 6)
Adolescent (12-17 years of age)	99384	Initial comprehensive preventative medical evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Adolescent Well care
18-20 years of age	99385 <b>(modifier EP required)</b>	Initial comprehensive preventative medical evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Adolescent Well care
	OR can use E&M CPT4 Codes 99202-99205	New Patient	CPT 4 codes must be used with these Z codes: Z76.2, Z00.121, Z00.129, Z00.110, Z00.00-01, Z02.0 – Z02.06, Z02.81 – Z02.83, Z02.89, Z00.6 Z00.5, Z00.70, Z00.71	

### Established Patient

Age	CPT Code	Description	ICD-CM Diagnosis Codes	HEDIS Measure
Infant (under 1 year)	99391	Periodic comprehensive preventative medical re-evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Infant
Early Childhood (1-4 years of age)	99392	Periodic comprehensive preventative medical re-evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Child (ages 3 & 4)
Late Childhood (5-11 years of age)	99393	Periodic comprehensive preventative medical re-evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Well Child (age 5 & 6)
Adolescent (12-17 years of age)	99394	Periodic comprehensive preventative medical re-evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Adolescent Well Care
18-20 years of age	99395 <b>(modifier EP required)</b>	Periodic comprehensive preventative medical re-evaluation including history, physical examination, development screen and anticipatory guidance; Labs and Immunizations, as appropriate	V20.2, V70.0, V70.3, V70.5, V70.6, V70.8, V70.9	Adolescent Well Care
	OR can use E&M CPT4 Codes 99213-99215	Established Patient	CPT 4 codes must be used with these Z codes: Z76.2, Z00.121, Z00.129, Z00.110, Z00.111, Z00.00-01, Z02.0 –Z02.06, Z02.81 –Z02.83, Z02.89, Z00.6 Z00.5, Z00.70, Z00.71	

### Screenings

Age	Screening	CPT code
12 and 24 months; 3-6 years of age if not previously screened	Lead Testing Screening	83655
3 – 20 years of age	Vision Screening	99173
3 – 20 years of age	Hearing Screening (Audio) or Hearing Screening (Pure tone-air only)	92551 or 92552

### Immunizations

Recommended Age	Abbreviation	Description	CPT Code	Comments
2-dose series 12-23 months	HepA	Hepatitis A vaccine, pediatric/adolescent dosage 2 dose schedule for intramuscular use	90633	Separate the 2 doses by 6-18 months
	HepA	Hepatitis A vaccine pediatric/adolescent dosage 3 dose schedule for intramuscular use	90634	
2, 4, and 6 months	HIB	Hemophilus influenza B vaccine (HIB) PRP-OMP conjugate 3 dose schedule for intramuscular use	90647	
2, 4, 6 and booster at 12-15 months	HIB	Hemophilus influenza B vaccine (HIB) PRP-T conjugate 4 dose schedule for intramuscular use	90648	
6 months and annually up to 35 months	Influenza	Influenza virus vaccine split virus preservative free for intramuscular use	90655	
3 years of age and annually	Influenza	Influenza virus vaccine split virus preservative free for intramuscular use	90656	
6 months and annually up to 35 months	Influenza	Influenza virus vaccine split virus for intramuscular use	90657	
3 years of age and annually	Influenza	Influenza virus vaccine split virus for intramuscular use	90658	
4 dose series 2, 4, 6 and 12-15 months	PCV13	Pneumococcal conjugate vaccine 13 valent for intramuscular use	90670	
2 years of age and annually	Influenza	Influenza virus vaccine quadrivalent live for intranasal use	90672	
3-dose series 2, 4 and 6 months	RV5	Rotavirus vaccine pentavalent 3 dose schedule live for oral use	90680	
2-dose series 2 and 4 months	RV1	Rotavirus vaccine human attenuated 2 dose schedule live for oral use	90681	
6 months and annually up to 35 months	Influenza	Influenza virus vaccine quadrivalent split virus preservative free intramuscular	90685	
-3 years of age- and annually	Influenza	Influenza virus vaccine quadrivalent split virus preservative free intramuscular	90686	
6 months and annually up to 35 months	Influenza	Influenza vaccine 4 valent	90687	
6 months 3 years of age and annually	Influenza	Influenza vaccine 4 valent	90688	
4 through 6 years of age See DTaP and IPV	DTaP-IPV	Diphtheria tetanus toxoids acellular pertussis and poliovirus vaccine inactivated (DTaP-IPV)	90696	
6 weeks – 4 years of age See DTaP, Hib and IPV	DTaP-HIB-IPV	Diphtheria and tetanus toxoids acellular pertussis vaccine hemophilus influenza type B and poliovirus vaccine inactivated (DTaP-HIB-IPV)	90698	
2, 4 and 6 months	DTaP	Diphtheria tetanus toxoids and acellular pertussis vaccine (DTaP) for intramuscular use	90700	
2-dose series 12-15 months and 4-6 years	MMR	Measles mumps rubella (MMR) live for subcutaneous use	90707	
2-dose series 12-15 month and 4-6 years	MMRV	Measles mumps rubella and varicella vaccine (MMRV) live for subcutaneous use	90710	
4-dose series 2, 4, 6-18 and 4-6 years	IPV	Poliovirus vaccine inactivated (IPV) for subcutaneous use	90713	
See DTaP Td may safely be given at the same time as other vaccines.	Td	Tetanus and diphtheria toxoids (Td) adsorbed preservative free for intramuscular use	90714	Td is usually given as a booster dose every 10 years but it can also be given earlier after a severe and dirty wound or burn.
3-dose series 11-12 years	HPV2-Females only HPV4-Males only	Human papilloma virus (HPV) types 6, 11, 16, 18 3 dose schedule intramuscular. Human papilloma virus (HPV) types 16, 18 bivalent 3 dose schedule intramuscular. Human papilloma virus (HPV) types 6, 11, 16, 18, 31, 33, 45, 52, 58 3 dose schedule.	90649 90650 90651	
11-12 years	Tdap	Tetanus diphtheria toxoids and acellular pertussis vaccine (Tdap) for intramuscular use	90715	
2-dose series 12-15 month and 4-6 years	VAR	Varicella virus vaccine live for subcutaneous use	90716	
5-dose series 2, 4 and 6 months and 15 – 18 months and 4 – 6 years of age	DTaP-HepB-IPV	Diphtheria tetanus toxoids acellular pertussis vaccine hepatitis B and poliovirus inactivated (DtaP-HepB-IPV) for intramuscular use	90723	

2-18 years	PPSV23	Pneumococcal polysaccharide vaccine 23 valent adult or immunosuppressed dosage for subcutaneous or intramuscular use	90732	Recommended as additional protection against pneumococcal disease in kids ages 2-18 years if they have certain chronic health conditions, including heart, lung, or liver disease; diabetes; kidney failure; a weakened immune system (such as from cancer or HIV infection); or cochlear implants.
11-12 years Booster at 16 years	Meningococcal	Meningococcal conjugate vaccine serogroups A, C, Y and W-135 tetravalent for intramuscular use	90734	
3-dose series At Birth, 1 -2 month, 6 – 18 months	HepB	Hepatitis B vaccine pediatric/adolescent dosage 3 dose schedule for intramuscular use	90744	Infants that did not receive a birth doses
	HepB-HIB	Hepatitis B and hemophilus influenza B vaccine (HepB-HIB) for intramuscular use	-90746	