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Rural Health Clinic Billing Codes

January 1, 2026

Adult Health Screening Codes		
CODE	**DESCRIPTION OF SERVICES**	**MAXIMUM FEE**
99385	Adult Health Screening, new patient, age 21-39 yrs.	Cost based
99386	Adult Health Screening, new patient, age 40-64 yrs.	Cost based
99387	Adult Health Screening, new patient, age 65 yrs. and	Cost based
99395	Adult Health Screening, established patient, age 21-39 yrs.	Cost based
99396	Adult Health Screening, established patient, age 40-64 yrs.	Cost based
99397	Adult Health Screening, established patient, 65 yrs. and over	Cost based

Chiropractic Services Codes		
CODE	**DESCRIPTION OF SERVICES**	**MAXIMUM FEE**
99203	New Patient Visit	Cost-based
98940, 98941, 98942	Chiropractic Manipulation	Cost-based

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Well Child Visit (Child Health Check-Up) Codes			
CODE	**MODIFIER**	**DESCRIPTION OF SERVICES**	**MAXIMUM FEE**
99381		Well Child Visit – new patient <1year	Cost-based
99382		Well Child Visit – new patient 1 through 4 years	Cost-based
99383		Well Child Visit – new patient 5 through 11 years	Cost-based
99384		Well Child Visit – new patient 12 through 17 years	Cost-based
99385	EP	Well Child Visit – new patient 18 through 20 years	Cost-based
99391		Well Child Visit– established patient <1 year	Cost-based
99392		Well Child Visit – established patient 1 through 4 years	Cost-based
99393		Well Child Visit – established patient 5 through 11 years	Cost-based
99394		Well Child Visit – established patient 12 through 17 years	Cost-based
99395	EP	Well Child Visit – established patient 18 through 20 years	Cost-based

Family Planning Codes			
CODE	**MODIFIER**	**DESCRIPTION OF SERVICES**	**MAXIMUM FEE**
99383	FP	Family Planning—Initial Family Planning Examination – age 5-11 years	Cost-based
99384	FP	Family Planning—Initial Family Planning Examination – age 12-17 years	Cost-based
99385	FP	Family Planning—Initial Family Planning Examination – age 18-39 years	Cost-based
99386	FP	Family Planning—Initial Family Planning Examination – age 40-64 years	Cost-based
99393	FP	Family Planning—Annual Family Planning Examination – age 5-11 years	Cost-based
99394	FP	Family Planning—Annual Family Planning Examination – age 12-17 years	Cost-based
99395	FP	Family Planning—Annual Family Planning Examination – age 18-39 years	Cost-based
99396	FP	Family Planning—Annual Family Planning Examination – age 40-64 years	Cost-based
99403	FP	Family Planning Counseling Visit	Cost-based
99211	FP	Family Planning Supply Visit	Cost-based
99401 99402	FP	HIV Counseling	Cost-based

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Family Planning Waiver Codes

For more information about the family planning waiver program, visit: http://ahca.myflorida.com/Medicaid/Family_Planning/index.shtml

CODE	MODIFIER	DESCRIPTION OF SERVICES	MAXIMUM FEE
99384	FP	Family Planning—Initial Family Planning Examination – age 12-17 years	Cost-based
99385	FP	Family Planning—Initial Family Planning Examination – age 18-39 years	Cost-based
99386	FP	Family Planning—Initial Family Planning Examination – age 40-55 years	Cost-based
99394	FP	Family Planning—Annual Family Planning Examination – age 12-17 years	Cost-based
99395	FP	Family Planning—Annual Family Planning Examination – age 18-39 years	Cost-based
99396	FP	Family Planning—Annual Family Planning Examination – age 40-55 years	Cost-based
99211	FP	Family Planning--Supply Visit	Cost-based
99403	FP	Family Planning--Counseling Visit	Cost-based
99401, 99402	FP	HIV Counseling	Cost-based

Primary Medical Care Codes

CODE	DESCRIPTION OF SERVICES	MAXIMUM FEE
99201	Office or other outpatient visit	Cost-based
99202	Office or other outpatient visit	Cost-based
99203	Office or other outpatient visit	Cost-based
99204	Office or other outpatient visit	Cost-based
99205	Office or other outpatient visit	Cost-based
99211	Office or other outpatient visit	Cost-based
99212	Office or other outpatient visit	Cost-based
99213	Office or other outpatient visit	Cost-based
99214	Office or other outpatient visit	Cost-based
99215	Office or other outpatient visit	Cost-based
H1000	Antepartum Care only	Cost-based
59430	Postpartum Care only	Cost-based

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Mental Health Services Code		
CODE	**DESCRIPTION**	**MAXIMUM FEE**
H0004	Individual and/or Group Therapy by Mental Health Practitioner (45--50 minutes)	Cost-based

Optometric Services Codes		
CODE	**DESCRIPTION**	**MAXIMUM FEE**
99201-99205	Optometric Care-New patient	Cost-based
99211-99215	Optometric Care-Established patient	Cost-based

Podiatry Services Codes		
CODE	**DESCRIPTION**	**MAXIMUM FEE**
99201-99215	See Primary Medical Care for descriptors	Cost-based

RHC Visits to Nursing Facility or Custodial Care Facility, i.e., Assisted Living Facility		
CODE	**DESCRIPTION**	**MAXIMUM FEE**
99306	Visit to a Facility	Cost-based

Immunization Codes		
Code	**DESCRIPTION**	**MAXIMUM FEE**
Bill the Appropriate CPT Code	Administration of Vaccines to Medicaid recipients from birth through 18 years	$10.00 per vaccine dose

- Procedure codes listed on the Prescribed Drugs Physician Administered Billing Codes in Rule 59G-4.002, F.A.C., are reimbursed separately outside of the encounter rate.

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