



Well Baby/Well Child Care Visits Payment Policy

Policy

Fallon Community Health Plan will reimburse for well baby/well child care visits, provided by a credentialed and contracted physician/provider.

Definitions

This policy applies to the payment for well baby/well child care visits when provided by a Fallon Community Health Plan contracted provider.

Benefits application

Commercial

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care

Senior Plan

- Fallon Senior Plan™
- Fallon Senior Plan Preferred

Reimbursement

FCHP reimburses for well baby/well child care visits as recommended by a licensed physician. The FCHP benefits and the American Academy of Pediatrics recommended schedule of visits are:

Age	Benefit	Recommended visits
0 to 1	At least six visits	1 to 2 weeks and 1, 2, 4, 6, 9 and 12 months
1 to 2	At least three visits	15, 18 and 24 months
2 to 6	Annually	Annually
6 to 18	As recommended by physician	Annually

This includes the following services, as recommended by a licensed physician: physical examination; history; measurements, sensory screening; neuro-psychiatric evaluation; development screening and assessment.

Referral/notification/preauthorization requirements

There are no referral/preauthorization requirements for well baby/well child care visits when provided by a contracted FCHP primary care physician within the member's product network.

Billing/coding guidelines

For new patients making a well baby/well child care visit:

- For infants under age 1, use CPT code 99381.
- For children ages 1 to 4 (early childhood), use CPT code 99382.
- For children ages 5 to 11 (late childhood), use CPT code 99383.
- For children ages 12 to 17 (adolescent), use CPT code 99384.
- For children age 18 (adolescent), use CPT code 99385.

For established patients making a well baby/well child care visits:

- For infants under age 1, use CPT code 99391.
- For children ages 1 to 4 (early childhood), use CPT code 99392.
- For children ages 5 to 11 (late childhood), use CPT code 99393.
- For children ages 12 to 17 (adolescent), use CPT code 99394.
- For children age 18 (adolescent), use CPT code 99395.

Place of service

This policy applies to services rendered in an outpatient setting.

Policy history

Origination date:	07/09/2003
Previous revision date(s):	07/07/2004, 07/05/2006, 06/20/2007
Current review date and details:	06/30/08 - Differentiated new and established patients

This payment policy has been developed to provide information regarding general billing, coding and documentation guidelines for FCHP. Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member individual benefit plans may apply and this policy is not a guarantee of payment. FCHP reserves the right to apply this payment policy to all FCHP companies and subsidiaries.