

COMPLETING A WELL VISIT DURING A SICK VISIT

Provider Education Series



Did you know TrueCare™ pays for a well visit completed on the same days as a sick visit?

Children will often only visit their provider when sick. Caregivers may experience barriers to scheduling a well visit such as being unable to miss work. Completing the well visit during the sick visit may be the only opportunity the provider has to complete a well visit during the year and give any immunizations the child needs. Therefore, all Medicaid Managed Care Plans provide payment for a combination of certain services on the same day including sick visits, well visits, immunizations and labs (including lead).

How to Bill

When a patient is seen in the office for a well visit as a new or established patient, providers can bill that diagnostic exam as an E&M-25. Providers should reference the most up-to-date sources of professional coding guidance for valid Current Procedural Terminology (CPT)/Healthcare Common Procedure Coding System (HCPCS) codes.

To receive payment, follow the billing guidelines below:

Visit Type	ICD-10 codes	CPT codes	Modifiers
Well Visit	Z00.129	(99381-5 or 99391-5)	EP modifier is required
Well + Immunizations	Z00.129, Z23	(99381-5 or 99391-5)	EP modifier is required, in addition to a 25modifier
Well + Sick	Z00.121 AND appropriate sick ICD-10 code	(99381-5 or 99391-5) and 99202-99205,99211-99215	EP modifier is required, in addition to a 25 modifier
Well + Sick + Immunizations	Z00.121, Z23, AND appropriate sick ICD-10 code	(99381-5 or 99391-5) and 99202-99205, 99212-99215	EP and 25 modifiers are both required on E/M and preventive code.

Applicable E/M codes 99202-99205, 99211-99215 may be reported along with the preventive visit (99381-99385, 99391-99395).

Best Practices for Improving Well Visits in Your Practice

- Consider every visit an opportunity for a well visit and an immunization visit.
- Schedule the next well visit during checkout.
- Collaborate with your electronic health record (EHR) vendor to incorporate pop-up alerts for preventive services.
- Check payer-specific provider portal when a member presents to your office without their insurance card.
- Clarify payer procedures for covering well visits every calendar year, not every 365 days.