



CABINET FOR HEALTH AND FAMILY SERVICES
Department for Medicaid Services

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Eric C. Friedlander
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MEMO

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RE: Guidance on Well Child Visits during COVID-19

Kentucky Medicaid understands the challenges being faced by primary care providers during the COVID-19 emergency, especially as it relates to completing important preventive care visits for children. DMS will reimburse at the same rate as an in-person visit as for a telehealth well child visit. We have developed specific guidance to be used during the time of emergency for our fee for service and managed care populations.

For children age 24 months and younger:

- Recommendation: Continue in-person well child visits in order to receive necessary immunizations and other screenings.

For children over age 24 months:

- Recommendation: Providers may perform well child visits using telehealth modalities reporting the appropriate preventive medicine CPT codes and adding the place of service code "02" on the billing form. No telehealth modifiers are required. Providers will need to use their clinical judgement as to what components of the visit are appropriate to be performed during the telehealth visit. Audio-visual telehealth is preferred, but audio only is acceptable.
- Coding and Documentation: Report the appropriate Preventive Medicine CPT Code (99382-5, 99392-5) and place of service code (02). For all well child visits completed via telehealth clear documentation must be provided in the record stating the visit was completed via telehealth due to COVID-19 emergency and include any limitations of the visit (i.e., vaccinations, vision or hearing screening, labs). Additional procedural codes may be included as appropriate (i.e., developmental screening - 96110, behavioral/emotional assessment - 96127, health risk assessment – 96160, 96161).
- Immunizations: Providers may provide vaccine counseling during the telehealth visit and then provide the vaccine administration later. The vaccine administration code, 90460, would be billed at the time of vaccine administration.
- Follow-up after COVID-19 Emergency: Any member that receives a preventive medicine visit via telehealth should have an in-person follow-up visit within 6 months of the end of the declared emergency to complete the rest of the components of the well child visit that were not able to be performed via telehealth. For the in-person visit, the follow-up visit code of 99213 should be billed and well-child-visit can be used as a diagnosis code if another more specific code is not apparent.