

PL1063 0521

## **Prop. 56: Developmental Screenings**

## **Program Information**

Service	Population	CPT Code	Supplemental Payment
Developmental Screenings	children, 9-30 months	96110 without modifier KX	\$59.90

## **Program Eligibility & Requirements\***

- Network Providers
  - o FQHCs, CBRCs, IHCPs are eligible
- Must adhere to American Academy of Pediatrics/Bright Futures guidelines for visits at:
  - 9-months (on or before 1<sup>st</sup> birthday)
  - 18-months (after 1<sup>st</sup> birthday and on or before 2<sup>nd</sup> birthday)
  - 30-months (after 2<sup>nd</sup> birthday and on or before 3<sup>rd</sup> birthday)
  - When medically necessary
- Use standardized developmental screening tool\*\*
- Dates of Service (DOS) on or after 1/1/2020

## **Documentation Requirements**

- Screening tool used
- Review of completed screening
- Results of the screening

- Interpretation of the results
- Discussion with the Member/ family
- Any appropriate actions taken

This documentation must remain in the Member's medical record and be available upon request.

<sup>\*\*</sup> For a list of screening tools: https://www.dhcs.ca.gov/provgovpart/Documents/Developmental-Screenings-Policy-10.3.pdf



<sup>\*</sup> For more information: https://www.dhcs.ca.gov/Documents/Capitated\_Rates/APL-19-016.pdf