



Medicaid Developmental Screening Policies by State

*Updated January 2021

Acronym Key

AAP -American Academy of Pediatrics	EPSDT -Early and Periodic, Screening, Diagnostic and Treatment
ASQ -Ages and Stages Questionnaire	ESI-R -Early Screening Inventory, Revised
ASQ-3 -Ages and Stages Questionnaire, 3 rd Edition	IDI -Infant Development Inventory
ASQ-SE -Ages and Stages Questionnaire: Social Emotional	Iowa -Iowa Health Maintenance Clinical Notes
Battelle/BDI -Battelle Developmental Screener/Battelle Developmental Inventory	M-CHAT -Modified Checklist for Autism in Toddlers
Bayley/BINS -Bayley Infant Neurodevelopment Screener	M-CHAT-F -Modified Checklist for Autism in Toddlers with Follow-Up
BASC -Behavior Assessment for Children	M-CHAT-R -Modified Checklist for Autism in Toddlers, Revised
BASC-II -Behavior Assessment for Children, 2 nd Edition	M-CHAT-R/F -Modified Checklist for Autism in Toddlers, Revised with Follow-Up
BITSEA -Brief Infant Toddler Social and Emotional Assessment	MPSI-R -Minneapolis Preschool Screening Instrument- Revised
Brigance II -Brigance Inventory of Early Development II	PEDS -Parents' Evaluation of Developmental Status
CDI -Child Development Inventory	PEDS-DM -Parents' Evaluation of Developmental Milestones
CHIPRA -Children's Health Insurance Program Reauthorization Act	PHQ-9 -Patient Health Questionnaire
CDR -Child Development Review	PSC -Pediatric Symptom Checklist
CRAFFT -CRAFFT Screening Tool	PSC-Y -Pediatric Symptom Checklist- Youth Report
Denver/Denver II -Denver Developmental Screening Test/II	SDQ -Strengths and Difficulties Questionnaire
DIAL-4 -Developmental Indicators for the Assessment of Learning, 4 th Edition	SWYC -Survey of Well-being of Young Children
ECSA -Early Childhood Assessment	Vanderbilt -Vanderbilt Rating Scales
ELAP -Early Language Accomplishment Profile	

State	Requires in EPSDT Visit	Reimburses 96110	Fee-for-Service Reimbursement Rate	Maximum Allowed and Other Usage	Modifiers	Requires or Recommends Specific Tools	Specified Tools
Alabama	No	Yes	\$10.00	Five per year; Allowed at 9, 18, 24, 48 months	N/A	Require	Standardized tool, e.g., ASQ, ASQ-SE, PEDS, BDI, Denver, BINS, ELAP, Brigance, M-CHAT, Vanderbilt, BASC-II
Alaska	No	Yes	\$12.81		33 (use of recommended tool)	Recommend	ASQ, PEDS, BDI, BINS, Brigance, CDI, IDI
Arizona	Yes	Yes	\$10.14	Three (9, 18, 24 months)	EP (only for 9-, 18-, 24-month EPSDT visit)	Require	PEDS, ASQ, M-CHAT
Arkansas	No	No	N/A			No	
California	Yes	Yes	\$54.90	Three (9, 18, 24 months)		Recommend	PEDS, ASQ-3, ASQ-SE
Colorado	Yes	Yes	\$18.21	Maximum age is 4	EP	Require	AAP-recommended tools only

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Connecticut	No	Yes	\$18	Three suggested (at 9, 18, 24, or 30 months) but reimbursement allowed (including outside of annual EPSDT visits) up to age 3	U3 (positive screen), U4 (negative screen)	Recommend	AAP-recommended tools
Delaware	No	Yes	\$20.43			No	
District of Columbia	Yes	Yes	\$9.88	Three-unit maximum		No	
Florida	No	No	N/A			No	
Georgia	Yes	Yes	\$11.77	Three (at 9, 18, 30 months per AAP); one per visit	EP (with EPSDT visit), HA ("catch-up" screening conducted in between recommended ages)	Require	AAP-recommended tools per CHIPRA core measure specifications
Hawaii	Yes	Yes	\$39.85	No additional payment at EPSDT visit	EP	Require	AAP list (PEDS, ASQ, M-CHAT)
Idaho	No	Yes	\$6.80			Require	CHIP Core Set tools for Early Intervention Services and AAP Standard tools under the standard fee schedule
Illinois	Yes	Yes	\$16.07	Two per visit		Recommend	AAP-recommended tools

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Indiana	Yes	Yes	\$5.61	Five per date of service (five different tools); required at 9, 18, and 30 months and allow with provider or parent concern up to age 4		Recommend	Tool with moderate to high sensitivity, specificity, and validity levels; and cultural competence. Examples include ASQ, ASQ-SE, Denver DST/Denver II, Battelle, BINS, PEDS, ELAP, Brigance Screens II, M-CHAT, Vanderbilt, or BASC-II.
Iowa	Yes	Yes	\$8.19			Require	PEDS, ASQ, CDR, Iowa, ASQ-SE, BITSEA, Brigance, Bayley, Denver II
Kansas	Yes	Yes	\$31.50			Require	PEDS, ASQ-3, ASQ-SE, M-CHAT
Kentucky	Yes	Yes	\$32.19			No	
Louisiana	Yes (For ages specified by AAP/Bright Futures Periodicity schedule)	Yes	\$10	No maximum defined; use according to AAP/Bright Futures Periodicity Schedule, or administer at intervals outside of EPSDT preventive visits if medically indicated for an enrollee at risk, or with a suspected developmental abnormality.	no	Recommend	Age-appropriate, caregiver-completed, and validated screening tools as recommended by the AAP.

State	Requires in EPSDT Visit	Reimburses 96110	Fee-for-Service Reimbursement Rate	Maximum Allowed and Other Usage	Modifiers	Requires or Recommends Specific Tools	Specified Tools
Maine	No	Yes	\$8.99	Cannot bill on same day as autism screening	HI (autism screening)	Recommend	ASQ-3, PEDS, MCHAT-1, MCHAT-R, MCHAT-2, MCHAT-F
Maryland	Yes	Yes	\$8.86	Two (2 tools); at 9, 18, and 24 months		Require	ASQ, PEDS, others approved by AAP
Massachusetts	Yes	Yes	\$11.81		U1,U2,U3,U4,U5,U6,U7, U8 (medical provider type, identification of need or not)	Require	ASQ-SE, BITSEA, CRAFFT, ECSA, M-CHAT,M-CHAT-R/F, PEDS, PHQ-9, PSC and PSC-Y, SDQ, SWYC
Michigan	Yes	Yes	\$9.20	Three screenings per enrollee are allowed in one day by a single provider.		Require	Validated tool. Examples include ASQ, ASQ-SE, PEDS, PEDS-DM, and others as recommended by AAP.
Minnesota	Recommended only	Yes	Included in the well-child visit bundled payment rate	Two units per visit/date of service	U1 (autism screening)	Recommend	ASQ-3, PEDS, Battelle, Bayley, Brigance, DIAL-4, ESI-R, MPSI-R.*
Mississippi	Yes	Yes	Physician reimbursement \$7.68	At 9, 18, and 30 months, one per month for developmental screen. At 18 and 24 months; and one per month for autism screen.	EP (same for autism screening)	Require	Standardized tool as outlined in Administrative Code Part 223, Chapter 1, Rule 1.6-A-5.
Missouri	No	No	N/A			No	
Montana	No	Yes	\$11.18	Providers should administer an age-appropriate developmental		Recommend	AAP-recommended tools (Bright Futures)

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				screen at age 9, 18, and 30 months.			
Nebraska	No	Yes	\$13.57			No	
Nevada	No	Yes	\$7.40		59	Recommend	AAP-recommended tools (Bright Futures)
New Hampshire	Yes	Yes	\$5.00	Two-unit maximum		No	
New Jersey	Yes, per Bright Futures guidelines	Yes	\$7.28	Recommended at 9, 18, and 30 months per Bright Futures guidelines.		Recommend	ASQ, PEDS, M-CHAT
New Mexico	No	Yes	\$15.60			No	
New York	Yes	No	N/A			Recommend	Validated tools per Bright Futures
North Carolina	Yes	Yes	\$8.91	Developmental screens must be done at the 6-, 12-, 18- or 24-, 36-, 48-, and 60-month visits.		No	
North Dakota	Yes	Yes	\$9.98	Follows Bright Futures guidelines		Require	AAP-recommended tools (Bright Futures)
Ohio	Yes	Yes	\$7.92			No	
Oklahoma	No	Yes	\$8.38			Recommend	ASQ, PEDS, others recommended by AAP
Oregon	No	Yes	\$6.81			Require	ASQ, ASQ-SE, PEDS, PEDS-DM, M-CHAT

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Pennsylvania	Yes	Yes	\$6.99 (if claimed outside of a WCV, otherwise included in WCV rate)	Specified screening at 9, 18, and 30 months. Specified screenings with U1 modifier at 18 and 24 months, allowed with and without modifier at 5 years and older if indicated by risk assessment and/or symptoms.	U1 (autism screening)	Recommend	AAP-recommended tools (Bright Futures)
Rhode Island	Yes	Yes	\$7.64			Require	ASQ, ECSA
South Carolina	No	Yes	\$7.11	Two per visit		Recommend	ASQ, PEDS, M-CHAT
South Dakota	No	Yes	\$5.47			No	
Tennessee	No	Yes	Plans set own rates			No	
Texas	Yes	Yes	\$8.14	At 9 months, 18 months, 24 months, 3 years, and 4 years of age	U6 (autism screening with M-CHAT or M-CHAT R/F)	Require	ASQ, ASQ-SE, PEDS, M-CHAT
Utah	Yes	Yes (Code used with prepaid mental health plans only)	\$7.11			Recommend	ASQ, CDR, PEDS
Vermont	Yes	Yes	\$8.26			Recommend	ASQ-3, ASQ:SE-2, M-CHAT R/F, SWYC

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Virginia	Yes	FFS: No. The DMAS billable code for developmental services is 6112. The code 6113 can also be billed as an add on to this code as well. MCO: MCOs offer guidance for providers on how to bill based on their individual systems.	FFS: 96112 \$124.60 (IP) \$133.16 (OP) 96113 - \$56.48 (IP) \$59.56 (OP) MCO: Health plans set own rates with providers.	FFS: <i>Please note that DMAS does not reimburse for code 96110.</i> For codes 96112 and 96113, there are no annual limits. MCO: MCOs offer guidance for providers on how to bill based on their individual systems.	FFS: <i>Please note that DMAS does not reimburse for code 96110.</i> For codes 96112 and 96113, there are no modifier requirements. MCO: MCOs offer guidance for providers on how to bill based on their individual systems.	The state follows AAP Bright Futures periodicity schedule. FFS: <i>Please note that Medicaid does not reimburse for code 96110.</i> For codes 96112 and 96113, there are no required tools. MCO: MCOs offer guidance for providers on how to bill based on their individual systems.	
Washington	Yes	Yes	\$5.80	Two units per billing claim, with a limit of five times from birth to age 3.		Recommend	Various tools are listed in the EPSDT billing guide. Does require that the name of the screening tool and the score be included in the provider's documentation.
West Virginia	Yes	Yes	\$5.51			No	

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Wisconsin	Yes	Yes	Ranges from \$7.77 to \$80.93 depending on the rendering provider.		HP, UA	No	
Wyoming	Yes	Yes	\$13.16			No	

Sources: State Medicaid websites and direct communication with state Medicaid or CHIP officials.

* Minnesota: The Battelle, Bayley and the ESI-R are only recommended until 7/1/2021. Programs are being recommended to obtain and train on other screening tools.