Texas Health Steps Quick Reference Guide

Remember: Use Provider Identifier • Use Benefit Code EP1

Texas Health Steps Medical Checkup Billing Procedure Codes

Texas Hea	alth Steps Mee	dical Checkups			Tuberc	ulin Ski	n Testing (TST)				
99381	99382	99383	99384	99385*	Use pro	cedure co	de 86580 for TST. P	Procedure code	e 86580 may be		
99391 * For clients w	99392	99393 20 years of age, use diag	99394	99395*	reimbursed on the same day as a checkup.						
* For clients who are 18 through 20 years of age, use diagnosis code Z0000 or Z0001. Texas Health Steps Follow-up Visit					Oral Evaluation and Fluoride Varnish						
			6.11		Use pro	cedure co	de 99429 with U5 n	nodifier.			
Use proced	ure code 99211	for a Texas Health S	steps follow	v-up visit.	Develo	nmental	and Autism Scre	Pening			
ICD-10 Diagnosis Codes					Developmental and Autism Screening Developmental screening with use of the ASQ, ASQ:SE or PEDS is reported						
Z00110	· 0 1				using procedure code 96110.						
Z00111						Autism screening with use of the M-CHAT or M-CHAT R/F is reported					
Z00129	0121 Routine child exam, abnormal				using procedure code 96110 with U6 modifier. Mental Health Screening						
Z00121 Z0000											
Z0000 Z0001						Mental Health Screening in adolescents with the use of the PSC 17, PSC-35,					
						Y-PSC, PHQ-9, PHQ-A (depression screen), CRAFFT, and PHQ-A (Anxiety mood, substance use) is reported using procedure code 96160 or 96161.					
	Care Lead Tes		1						code 96160 or 96161 reimbursed per cliei		
		vith QW modifier to pleted using point-of		an initial blood lead	calenda			5101 <i>)</i> may be	entroursea per ener		
		-		יסי 		•	ssion screening with	n the use of a va	alidated screening to		
	ations Admin				includin	g the Edir	burgh Postnatal De	pression Scale	, PHQ-9 or Postpart		
		when immunizations	s are admin	1					ure code G8431 or G eimbursed per client		
Procedure				Vaccine	Only on	e procedu	1e code (08431 01 0	(6510) Illay De I	ennoursed per chem		
90632 or 90633 [†] with (90460/90461 or 90471/90472)			Hep A	Modifiers							
90620 [†] or 90621 [†] with (90460/90461 or 90471/90472)			MenB	Performing Provider							
90636 with (90460/90461 or 90471/90472)			Hep A/Hep B	Use to indicate the practitioner who is performing the unclothed physical examination component of the medical checkup.							
90644			Hib-MenCY		•••••••		÷	U7 (Dharai ai a			
90647 [†] or 90648 [†] with (90460/90461 or 90471/90472)			Hib	AM (Ph	ysician)	SA (Nurse Practitioner)	TD (Nurse)	U7 (Physicia Assistant)			
90650 or 90651 ^{\dagger} with (90460/90461 or 90471/90472)			HPV	Excepti	on to Pe	<u>.</u>	. <u>i</u>				
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90630, 90654, 90655 [†] , 90656 [†] , 90657 [†] , 90658 [†] , 90685 [†] , 90686 [†] , 90687 [†] or 90688 [†] with (90460/90461 or 90471/90472); 90660 [†] or 90672 [†] with (90460/90461 or 90473/90474); 90661, 90673, 90674, 90682 or 90756 [†] with (90471/90472)			Influenza								
				23 (Unu Anesthe		32 (Mandated S	Services)	SC (Medically			
						<u> </u>		Necessary)			
				-	and RHC		(C) providers n	nust use modifier EP			
90670 [†] with (90460/90461 or 90471/90472)			PCV13	<ul> <li>Federally qualified health center (FQHC) providers must use modifier EP for</li> <li>Texas Health Steps medical checkups. Rural health clinic (RHC) providers mu</li> </ul>							
90680 ⁺ or 90681 ⁺ with (90460/90461 or 90473/90474)			Rotavirus	bill place	e of service	e 72 for Texas Health	Steps medical	checkups.			
90696 ⁺ with (90460/90461 or 90471/90472)			DTaP-IPV	Vaccine/Toxoids							
90698 [†] with (90460/90461 or 90471/90472)			DTap-IPV-Hib	Use to indicate a vaccine/toxoid <i>not available</i> through TVFC and the							
90700 ⁺ with (90460/90461 or 90471/90472)			DTaP	number of state defined components administered per vaccine.							
90702 [†] with	0702 [†] with (90460/90461 or 90471/90472)			DT	U1 Vaccine/toxoid privately purchased by provider when TVFC vaccine/toxoid is not available						
90702 With	n (90460/90461	or 90471/90472)		MMR	Vaccine Administration and Preventive E/M Visits						
				MMRV	Use with Texas Health Steps preventive visit checkup procedure codes to indicate a significant, separately identifiable E/M service that was rendered by						
90707† with		or 90471/90472)									
90707† with 90710† with	n (90460/90461	or 90471/90472) or 90471/90472)		IPV							
90707† with 90710† with 90713† with	n (90460/90461 n (90460/90461	· · · · · · · · · · · · · · · · · · ·			indicate	a significa	nt, separately identi	fiable E/M serv			
90707† with 90710† with 90713† with 90714† with	n (90460/90461 n (90460/90461 n (90460/90461	or 90471/90472)		IPV	indicate	a significa provider	nt, separately identi	fiable E/M serv he immunizat	rice that was rendered ion administration.		
90707 [†] with 90710 [†] with 90713 [†] with 90714 [†] with 90715 [†] with	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461	or 90471/90472) or 90471/90472)		IPV Td	indicate the same 25	a significa provider Significa	nt, separately identi- on the same day as t ant, separately iden	fiable E/M serv he immunizat	rice that was rendered ion administration.		
90707 [†] with 90710 [†] with 90713 [†] with 90714 [†] with 90715 [†] with 90716 [†] with	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461	or 90471/90472) or 90471/90472) or 90471/90472)		IPV Td Tdap	indicate the same 25 <b>Condit</b>	a significa provider Significa ion Indi	nt, separately identi on the same day as t ant, separately iden cator Codes	fiable E/M serv he immunizat tifiable evalua	ice that was rendered ion administration. tion		
90707 [†] with 90710 [†] with 90713 [†] with 90714 [†] with 90715 [†] with 90716 [†] with	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461	or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472)		IPV Td Tdap Varicella	indicate the same 25 <b>Condit</b>	a significa provider Significa <b>ion Indi</b> he Condi	nt, separately identi on the same day as t ant, separately iden cator Codes	fiable E/M serv he immunizat tifiable evalua	rice that was rendered ion administration.		
90707 [†] with 90710 [†] with 90713 [†] with 90714 [†] with 90715 [†] with 90716 [†] with 90723 [†] with	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461	or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472)	472)	IPV Td Tdap Varicella DTap-Hep B-IPV	indicate the same 25 <b>Condit</b> One of t	a significa provider Significa ion Indi he Condi not.	nt, separately identi on the same day as t ant, separately iden cator Codes	fiable E/M serv he immunizat tifiable evalua ow is required	rice that was rendered ion administration. tion whether a referral w		
90707 [†] with 90710 [†] with 90713 [†] with 90714 [†] with 90715 [†] with 90716 [†] with 90723 [†] with 90732 [†] with 90733 or 90 [°]	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 734 ⁺ with (90460	or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472)	172)	IPV Td Tdap Varicella DTap-Hep B-IPV PPSV23	indicate the same 25 <b>Condit</b> One of t made or	a significa provider Significa ion Indi he Condi not.	nt, separately identi on the same day as t ant, separately iden cator Codes tion Indicators belo	fiable E/M serv the immunizat tifiable evalua ow is required es Desci	rice that was rendered ion administration. tion whether a referral w r <b>iption</b>		
90707 ⁺ with 90710 ⁺ with 90713 ⁺ with 90714 ⁺ with 90715 ⁺ with 90716 ⁺ with 90723 ⁺ with 90732 ⁺ with 90733 or 90 ⁺	n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 n (90460/90461 734 ⁺ with (90460 44 ⁺ , or 90746 with	or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472) or 90471/90472)	172)	IPV Td Tdap Varicella DTap-Hep B-IPV PPSV23 MPSV4	indicate the same 25 Condit One of t made or Referra	a significa provider Significa ion Indi he Condi not.	nt, separately identi on the same day as t ant, separately iden cator Codes tion Indicators belo Indicator Cod	fiable E/M serv the immunizat tifiable evalua ow is required es Descu Not u	rice that was rendered ion administration. tion whether a referral w		

## **Contact Information**

Texas Health Steps Medical Checkup Claims Inquiries Call 1-800-757-5691 to obtain answers to questions or determine the status of claims. For managed care clients, contact the client's MCO.Texas Health Steps Website General information for providers including forms, details on the required components of checkups, and other helpful resources. www.dshs.texas.gov/thsteps/default.shtmTexas Health Steps Child Health Record Forms and Texas Health Steps Provider Outreach Referral Form may be downloaded from the Texas Health Steps website at: www.dshs.texas.gov/thsteps/forms.shtmOnline catalog of Texas Health Steps publications: www.dshs.texas.gov/thsteps/THStepsCatalog.shtm	<ul> <li>Laboratory         The Department of State Health Services (DSHS) Laboratory performs testing for Texas Health Steps and NBS clients for the State of Texas. The following provides contact information for ordering laboratory supplies, inquiries on collection, submission and shipping of specimens, and obtaining test results.     </li> <li>For Texas Health Steps         Requests for Texas Health Steps laboratory supplies should be made on Form G399 and can be submitted to the DSHS Laboratory Container Preparation Group by:         Email: ContainerPrepGroup@dshs.state.tx.us         Fax: (512) 776-7672         Phone: (512) 776-7661 or 1-888-963-7111, Ext 7661         Specimen shipping questions, call (512) 776-7569 or 1-888-963-7111, Ext 7569         Specimen collection and submission questions, call (512) 776-6236 or 1-888-963-7111, Ext 6236         Test result inquiries, call (512) 776-7578 or Fax (512) 776-7533         Online Results: Access Texas Health Steps test results online using the Results - Web Portal web application for Clinical Chemistry. To gain access, download, complete, and submit the required access forms. They are available at: www.dshs.texas.gov/lab/remotedata.shtm         For gonorrhea and chlamydia adolescent screening supplies, specimen collection and submission questions, call the DSHS Laboratory Customer Service, (512) 776-6030 or 1-888-963-7111, Ext 6030 or go to the DSHS website: www.dshs.texas.gov/lab/sero_about.shtm     </li> <li>For NBS         A written request for Newborn Screening (NBS) specimen collection form (NBS3) is required. To obtain an order form for written requests, call the Container Preparation Group at (512) 776-7661 or 1-888-963-7111, Ext 766.         Specimen submission and testing questions, call (512) 776-7333 or 1-888-963-7111, Ext 733         Test result inquiries, call (512) 776-7578 or Fax (512) 776-7533 or 1-888-963-7111, Ext 733     </li> </ul>				
Www.dshs.texas.gov/insteps/THStepsCatalog.shtmTexas Health Steps Outreach & Informing ServiceInformation for Texas Health Steps clients to expand awareness of existing medical, dental, and case management services. Provider information to include missed appointment referral services. 1-877-THSteps (847-8377), Monday to Friday, 8am-6pmTexas Health Steps Online Provider Education Website					
Free comprehensive online continuing education modules designed for health-care providers. All modules provide continuing education units (CEUs) for multiple disciplines and include information about Texas Health Steps, Medicaid for children and other health-care services. www.txhealthsteps.com					
Case Management for Children and Pregnant Women (512) 776-2168   www.dshs.texas.gov/caseman Texas Immunization Registry (ImmTrac2) 1-800-348-9158 www.dshs.texas.gov/immunize/immtrac/default.shtm					
Texas Vaccines for Children Program (TVFC) 1-800-252-9152 www.dshs.texas.gov/immunize/tvfc/default.shtm					
Early Childhood Intervention (ECI) 1-800-628-5115   hhs.texas.gov/services/disability/early- childhood-intervention-services					
Childhood Lead Poisoning Prevention Program 1-800-588-1248   www.dshs.texas.gov/lead/default.shtm Vendor Drug Program (fee-for-service)	Online Results: Access Newborn Screening (NBS) test results     online using the Texas NBS Web Application. To gain access,     download, complete, and submit the required access forms. They     are available at: www.dshs.texas.gov/lab/remotedata.shtm				
The Medicaid Vendor Drug Program makes payments to contracted pharmacies for prescriptions of covered outpatient drugs for Texas Medicaid, CSHCN Services Program, Kidney Health Care Program, and CHIP. Some Medicaid-covered drugs may require prior authorization (PA) through PA Texas.	To Report Potential Medicaid Fraud HHSC Client or Provider Fraud Investigations: 1-800-436-6184 oig.hhsc.texas.gov				
Texas Prior Authorization Call Center: 1-877-728-3927 or online: https://paxpress.txpa.hidinc.com	Comprehensive Care Program (CCP)Telephone: 1-800-846-7470Fax: (512) 514-4212				
(for prior authorizations of non-preferred drugs only) General information, covered drug list, online pharmacy, and prescriber searches: www.txvendordrug.com	Medical Transportation Program (MTP) 1-877-633-8747 hhs.texas.gov/services/health/medicaid-chip/programs/texas- medicaid-chip-medical-transportation-program				
www.txvendordrug.com/about/policies-and-procedures/ procedure-manual For managed care clients: Contact the client's MCO.	Texas Medicaid & Healthcare Partnership (TMHP)General Inquiries Line: 1-800-925-9126www.tmhp.com				