



Texas Health Steps Program Manual Provider Presentation

SKSCP-9080-0924

Revised 09/2024

Texas Health Steps Overview

Goals

- Define Texas Health Steps (THSteps)
- Assist providers and their staff with basic understanding and importance of THSteps
- Gain a better understanding of when services are due (“timeliness” of visits)
- Common billing and claims issues
- Where to obtain additional resources

Texas Health Steps

- Early and Periodic Screening, Diagnostic and Treatment service in Texas is known as Texas Health Steps
- Medicaid's comprehensive child health service
- Overseen by the Texas Health and Human Services Commission
- Individuals birth through 20 years of age
- Providers must be enrolled in the THSteps program to administer THSteps services
- Providers can enroll in the Texas Medicaid & Healthcare Partnership electronically through the online Provider Enrollment and Management System tool on the TMHP website with www.tmhp.com

What are Texas Health Steps Services?

- Medical Checkup
- Periodic Screening
- Immunizations
- Vision
- Hearing
- Dental Preventative and Treatment Services

Age range allowed	Number of Checkups
Birth – 11 months	6
1 -4 years of age	7
5 -11 years of age	7
12 – 17 years of age	6
18 – 20 years of age	3



Requirements

- Communicable disease reporting
- Early Childhood Intervention referrals
- Parental accompaniment
- Newborn screening
- Blood lead level screen
- Abuse and neglect reporting
- Newborn hearing screen
- Teen Confidentiality Issues
- Critical Congenital Heart Disease screen

Please refer to the [Texas Medicaid Provider Procedures Manual](#) for more information.



Health Plan Responsibilities

Medical Checkups upon enrollment

- All newly enrolled members under 21 years of age are contacted to educate them about obtaining a THSteps medical checkup within 90 days of enrollment with Blue Cross and Blue Shield of Texas Health Plan and assist with arranging an appointment if needed.

Children of Migrant Farm Workers (FWC)

- Diligent efforts are made to identify and reach FWC members to accelerate the delivery of services.
- Assist members in finding a provider in their geographical area

Texas Health Steps Checkups Who can Administer

- Physician
- Physician Assistant
- Clinical Nurse Specialist
- Nurse Practitioner
- Federally Qualified Health Center
- Rural Health Clinic
- Health care provider or facility with physician supervision

All providers must be enrolled in THSteps program

Texas Health Steps Required Components

Comprehensive
Health and
Developmental
History

Comprehensive
Unclothed
Physical
Examination

Immunizations

Health
Education/
Anticipatory
Guidance

Laboratory
Screening

Dental Referral

A Comprehensive medical checkup must include the following age-appropriate services as set out in the Texas Health Steps Periodicity Schedule:

- Comprehensive health and developmental history, including physical and mental health development
- Comprehensive Unclothed Physical Examination, including measurements and sensory screening (vision and hearing)
- Immunizations
- Health Education/Anticipatory Guidance
- Laboratory Screening
- Dental referral every 6 months until a dental home is established

Exception to Periodicity Checkups

- Complete medical checkups outside the timeframes listed in the THSteps Periodicity Schedule due to extenuating circumstances
- Medically necessary (including developmental delay, suspected abuse, other medical concerns or a member in a high-risk environment) checkups that exceed the number allowed for the member's age
- Must include THSteps medical exception-to-periodicity modifier and condition indicators as a medical checkup when billing
- Required to meet state or federal exam requirements for Head Start, day care, foster, care, FWC or pre-adoption
- When needed before a dental procedure requiring general anesthesia

Comprehensive Health & Developmental History

Nutritional Screening

- Review of Measurement/ BMI and Laboratory Screening
- Infants: Feeding Schedules
- Children and Adolescents: Dietary Practices
- Food allergies/dietary restrictions

Comprehensive Health & Developmental History Continued

Developmental Screening

- Developmental surveillance or screening is a required component of every checkup birth through 6 years old
- Standardized developmental screening is a required component (and a review of the milestones) at 9 months, 18 months, 24 months, 3 years, 4 years
- Procedure Code: **96110**
 - Ages and Stages Questionnaire (ASQ)
 - Ages and Stages Questionnaire (ASQ:SE)
 - Parents' Evaluation of Development Status (PEDS)
 - Survey of Well-being of Young Child (SWYC)

Autism Screening

- Required component at 18 months and 24 months of age (at 30 months if missed at 24 months of age)
- Procedure Code: **96110**
- Modifier: **U6**
 - Modified Checklist for Autism in Toddlers (M-CHAT)
 - Modified Checklist for Autism in Toddlers Revised with Follow-Up (M-CHAT R/F)

Comprehensive Health & Developmental History Continued

Developmental Surveillance and Screening Referrals

- Referrals – If delayed or suspected delay is identified
 - Birth through 35 months: The provider must refer to Early Childhood Intervention no more than seven day after identified, even if also referred to an appropriate specialist
 - Ages 3 years and older, referral to the special education program to the member's local school district

Comprehensive Health & Developmental History Continued

Mental Health Screening

- Includes behavioral, social, and emotional development
- Required at each visit for ages 12 through 18
- Validated, standardized screening tools
 - Pediatric Symptom Checklist (PSC-17)
 - Pediatric Symptom Checklist (PSC-35)
 - Pediatric Symptom Checklist for Youth (Y-PSC)
 - Patient Health Questionnaire (PHQ-9)
 - Modified for Adolescents (PHQ-A [depression screen])
 - Car, Relax, Alone, Forget, Family, and Trouble Checklist (CRAFFT)
 - Patient Health Questionnaire (PHQ-A [anxiety, eating problems, mood problems and substance use])
 - Rapid Assessment for Adolescent Preventive Services (RAAPS)
 - Procedure code 96160 or 96161

Comprehensive Health & Developmental History Continued

Postpartum Depression Screening

- Must be submitted under the infant's Medicaid client number
- Allowable up to the infant's first birthday
- Recommended at least once during the postpartum period
 - **G8431**: Positive Screening for depression, follow-up plan is documented
 - **G8510**: Negative Screening for depression, follow-up plan is not required
- Validated screening tools may include the following
 - [Edinburgh Postnatal Depression Scale](#)
 - Postpartum Depression Screening Scale
 - [Patient Health Questionnaire 9](#)
- Positive screening for Postpartum Depression
 - Requires a referral plan and discussion with the mother
 - Provide resources and education for support in the interim until the mother can access care
- Must have documentation of the screening tool used and date the screening was completed

Tuberculosis Screening

- Administer the THSteps TB Questionnaire annually beginning at 12 months of age
 - The questionnaire is available at [THS-TB-Questionnaire](#)
 - If indications for risk of exposure identified, administer a Tuberculin Skin Test (TST) using procedure code 86580
 - A follow-up visit is required to read all TSTs using procedure code 99211

Comprehensive Physical Examination

- Physical Examination (Unclothed)
 - Height or Length and weight
 - Fronto-occipital circumference through the first 24 months of age
 - BMI beginning age 2
 - Blood pressure beginning age 3
- Oral Health Screening
- Sensory Screening
 - Vision
 - Hearing

Use age-appropriate growth charts to identify significant deviation



Immunizations

- Vaccines available through Texas Vaccines for Children Program (TVFC)
- If immunizations are due, administer and document. If not given, document reason and plan of action
- Providers may not refer elsewhere for immunizations
- Immunization schedule is set by Advisory Committee on Immunization Practices
<http://dshs.state.tx.us/immunize/schedule>
- Information on vaccine schedules, catch-up schedule program www.immunizetexas.org



Texas Vaccines for Children Program

- Medicaid does not reimburse for vaccines/toxoids that are available from Texas Vaccines for Children (TVFC)
- THSteps providers must enroll in TVFC at DSHS to obtain free vaccines for clients who are aged birth through 18 years old
- If a vaccine is not available through TVFC, the provider must use modifier U1
- Providers will not be reimbursed for vaccines obtained from TVFC, however, the administration fee, not to exceed \$13.75, is considered for reimbursement
- Use diagnosis code Z23 to indicate when immunizations are administered

ImmTrac2

- Administered vaccines/toxoids must be reported to DSHS age 17 or younger
- DSHS submits along with consent to a centralized repository known as ImmTrac2
- Must be reported within 30 days of administration
- [DSHS Immunization Information](#)



Health Education and Anticipatory Guidance

- Health education and counseling
- Assist parents in understanding what to expect with member's development
- Provide information regarding benefits of healthy lifestyles
- Accident and disease prevention information
- Materials given does not replace counseling
- Optional THSteps clinical forms [THSteps Forms](#)

Lab Services

Follow the THSteps periodicity schedule

- Tests for hemoglobin/hematocrit, chlamydia and gonorrhea must be sent to a Department of State Health Services (DSHS) laboratory
- DSHS Laboratory provides supplies for specimen collection and mailing and shipping
- Initial lead testing may be performed using a venous or capillary specimen and must either be sent to the DSHS laboratory or performed in the provider's office using point-of-care testing
- All other tests, including confirmatory lead test, may be sent to DSHS laboratory or the lab of the providers choice.
- Information about supplies, shipping and test results can be found on the DSHS lab page at: [DSHS Labs](#)

Laboratory Screening

THSteps Lab and Testing Supplies:

- Both age-appropriate and risk-based (identified and at provider discretion) laboratory tests are required
- SDHS Laboratory provides supplies

Required Laboratory Test Type	Checkup Ages
Newborn screening panel	Birth to 2 Weeks
Blood Lead Screening	12 months 24 months
Anemia	12 months
Dyslipidemia (lipid)	9 Years 18 years
Risk-based Laboratory Test	Checkup Ages
Dyslipidemia (Lipid)	Any checkup beginning at 24 months
Types 2 diabetes	Any checkup beginning at 10 years
STD/STI	Any checkup beginnings at 11 years
HIV	Any checkup beginnings at 11 and required at age 16

Dental Services

THSteps dental services are benefits of Medicaid eligible children from birth through 20 years of age

- Routine dental referral beginning at 6 months of age, until a dental home is established
- Referral for dental care at any age if oral exam identifies possible concerns

Oral Evaluation and Fluoride Varnish in the Medical Home

- Aimed at improving oral health outcomes
- Providers are encouraged to participate
- Provided in conjunction with the THSteps medical checkup age 6-35 months. Must be billed on the same day and with same provider
- Procedure code 99429 must be billed with modifier U5 and diagnosis code Z00121 or Z00129
- Limited to six services per lifetime
- THSteps medical providers must complete training and be certified to provide the intermediate oral evaluations and fluoride varnish application
- Training for certification [txhealthsteps](https://www.txhealthsteps.org)

Referrals for Medicaid Covered Services

- Case Management for children and pregnant women
- Hearing services
- Routine dental, emergency dental and dental treatment referrals
- Family planning and genetic services referrals
- ECI referrals
- WIC referrals – pregnant members and members birth through 5 years old

Case Management for Children and Pregnant Women

Case Management is available for children and pregnant women who are Medicaid eligible and are at-risk for health problems. A case manager will

- Assist with assessing, advocating, and coordinating needed services
- Identify needs of clients and their family
- Identify strengths and challenges
- Develop a plan to address needs
- Follow-up with client and family to ensure needs have been addressed or resolved



Claims Billing and Submission

Preventing Common Billing Issues

Due to incorrect diagnosis code, and incorrect CPT codes that are not consistent with the patient's age can cause claims to deny. Here is information to assist with future claims.

- **Preventing Denied Claims:**

- **Non-covered charge(s):** Medical services that are not a covered service with that patient's plan. This can also occur if an incorrect diagnosis code is used.
- **The procedure/revenue code is inconsistent with the patient's age:** A claim denied due to CPT code billed is not compatible with patient's age
- **Claim/service lacks information which is needed for adjudication:** There is information that is missing to process the claim
- **Duplicate:** Claims submitted for the same service for an individual a specified date of service that was included in a previously submitted claim. Avoid this issue by indicating that the duplicate is a "corrected" claims.

Billing

- A provider must bill for THSteps services in accordance with state standards.
- Each of the six components and their individual elements must be completed and documented in the medical record for reimbursement for THSteps medical checkups.
- In the medical records it must include any component or element not completed, along with the reason it was not completed and the plan to complete the component or element.
- The medical records must contain documentation on all screening tools used for:
 - **TB**
 - **Growth and development**
 - **Autism**
 - **Mental Health Screenings**The results of these screenings and any necessary referral must be documented in the medical record.
- THSteps checkups are subject to retrospective review and recoupment if the medical records do not include all required documentation

Claims Submission

All Texas Health Steps components performed during the medical checkup should be billed on the same claim form

Submitting multiple claims forms for Texas Health Steps procedures may lead to overpayment and can result in audits and recoupments.

- THS fee schedule a TMHP
- Providers should bill their usual and customary fee

Most Medicaid providers must submit claims to the Medicaid claims administrator within 95 days from the date of service or the claims will be denied for late filing.

Claims

A paid claim that shows a timely THSteps medical checkup is the best means of documenting that a timely checkup was completed.

Documentation

- Due date of THSteps Medical Checkup
- Date of Service
- Place of Service
- Description of Service
- Provider Identifier
- ICD-10 Diagnosis Code
- Procedure Code
- Modifiers
- Benefit Code (if applicable)

CPT Codes

- Younger than 1 year – 99381 or 99391
- 12 months to 4 yrs – 99382 or 99392
- 5 yrs to 11 yrs – 99383 or 99393
- 12 yrs to 17 yrs – 99384 or 99394
- 18 yrs to 20 yrs – 99385 or 99395
- 99381 through 99385: New patient (to provider's practice) Well Child Exam
- 99391 through 99395: Established patient (to provider's practice) Well Child Exam

Identifiers

- NPI#
- Taxonomy Code
- Benefit Code
- Place of Service

Documentation Identifiers

National Provider Identifier: is unique identification number to covered health care providers.

Taxonomy Code: A unique code designed to classify health-care providers by provider type and specialty.

- Providers may have more than one taxonomy code. It is important to use appropriate taxonomy for THSteps
- Providers must bill the NPI and Taxonomy code as attested for THSteps with Texas Medicaid

Modifier: used to supplement the information or adjust care descriptions to provide extra details concerning a procedure or service provided by a physician.

Note: Claims submitted with incorrect, invalid or missing NPI and Taxonomy code combination will reject or deny.

Modifiers and Identifiers

EP1 – THSteps Benefit Code

Code	Definition
EP1	THSteps Benefit Code

Condition Indicator

Code	Definition
NU	Not used (no referral)
ST	New services requested
S2	Under treatment

Condition codes are entered in row 24, column C of the CMS 1500 form.

Modifiers

Code	Definition
AM	Physician
SA	Nurse Practitioner
TD	Nurse
U7	Physician Assistant
25	Required when immunization are billed with THSteps visit

Immunization Modifiers

Code	Definition
U1	Can only be used when the vaccine is not available through the TVFC program and indicates the vaccine was privately purchased

The U1 modifier may be used in addition to the associated administered vaccine procedure code

Billing Codes and Claims

Appropriate CPT Codes

Texas Health Steps Age – Appropriate CPT Codes		
New Members	Existing Members	Ages
99381	99391	0 – 11 months
99382	99392	12 months – 4 years
99383	99393	5 years – 11 years
99384	99394	12 years – 17 years
99385	99395	18 years – 20 years

Diagnosis Codes

Texas Health Steps Age – Diagnosis Codes		
Code	Procedure	Ages
Z00.110	Newborn exam	Birth - 7 days
Z00.111	Newborn exam	8 days – 28 days
Z00.121	With abnormal findings	29 days – 17 years
Z00.129	Without abnormal findings	29 days – 17 years
Z00.00	Without abnormal findings	18 years – 20 years
Z00.01	With abnormal findings	18 years – 20 years

Billing Codes/ Claims: Immunization Administered

When submitting claims for Texas Health Steps medical checkups, use appropriate CPT codes for Immunizations below:

Immunization Administered			
Procedure Codes	Vaccine	Procedure Codes	Vaccine
90632 or 90633* with (90460 or 90471/90472)	Hep A	90707* with (90460 or 90471/90472)	MMR
90620* or 90621* with (9060 or 90471/90472)	MenB	90710* with (90460 or 90471/90472)	MMRV
90636 with (90460 or 90471/90472)	Hep A/ Hep B	90713* with (90460 or 90471/90472)	IPV
90644	Hib-MenCY	90714* with (90460 or 90471/90472)	Td
90647* or 90648* with (90460 or 90471/90472)	Hib	90715* with (90460 or 90471/90472)	Tdap
90650 or 90651* with (90460 or 90471/90472)	HPV	90716* with (90460 or 90471/90472)	Varicella
90630, 90654, 90655*, 90656*, 90657*, 90658*, 90685*, 90686*, 90687*, 90688* with (90460 or 90471/90472); 90660* or 90672* with (90460 or 90473/90474); 90661, 90673, 90674, 90682 or 09756* with (90471/90472)	Influenza	90723* with (90460 or 90471/90472)	Dtap-HepB – IPV
90670* with (90460 or 90471/90472)	PCV13	90732* with (90460 or 90471/90472)	PPSV23
90680* or 90681* with (90460 or 90473/90474)	Rotavirus	90733 or 90734* with (90460 or 90471/90472)	MPSV4
90696* with (90460 or 90471/90472)	DTAP-IPV	90743, 90744, or 90746 with (90460 or 90471/90472)	Hep B
90698* with (90460 or 90471/90472)	DTAP – IPV- Hib	90748* with (90460 or 90471/90472)	Hib-Hep B
90700* with (90460 or 90471/90472)	DTap	90758 with (90471/90472)	Ebola Virus
90702* with (90460 or 90471/90472)	DT		

**Indicates a vaccine distributed by TVFC*



Resources and Contact Information

Online Provider Education

THSteps Provider Education

- The THSteps Online Provider Education System offers tutorials and modules on various topics for health care providers at no cost.
 - Located at
 - Offers FREE continuing education (CE) courses for primary care providers and other health professionals including
 - PA
 - NP
 - Nurse
 - Social Worker
 - Pharmacist
 - Dentist

The screenshot shows the THSteps Provider Education website. At the top left is the Texas Health and Human Services logo. To its right is the text 'TEXAS Health and Human Services' and 'Texas Health Steps'. A navigation menu includes 'PROFESSION', 'COURSES', 'RESOURCES', 'PARTNERS', 'HELP', and 'DASHBOARD'. The main content area features a teal banner with the text 'Your how-to guides for Medicaid Texas Health Steps.' and 'Courses and resources from leading experts help you demystify Medicaid health-care delivery.' Below this is a yellow 'BROWSE' button. A row of six hexagonal icons represents different professions: Physician (blue), Nurse (red), Social Worker (green), Pharmacist (orange), Dentist (yellow), and General (teal). To the right of the main content is a sidebar with a 'WELCOME!' message, a 'MY ACCOUNT' dropdown menu, and a blue 'LOG OUT' button. Below this is a section titled 'TEXAS HEALTH STEPS CHECKUPS' with a 3-minute video overview and an 'EXPLORE >' button. At the bottom of the sidebar is a section titled 'CASE MANAGEMENT FOR CHILDREN AND PREGNANT WOMEN'.

Resources

Texas Health Steps: [THSteps Providers](#)

Texas Medicaid & Healthcare Partnership: [TMHP](#)

HHSC (TX Dept of Health & Human Services) offers brochures, posters and other outreach resources at no cost to providers, schools, community-based organization, Case Managers, and other THSteps partners. Materials cover a variety of topics, including:

- Medical and Dental Check up
- Newborn Hearing Screening
- Medical Transportation Program
- Case Management for Children and Pregnant Women

Located at: www.hhs.texas.gov/providers/health-services-providers/texas-health-steps/thsteps-catalog

Reminder of Best Practices

Follow Periodicity Schedule: Each age interval serves as a key checkup for a child with specific screening needs.

Provide Extended Office Hours: Offering additional appointment times helps parents and caregivers get preventive wellness checkups outside of normal office hours.

Combine a Well-Care Visit with Other Visits: Combine other visits to complete a well-child visit, such as Sports Physical and sick visit.

Expand Tools for EMR/EHR System:

- A THSteps template that follows THSteps Periodicity Schedule and State THS forms. This template helps facilitate charting efficiency, improve member outcomes, and reimbursement for completed services.

Incorporate Outreach:

- Timely patient outreach (calls and/or texts) for well child visits from the provider's staff help get annual well visits scheduled and performed.

Periodicity Schedule

An updated Periodicity Schedule is available via the [THSteps website](http://www.texashealthsteps.com)

COMPREHENSIVE HEALTH SCREENING* BIRTH THROUGH 10 YEARS OF AGE

* Comprehensive Health Screening, as indicated below, consists of federal and state components that are required for the checkup to be considered complete. Refer to the Texas Medicaid Provider Procedures Manual (TMPPM) for further detail at http://www.tmbp.com/Pages/Medicaid/Medicaid_Publications_Provider_manual.aspx. Find current Periodicity Schedule online at texashealthsteps.com.

AGE	History	DEVELOPMENTAL SURVEILLANCE		MENTAL HEALTH		Critical Congenital Heart Defect Screening	MEASUREMENTS				VISION		HEARING		LABORATORY TESTS				Health Education/Anticipatory Guidance										
		Nutritional Screening	Review of Milestones	ASD, ASD-SE, PEDS, or SWYC	M-CHAT or M-CHAT-R/FTM		Mental Health: Psychosocial/Behavioral Health Screening	Postpartum Depression Screening	TB Questionnaire with Skin Test if Risk Identified	Unclothed Physical Examination	Length	Height	Weight	BMI	Fronto-Occipital Circumference	Blood Pressure	Visual Acuity	Subjective Vision		Newborn Hearing Test (OAE or ABR)	Audiometric Screening	Subjective Hearing	Dental Referral	Screen/Administer Immunizations According to ACP Guidelines	Newborn Screening Panel	Blood Lead Screening	Anemia	Dyslipidemia	Type 2 Diabetes
Newborn	█	█	█		█	█		█	█	█																			
D/C to 5 days	█																												
2 weeks																													
2																													
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LEGEND	
█	Mandatory
█	If not completed at the required age, must be completed at the first opportunity if age appropriate.
█	For developmental, mental health, vision, or hearing screenings: when both colors appear at the same age, perform the most appropriate-level screen.
█	Recommended
█	Risk-based

Note: THSteps components may be performed at other ages if medically necessary. Check regularly for updates to this schedule: texashealthsteps.com. For free online provider education: txhealthsteps.com.



Texas Health Steps Medical Checkup Periodicity Schedule for Infants, Children, and Adolescents

COMPREHENSIVE HEALTH SCREENING* 11 THROUGH 20 YEARS OF AGE

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AGE	History	Nutritional Screening	Mental Health: Psychosocial/Behavioral Health Screening	PES-17, PHQ-9, V-PSC, PHQ-9, PHQ-4, CAGE-4, or PHQ-4-6, for Adolescents or BAPPS for Adolescents	TB Questionnaire with Skin Test if Risk Identified	Unclotted Physical Examination	MEASUREMENTS				VISION		HEARING		Dental Referral	Screen/Administer Immunizations According to ACP Guidelines	LABORATORY TESTS				Health Education/Anticipatory Guidance								
							Height	Weight	BMI	Blood Pressure	Visual Acuity	Subjective Vision	Audiometric Screening	Subjective Hearing			Dyslipidemia	Type 2 Diabetes	STD/STI Screening	HIV Test									
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█	Risk-based

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Contact Information

Please contact:
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Thank you for joining