CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES
Michelle Baass | Director

DATE: November 13, 2026 **PPL NO. 26-003**

TO: All Local Educational Agency (LEA) and Public Institution of Higher Education (IHE) Providers in the Children and Youth Behavioral Health Initiative (CYBHI) Fee Schedule program

SUBJECT: **CYBHI Fee Schedule Program EPSDT Screening Tools**

PURPOSE: Guidance for LEAs and IHEs participating in the CYBHI Fee Schedule program regarding reimbursement for Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) screening services based on the guidance of the American Academy of Pediatrics (AAP) and Bright Futures.

BACKGROUND:

This Policy and Procedure Letter (PPL) is to notify LEAs and IHEs participating in the CYBHI Fee Schedule program about reimbursement opportunities for EPSDT screening services provided by school-linked providers and practitioners. The EPSDT benefit provides comprehensive and preventive health care services to Medi-Cal enrolled individuals younger than 21 years of age. These services are key to ensuring children and youth receive appropriate preventive services, as well as all services necessary to address any defects, illnesses, or conditions identified through EPSDT screenings.

The following chart defines the separate components of the EPSDT benefit:

Term	Definition
Early	Assessing and identifying problems early
Periodic	Checking children's health at periodic, age-appropriate intervals
Screening	Providing physical, dental, vision, hearing, mental health, developmental, and other comprehensive screening exams and tests to detect potential problems
Diagnostic	Performing diagnostic tests to follow up when a risk is identified
Treatment	Control, correct, or reduce identified health problems

This PPL addresses the **Early and Periodic Screening** components of the EPSDT benefit as it relates to the CYBHI Fee Schedule program billable services.

POLICY:

For LEAs and IHEs participating in the CYBHI Fee Schedule program, DHCS has produced a non-exhaustive list of CYBHI Fee Schedule program procedure codes

recommended for use with the accompanying screening tools, as recommended by the American Academy of Pediatrics (AAP).

The AAP and Bright Futures has developed a periodicity schedule of screenings recommended to be performed throughout the lifespan of children and youth. The AAP/Bright Futures continues to emphasize the great importance of continuity of care in comprehensive health supervision and the need to avoid fragmentation of care. The Bright Futures/American Academy of Pediatrics Recommendations for Preventive Pediatric Health Care are updated annually and provide general guidelines on the categories of screening services, as well as the intervals at which these screenings should be conducted.

Documentation

Consistent with all services billed to Medi-Cal, practitioners conducting EPSDT screening services must document these services. Required documentation elements include the name of the screening tool, the date performed, who provided the screening, the results of the screening, evidence that the complete screening was reviewed (and discussed with the beneficiary and/or family if necessary). In cases where the review of the screening resulted in additional evaluation or development of a treatment plan, these follow-up actions must be documented.

ORP Recommendation for Screenings

For all screenings billed under the CYBHI Fee Schedule, the AAP/Bright Futures periodicity schedule acts as the authorization for the service and no additional referral or recommendation is necessary. This means that the following CYBHI Fee Schedule program procedure codes **do not require** a recommendation or referral from a licensed physician, licensed practitioner of the healing arts, or an Ordering, Referring or Prescribing (ORP) only provider. Screening services must be provided pursuant to the AAP/Bright Futures periodicity schedule, including the appropriate time interval upon which screenings are conducted. For all screening services, per the Centers for Medicare

and Medicaid Services (CMS), any qualified provider operating within the scope of his or her practice, as defined by state law, can provide a screening service[1].

Screening Tools and Procedure Codes

This list of screening tools is meant to be exemplary[2] and other evidence-based screening tools may be used to identify behavioral health problems. Please select the appropriate procedure code that aligns with the screening tool when billing the CYBHI Fee Schedule program. For a full list of CYBHI Fee Schedule program procedure codes, reimbursement rates and eligible practitioners, refer to the CYBHI Fee Schedule Scopes of Services, Codes and Reimbursement Rates.

Procedure Code	Example Screening Tools
G9919: Screening for ACEs (Score 4 and above)	• Adverse Childhood Experiences (ACEs)[3] • Pediatric ACEs and Related Life Events Screener (PEARLS)[4]
G9920: Screening for ACEs (Score 3 and below)	
G8431: Screening for depression, documented positive	• Beck Depression Inventory (BDI) • Children's Depression Inventory (CDI-2) • Children's Depression Rating Scale (CDRS) • Patient Health Questionnaire-9 (PHQ-9) • Patient Health Questionnaire-2 (PHQ-2) • Kutcher Adolescent Depression Scale (KADS) • Duke Anxiety-Depression Scale (DUKE-AD)
G8510: Screening for depression, documented negative	

[1] EPSDT Coverage Guide (page 16)
[2] DHCS has created Cal-MAP, a website of evidence-based tools for providers.
[3] For ACEs Screenings, children and adolescents under age 21 are permitted for periodic rescreening not more than once per year, per clinician. Children should be screened periodically to monitor the possible accumulation of ACEs. To be able to bill for reimbursement, providers must have taken a certified Core Trainings and self-attested to the completion of the training. For more information, refer to the ACEs Aware website.
[4] For more information about additional trauma screenings, please see BHIN 26-002.

Procedure Code	Example Screening Tools
90791: Psychiatric Diagnostic Evaluation **96130/96131:** Psychological Testing and Evaluation	• BASC-3 Behavioral and Emotional Screening System (BASC-3 BESS) • Children's Depression Inventory (CDI-2) • Children's Depression Rating Scale (CDRS) • Early Childhood Screening Assessment (ECSA) • Kutcher Adolescent Depression Scale (KADS) • Duke Anxiety-Depression Scale (DUKE-AD) • Developmental Assessment of Young Children • Patient Health Questionnaire for Adolescents (PHQ-A) • Generalized Anxiety Disorder 7 (GAD-7) • Pediatric Symptom Checklist (PSC) • Strengths and Difficulties Questionnaire (SDQ) • Patient Health Questionnaire-9 (PHQ-9) • Patient Health Questionnaire-2 (PHQ-2) • Vanderbilt Assessment
96132/96133: Neuropsychological Testing and Evaluation	
96136/96137: Psychological or Neuropsychological Test Administration and Scoring	
96127: Brief Emotional/Behavioral Assessment	
99408/99409: Alcohol and/or substance (other than tobacco) abuse structured screening and brief intervention services	• Alcohol Use Disorders Identification Test (AUDIT-C) • Cut down Annoyed Guilty Eye-opener Adapted to Include Drugs (CAGE-AID) Screening Tool • Screening to Brief Intervention (S2BI) • Brief Screener for Tobacco, Alcohol, and other Drugs (BSTAD) • Car, Relax, Alone, Forget, Friends, Trouble (CRAFFT) for non-pregnant adolescents • Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)
G2011/G0396/G0397: Alcohol and/or substance (other than tobacco) abuse structured assessment	
G0442: Screening for Annual Alcohol misuse	

Nothing stated in this PPL shall supersede any state or federal regulations or statutes.

If you have any questions or require further assistance regarding this PPL, please contact the CYBHI Fee Schedule mailbox at DHCS.SBS@dhcs.ca.gov.

Sincerely,

ORIGINALLY SIGNED BY ASHLEY COVINGTON

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