

SBHC Encounter Form (rev 07/01/2016)

SBHC: _____

Date: _____

Name: _____

ID#: _____

DOB: / / M F

Confidential Visit : Y N

SBHC NPI: _____

INSURANCE IDENTIFICATION

Company Name: _____

Insurance #: _____

Provider Name/NPI: _____

Signature: _____

ON-SITE LAB TESTS

<input checked="" type="checkbox"/>	CPT	Description
		No labs given
	36415	Venipuncture
	80061	Lipid panel
	81000	Urinary - dip stick
	81001	Urinary,auto.-micro
	81002	Urinary,non-auto-no micro.
	81003	Urinary, auto.-no micro.
	81015	Urine - microscopic only
	81025	Urine preg. test-by visual color
	82270	Guaiac, occult blood
	82465	Cholesterol, total
	82947	Glucose; quantitative; blood
	82948	hCG preg. test (urine) qualitative
	82962	Glucose monitoring devise
	84703	hCG preg. test (urine) qualitative
	85013	Hematocrit
	85018	Hemoglobin
	86308	Mono-spot screen
	86677	H. pylori antibody
	87210	Wet mount (e.g., saline) for infect. agents
	87430	Streptococcus, group A culture (NON BILLABLE)
	87491	Urine CT/GC - amplified probe (NON BILLABLE)
	87880	Streptococcus, group A (rapid strep test)
	92567	Tympanometry-impedance testing

OFFICE VISIT

<input checked="" type="checkbox"/>	ESTAB	<input checked="" type="checkbox"/>	NEW	Consider use of Modifier 25 (write in +25 after E/M code) if separate services provided at same encounter
	99211			Minimal evaluation
	99212		99201	Problem focused
	99213		99202	Expanded problem focused
	99214		99203	Detailed
			99204	Comp, mod complexity 45 min
	99215		99205	Comp, high complexity
	99354		99354	Add on code 99215 or 99205 prolong svc pt contact >75 min

TEAM CONFERENCE

99366	Initial assess/intervention
99367	Pt/family not present 30 min provider
99388	Pt/family not present 30 min without provider

INDIVIDUAL MEDICAL NUTRITION THERAPY 15 MIN EACH

97802	Initial assess/intervention
97803	Re-assess/intervention

BEHAVIORAL HEALTH

		COMPLEX INTERACTIVE ENCOUNTERS
90832	Individual psych. 30 min	
90833	Individual psych. 30 min E/M	
90834	Individual psych. 45 min	Report with interactive code 90785
90836	Individual psych. 45 min E/M	Report with interactive code 90785
90837	Individual psych. 60 min	Report with interactive code 90785
90838	Individual psych. 60 min E/M	Report with interactive code 90785
90846	Family therapy no pt present	Report with interactive code 90785
90847	Family therapy pt present	Report with interactive code 90785
90853	Group therapy	
90863	Psych. Pharmacologic mgmt	
H0031	Mental health assess. non physician	
H2001	Crisis intervention each 15 min	

Depression Screening

G8431	Adolescent depression screen, positive
G8510	Adolescent depression screen, negative
99420	Depression screen, still used by private payers

Substance Abuse Screening / Assessment Codes

H0049	CRAFFT, neg screen without brief intervention - SBIRT
99408	CRAFFT with brief intervention 15-30 min SBIRT
99409	CRAFFT with brief intervention 30+ min SBIRT

Health & Behavioral Assessment / Intervention – Integrated Visit Codes

96150	Health & behavior assessment, each 15 min FtF w patient, initial assessment
96151	Re-assessment
96152	Health & behavior intervention, each 15 min FtF, individual
96153	Group (2 or more patients)
96154	Family (with the patient present)
96155	Family (without the patient present)

Case Management

T1016	Coord. pt care with primary and BH (case management, each 15 min)
T1017	Targeted case management, each 15 min
T2022	Case management, per month
T2023	Targeted Case management, per month

EPSDT WELL CHILD EXAM / PREVENTIVE MEDICINE

<input checked="" type="checkbox"/>	ESTAB	<input checked="" type="checkbox"/>	NEW		<input checked="" type="checkbox"/>	PREVENT. MEDICINE COUNSELING
	99391		99381	Infant		99401 15 min
	99392		99382	1 – 4 years		99402 30 min
	99393		99383	5 – 11 years		99403 45 min
	99394		99384	12 – 17 years		99404 60 min
	99395		99385	18 – 39 years		

PROCEDURES

Consider use of Modifier 59 (write in +59 after procedure code) if procedural services provided at same encounter

10060	I & D Sample
10120	I & D of foreign body, subcutaneous (simple) or complete, for permanent removal
11730	Avulsion of nail plate (simple)
11740	Evacuation of subungual hematoma
11750	Excision of nail and nail matrix, partial or complete for permanent removal
12001	Suturing—specify body part
11981	Implant insertion
11985	Implant removal
11983	Implant removal & re-insertion
12031	Layer closure scalp wounds, axillae, trunk and/or extremities (excl. hands & ft) 2.5 cm
16000	Initial tx—1st deg burn (loca)< doc % coverage and depth
17110	Wart removal
26641	Closed tx of carpometacarpal (thumb) dislocation
28190	Removal of foreign body, foot, subcutaneous
29130	Application of finger splint (static)
30300	Removal of foreign body, intranasal
54050	Destruction of lesion(s), penis
56501	Destruction of lesion(s), vulva
58300	IUD insertion
58301	IUD removal
69200	Removal foreign body from external auditory canal
69210	Removal impacted cerumen (one or both ears)
57220	KOH for skin/hair/nails
92551	Hearing screen
94640	Nebulizer treatment
94010	Spirometry
99173	Vision screen

LEGEND

	CDPHE Performance Measures
	Medical
	Behavioral Health
	Both Medical/Behavioral or either

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ORAL HEALTH CODES		
<small>Available to qualified medical professionals (These codes also used by dental professionals)</small>		
D0145	Oral health evaluation & counseling with pri-mary caregiver (0-2 yrs)	
D0190	Oral health screening (ages 3-20 yrs)	
D1206	Topical fluoride varnish (ages 0-20 yrs)	

CDPHE PERFORMANCE MEASURES

Well Child Check

Z00.121	Routine child health exam with abnormal findings
Z00.129	Routine child health exam without abnormal findings
Z00.00	General adult medical exam without abnormal findings
Z00.01	General adult medical exam with abnormal findings
99382	Well Child Exam/Preventive Medicine New patient: aged 1-4 years
99383	Well Child Exam/Preventive Medicine New patient: aged 5-11 years
99384	Well Child Exam/Preventive Medicine New patient: aged 12-17 years
99385	Well Child Exam/Preventive Medicine New patient: aged 18+ years
99392	Well Child Exam/Preventive Medicine Established patient: aged 1-4 years
99393	Well Child Exam/Preventive Medicine Established patient: aged 5-11 years
99394	Well Child Exam/Preventive Medicine Established patient: aged 12-17 years
99395	Well Child Exam/Preventive Medicine Established patient: aged 18+ years

IMMUNIZATIONS

Immunizations Administration with provider counseling

90460	One immunization—Child 0-18 years	90461	Each additional vaccine
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Immunizations Administration without provider counseling

90471	One immunization by PERC ID SC or IM—adult	90472	Each additional vaccine
90473	One immunization by IN or PO route—adult	90474	Each additional vaccine

90620	Meningoc. recombinant prot & other membrane vesicle vaccine sergrp B, 2 dose IM	90669	Pneumococcal Conjugate, IM <5 yo
90621	Meningoc. lipoprotein recombinant, serogrp B, 2-3 dose, IM	90700	Dtap < 7yrs
90630	Influenza, quadrivalent, intradermal	90702	Diphtheria and Tetanus (DT) < 7yrs
90645	Diphtheria and Tetanus (DT) < 7yrs	90707	Measles, Mumps, Rubella
90646	HIB(PRP-D) [ProHIBIT]	90712	Poliovirus
90647	HIB(PRP-OMP) [PedvaxHIB]	90713	IPV (polio)
90648	HIB(PRP-T) [ActHIB or OmniHIB]	90714	Tetanus and Diphtheria (Td) >7 yrs
90649	HPV males/females 9-10 and 19-26 HB	90715	Tdap > 7yrs
90649	HPV males/females 11-18	90716	Varicella SQ
90651	HPV 9-valent, recombinant, 3 dose, IM	90732	Pneumococcal poly-valent, SQ or IM
90657	Influenza (split virus 6-35 mo.)	90733	Meningococcal(polysaccharide, SQ)
90658	Influenza (split virus 3 yrs +)	90734	Meningococcal conjugate vaccine, serogroups A, C, Y and W-135 (tetravalent)
90660	Influenza virus vaccine, live, intranasal (Flumist)	90744	Hep B 3 dose IM
90633	Hep A	90748	Hep B/Hib Combination IM

MEDICATIONS, SUPPLIES & DURABLE MEDICAL EQUIPMENT

J0696	Injection, Ceftriaxone 250mg IM per vial	A4261	Cervical cap for contraceptive use
J0171	Adrenaline, epinephrine up to 1ml	A4266	Diaphragm for contraceptive
J1050	Injection, medroxyprogesterone acetate, 1 mg	A4267	Condom, Male
J2250	Promethazine HCl, injection up to 50 mg	A4268	Condom, Female
J7298	Levonorgestrel-releasing intrauterine (Mirena)	A4269	Spermicidal agent
J7300	Intrauterine copper contraceptive (Paragard)	A4614	Peak flow meter, hand held
J7303	Hormone Containing Vaginal Ring (Nuvaring)	J8499 U1	Etenogestrel contraceptive implant system (i.e. Nexplanon)
J7304	Hormone Containing Patch (Ortho Evra)	S4989	IUD other than above (Progestacert)
J7611	Albuterol, concentrated form, 1 mg	S4993	Contraceptive pills for birth control
J7613	Albuterol, unit dose form, 1 mg	Q0144	Azithromycin oral powder 1 gm. Mang.Care only
J7297	Liletta		
J7301	Skyla		

Body Mass Index

Z68.51	BMI less than 5th percentile for age
Z68.52	BMI 5th percentile to less than 85th percentile for age
Z68.53	BMI 85th percentile to less than 95th percentile for age
Z68.54	BMI greater than or equal to 95th percentile for age
E66.01	Morbid obesity due to excess calories
E66.09	Other obesity due to excess calories
E66.3	Overweight
E66.8	Other obesity
E66.9	Obesity, unspecified

Nutrition Counseling

Z71.3	Dietary counseling and surveillance
97802	Individual medical nutrition therapy: initial assessment/intervention
97803	Individual medical nutrition therapy: re-assess/intervention

Physical Activity Counseling

Z71.89	Other specified counseling
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Chlamydia Screening

Z11.8	Encounter for screening for Chlamydia
Z11.3	Screening for infections with predominately sexual mode of transmission

Depression Screening

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Oral Health

D0190	Oral health screening: aged 3-20 years
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FOLLOW UP

Return to SBHC (follow-up date): _____

To Provider: _____

REFERRAL

To: _____

DIAGNOSIS (ICD-10):
(Code # and Name)
