

**Oregon Health Plan**  
**PRIORITIZED LIST OF HEALTH SERVICES<sup>1</sup>**

(Excerpts)

Effective April 1, 2008

[New material highlighted]

Diagnosis: PREGNANCY (See Guideline Notes 1,2,64,65)

Treatment: MATERNITY CARE

ICD-9: 640-673,674.0,674.2,674.4-674.9,675-677,V07.2,V22.0-V22.1,V23,V24,V28,V72.4

CPT: 01958-01963,01967-01969,12021,57022,59000-59001,59012,59015,59020,59025,59030,59050-59051,59070-59076,59100,59160-59622,59830,59866,59871,76801-76828,84163,84704,86336,96150-96154,98966-98969,99024,99051,99060,99070,99078,99201-99360,99366,99374-99375,99379-99444,99477,99605-99607

HCPCS: Q4089,S0265,S0270,S0271,S0272,S0273,S0274,S2401,S2402,S2403,S2405,S2411,S8055,S9208,S9209,S9211,S9212,S9213,S9214

Line: 1

Diagnosis: BIRTH OF INFANT (See Guideline Notes 64,65)

Treatment: NEWBORN CARE

ICD-9: 763,765.29,779.81-779.82,779.84,779.89,V30-V37

CPT: 92586,98966-98969,99024,99051,99060,99070,99078,99201-99360,99366,99374-99375,99379-99444,99477,99605-99607

HCPCS: S0270,S0271,S0272,S0273,S0274

Line: 2

Diagnosis: PREVENTIVE SERVICES, BIRTH TO 10 YEARS OF AGE (See Coding Specification Below) (See Guideline Notes 64,65) (See Prevention Tables)

Treatment: MEDICAL THERAPY

ICD-9: V01.0-V01.2,V01.4-V01.9,V02,V03.2,V03.5-V03.9,V04.0,V04.2-V04.3,V04.6,V04.81-V04.82,V04.89,V05.0-V05.1,V05.3-V05.4,V05.8,V06.1,V06.3-V06.6,V06.8,V07.0,V07.2,V20,V65.3,V65.41-V65.45,V70.6,V72.0-V72.1,V73-V75,V77-V81,V82.0-V82.6,V82.8-V82.9

CPT: 90465-90472,90633-90634,90645-90663,90669,90680,90698-90710,90713-90714,90716,90718-90723,90732-90734,90740,90744,90747-90749,92002-92014,92586,96110,98966-98969,99024,99051,99060,99070,99078,99201-99360,99366,99374-99375,99379-99444,99477,99605-99607

HCPCS: G0008,G0009,G0010,G0396,G0397,H0001,H0002,H0031,S0270,S0271,S0272,S0273,S0274

Line: 3

CPT code 96110 can be billed in addition to other CPT codes, such as evaluation and management (E&M) codes or preventive visit codes.

Diagnosis: PREVENTIVE SERVICES, OVER AGE OF 10 (See Prevention Tables) (See Guideline Notes 3,64,65)

Treatment: MEDICAL THERAPY

ICD-9: V01.0-V01.2,V01.4-V01.9,V02,V03.2,V03.5-V03.9,V04.0,V04.2-V04.3,V04.6,V04.81,V04.89,V05.0-V05.1,V05.3-V05.4,V05.8,V06.1,V06.3-V06.6,V06.8,V07.0,V07.2,V15.88,V50.41,V65.3,V65.41-V65.45,V67.01,V70.0,V70.6,V72.0-V72.1,V72.3,V73-V81,V82.0-V82.6,V82.8-V82.9

CPT: 19303-19304,19340-19350,19357-19369,90471-90472,90632-90636,90649,90656,90658-90663,90701,90703-90710,90713-90716,90718-90719,90723,90732-90734,90736-90747,90749,92002-92014,98966-98969,99024,99051,99060,99070,99078,99201-99360,99366,99374-99375,99379-99444,99477,99605-99607

HCPCS: G0008,G0009,G0010,G0117,G0118,G0396,G0397,H0001,H0002,H0031,S0270,S0271,S0272,S0273,S0274,S0613

Line: 4

Diagnosis: ABUSE OR DEPENDENCE OF PSYCHOACTIVE SUBSTANCE (See Guideline Notes 64,65)

Treatment: MEDICAL/PSYCHOTHERAPY

ICD-9: 291.1,303.9,304,305.0,305.2-305.9

CPT: 90801-90829,90846-90862,90882,90887,96101,97810-97814,98966-98969,99051,99060,99201-99255,99366,99441-99444,99477,99605-99607

HCPCS: H0001,H0002,H0004,H0005,H0006,H0012,H0016,H0020,H0031,H0033,H0034,H0035,H0048,H2010,H2013,H2033,H2035,S0270,S0271,S0272,S0273,S0274,S9537,T1006,T1013,T1016,T1502

Line: 5

Diagnosis: TOBACCO DEPENDENCE (See Guideline Notes 1,4,64,65)

<sup>1</sup> from Oregon Health Plan Revised 2-1-08.. [http://www.oregon.gov/OHPPR/HSC/current\\_prior.shtml](http://www.oregon.gov/OHPPR/HSC/current_prior.shtml). accessed 3/04/08

Treatment: MEDICAL THERAPY/BRIEF COUNSELING NOT TO EXCEED 10 FOLLOW-UP VISITS OVER 3 MONTHS  
ICD-9: 305.1  
CPT: 96150-96154, 97810-97814, 98966-98969, 99078, 99201-99215, 99366, 99406-99407, 99441-99444,  
99477, 99605-99607  
HCPCS: D1320, G8402, G8453, G9016, S0270, S0271, S0272, S0273, S0274, S9075, S9453  
Line: 6

Diagnosis: REPRODUCTIVE SERVICES (See Guideline Notes 64,65)  
Treatment: CONTRACEPTION MANAGEMENT; STERILIZATION  
ICD-9: V24.2, V25.0-V25.2, V25.4-V25.9, V26.2, V26.4  
CPT: 11975-11977, 11981-11983, 55250, 55450, 57170, 58300-58301, 58565, 58600-58615, 58670-58671,  
98966-98969, 99024, 99051, 99060, 99070, 99078, 99201-99360, 99366, 99374-99375, 99379-99444,  
99477, 99605-99607  
HCPCS: S0180, S0270, S0271, S0272, S0273, S0274, S4981, S4989, T1015  
Line: 7

# Birth to 10 Years [from Oregon Health Plan Prevention Tables]

[http://www.oregon.gov/OHPPR/HSC/current\\_prior.shtml](http://www.oregon.gov/OHPPR/HSC/current_prior.shtml)

## Interventions Considered and Recommended for the Periodic Health Examination

## Leading Causes of Death Conditions originating in perinatal period Congenital anomalies Sudden infant death syndrome (SIDS) Unintentional injuries (non-motor vehicle) Motor vehicle injuries

### Interventions for the General Population

#### SCREENING

Height and weight  
Blood pressure  
Vision screen (3-4 yr)  
Hemoglobinopathy screen (birth)<sup>1</sup>  
Phenylalanine level (birth)<sup>2</sup>  
T<sub>4</sub> and/or TSH (birth)<sup>3</sup>  
Effects of STDs  
FAS, FAE, drug affected infants<sup>4</sup>  
Hearing, developmental, behavioral and/or psychosocial screens<sup>5</sup>  
Learning and attention disorders<sup>6</sup>  
Signs of child abuse, neglect, family violence

#### COUNSELING

##### Injury Prevention

Child safety car seats (age <5 yr)  
Lap-shoulder belts (age >5 yr)  
Bicycle helmet; avoid bicycling near traffic  
Smoke detector, flame retardant sleepwear  
Hot water heater temperature <120-130°F  
Window/stair guards, pool fence, walkers  
Safe storage of drugs, toxic substances, firearms & matches  
Syrup of ipecac, poison control phone number  
CPR training for parents/caretakers  
Infant sleeping position

##### Diet and Exercise

Breast-feeding, iron-enriched formula and foods (infants & toddlers)

Limit fat & cholesterol; maintain caloric balance; emphasize grains, fruits, vegetables (age >2 yr)  
Regular physical activity\*

##### Substance User

Effects of passive smoking\*  
Anti-tobacco message\*

##### Dental Health

Regular visits to dental care provider\*  
Floss, brush with fluoride toothpaste daily\*  
Advice about baby bottle tooth decay\*

##### Mental Health/Chemical Dependency

Parent education regarding:

- Child development
- Attachment/bonding
- Behavior management
- Effects of excess TV watching
- Special needs of child and family due to:
  - Familial stress or disruption
  - Health problems
  - Temperamental incongruence with parent
  - Environmental stressors such as community violence or disaster, immigration, minority status, homelessness
- Referral for MHCD and other family support services as indicated

<sup>1</sup>Whether screening should be universal or targeted to high-risk groups will depend on the proportion of high-risk individuals in the screening area, and other considerations. <sup>2</sup>If done during first 24 hr of life, repeat by age 2 wk. <sup>3</sup>Optimally between day 2 and 6, but in all cases before newborn nursery discharge. <sup>4</sup>Parents with alcohol and/or drug use. Children with history of intrauterine addiction. Physical and behavioral indicators: hypertension, gastritis, esophagitis, hematological disorders, poor nutritional status, cardiac arrhythmias, neurological disorders, intrauterine growth retardation, mood swings, difficulty concentrating, inappropriateness, irritability or agitation, depression, bizarre behavior, abuse and neglect, behavior problems. <sup>5</sup>Screening must be conducted with a standardized, valid, and reliable tool. Recommended developmental, behavioral and/or psychosocial screening tools include and are not limited to: a) Ages and Stages Questionnaire (ASQ); b) Parent Evaluation of Developmental Status, (PEDS) plus/minus PEDS:Developmental Milestones (PEDS:DM); c) ASQ:Social Emotional (ASQ:SE); and d) Modified Checklist for Autism in Toddlers (M-CHAT). <sup>6</sup>Consider screening with full DSM-IV criteria for attention deficit disorder, inattentive or hyperactive types, in children with significant overall academic or behavioral difficulty including academic failure and/or learning difficulty, especially in reading, math or handwriting.

\*The ability of clinical counseling to influence this behavior is unproven.