

Providing CHIP and Medicaid services to Tarrant, Denton, Parker, Wise, Hood and Johnson

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Provider Relations

We're here for you! If you would like to know who your Provider Relations Coordinator is please email CCHPProviderRelations@cookchildrens.org.

Provider Forms

We've made changes to several of our provider forms. Visit the [Form Page](#) on our website to view the updates.

Cultural Competency

Providing culturally and linguistically appropriate services is an essential component in improving the quality of health services and can advance health equity and help reduce health care disparities.

Providers may utilize [Culturally Effective Health Care](#), a Continuing Education Course provided by Texas Health and Human Services and the Texas Department of State Health Services. Once the provider completes the training, email the certificate to CCHPNetworkdev@cookchildrens.org.

Once a certificate of completion is provided you will be reflected in the Provider Directory as completing Cultural Competency Training.

Electronic Visit Verification Resources

For the most current EVV Resources please visit:

- [Health and Human Services](#)
- [Cook Children's Electronic Visit Verification Page & Education and Training](#)

Provider Training Webinars

We'd love to have you or a member of your team attend our provider training webinars. The most up to date schedule can always be found under [Education & Training](#) on our website.

THSteps Quick Reference Guide

For the most updated version of the THSteps Quick Reference Guide, please visit the [Texas Health Steps Quick Reference Guide](#) page on tmhp.com.

Migrant Farm Workers

Children of Migrant Farm Workers face higher proportions of dental, nutritional and chronic health problems than non-migrant children.

Special Medicaid Services exists for children of Migrant Farm Works. We can assist with

- Scheduling appointments
- Finding a primary care provider or after-hours clinic
- Finding affordable insurance for members of their household without coverage
- Locating free transportation
- Information regarding government programs

How can you help? Notify us of a Migrant Farm Worker family. Call Provider Relations at 888-243-3312.

HEDIS AND YOU

Your cooperation and prompt response to our medical record requests help us in many ways!

HEDIS DEFINED

- **HEDIS** stands for **H**ealthcare **E**ffectiveness **D**ata and **I**nformation **S**et.
- It is a **performance measurement tool** coordinated and administered by the NCQA (National Committee for Quality Assurance) used to **measure the amount and quality of care** received by health plan members.
- **Results** are used to:
 - *Measure performance*
 - *Identify quality initiatives*
 - *Provide educational programs for providers and members*

YOUR ROLE IN HEDIS

- As a Provider, **you play a key role in promoting the health of our members.** As part of your agreement with CCHP, you are contractually obligated by the state to participate in HEDIS. You and your office staff can help facilitate the HEDIS process by:
 - **Providing appropriate care** within designated timeframes
 - **Documenting all care** accurately in the patient's medical record
 - **Coding all claims** accurately and **submitting** them in a timely manner, and lastly,
 - **Responding** to our requests for medical records within 14 business days

Visit <https://cookchp.org/English/Providers/Pages/Quality.aspx> and select the "Click Here" option under "HEDIS" to obtain the most current HEDIS information such as Data Collection, Hybrid Measures, Measure Details and Billing Codes

QUICK HEDIS FACTS

- **90%+** of America's Health Plans use HEDIS.
- HEDIS is reported collectively for each plan; not by provider or member.
- The deadline set by the NCQA for health plans to gather HEDIS data is **May 8, 2020.**
- Data is always collected for activities performed during the previous calendar year.
 - **Example: Medical records you receive this year in 2020 will cover care provided during calendar year 2019.**
- HEDIS measure requirements and calendar due dates can change on an annual basis.
- It currently includes more than 90 measures across 6 domains of care:
 - Effectiveness of Care
 - Access/Availability of Care
 - Experience of Care
 - Utilization and Risk Adjusted Utilization
 - Health Plan Descriptive Information
 - Measures Collected Using Electronic Clinical Data Systems.

HEDIS AND YOU

| MEASURE | GOAL OF MEASURE | RECORD SCOPE | DETAILS NEEDED |
|--|--|---|---|
| W15 WELL-CHILD VISITS IN THE FIRST 15 MONTHS OF LIFE | 6+ well visits completed with a PCP between 0-15 months of age | All sick and well child visits from birth in 2018 to 12/31/2019 | Each visit must include: <ul style="list-style-type: none"> • Health history • Physical exam • Health education/anticipatory guidance provided • Physical developmental history • Mental developmental history • Growth charts |
| W34 WELL-CHILD VISITS in the 3RD, 4TH, 5TH, and 6TH YEARS OF LIFE | 1+ well visit to a PCP completed during 2019 | All sick and well child visits from 12/01/2019 to 12/31/2019 | Each visit must include: <ul style="list-style-type: none"> • Health history • Physical exam • Health education/anticipatory guidance provided • Physical developmental history • Mental developmental history • Growth charts |
| AWC ADOLESCENT WELL-CARE VISITS | 1+ well visit to a PCP or OB/Gyn completed among those aged 12-21 during 2019 | All sick and well child visits from 12/01/2019 to 12/31/2019 | Each visit must include: <ul style="list-style-type: none"> • Health history • Physical exam • Health education/anticipatory guidance provided: tobacco use, drug and alcohol use and sexual activity • Physical developmental history • Mental developmental history • A note indicating the specific antigen name and immunization date • Certificate of immunization • If vaccine was not given, documented history of specific disease, anaphylactic reaction or contraindication for specific vaccine. • Documented evidence of ALL antigens must exist for combination vaccines. |
| CIS CHILDHOOD IMMUNIZATION STATUS | All immunizations completed by 2 years of age. Need at least 4 vaccinations administered on or after 42 days of life and on or before child's second birthday. | Immunization records from calendar year 2018 and 2019 | <ul style="list-style-type: none"> • Specific antigen name, date and certificate of immunization required (as above) • 1 meningococcal conjugate between 11th and 13th b-day • 1 Tdap between the member's 10th and 13th b-day • 2 or 2 HPV between 9th and 13th b-day |
| IMA IMMUNIZATION FOR ADOLESCENTS | Immunizations completed in 2019 among those aged 9-13 | Immunization records from calendar year 2019 | <ul style="list-style-type: none"> • BMI percentile (must include height and weight) • Discussion/counseling on diet, nutrition • Discussion/counseling on physical activities |
| WCC WEIGHT ASSESSMENT AND COUNSELING FOR NUTRITION AND PHYSICAL ACTIVITY FOR CHILDREN/ADOLESCENTS | Nutrition, activity and growth measured by PCP or OB/Gyn among those aged 3-17 in 2019 | Weight, nutrition, physical activity records from calendar year 2019 | <ul style="list-style-type: none"> • Blood pressure control is defined as BP = (<140/90 mmHg) • Reading must be taken NOT on the same day as a diagnostic test or therapeutic procedure which could impact reading |
| CBP CONTROLLING HIGH BLOOD PRESSURE | Adequate blood pressure control performed among those aged 18-85 diagnosed with HTN | Most recent representative blood pressure reading in calendar year 2019 | <ul style="list-style-type: none"> • Most recent BP reading in 2019 (<140/90 mmHg) • Hemoglobin A1c testing and control • Screening test or evidence of nephropathy in 2019 • Dilated or diabetic eye exam with results in 2019 or dilated eye exam with negative/normal result in 2018. |
| CDC COMPREHENSIVE DIABETES CARE | Recommended diabetic care provided to those aged 18-75 with Type 1 or Type 2 Diabetes | Labs and clinical care documentation from calendar year 2019, and possibly a result from 2018 | <ul style="list-style-type: none"> • Prenatal care visits within the first trimester before or on enrollment, or within 42 days of enrollment • Postpartum care visit within 21 to 56 days after delivery |
| PPC PRENATAL AND POSTPARTUM CARE | Adequate prenatal and postnatal care for females who delivered a live birth between 10/08/2018 and 10/07/2019 | Pre and postnatal visits for live births which occurred between 10/08/2018 and 10/07/2019 | |

HEDIS AND YOU

TIPS FOR SUCCESS

- Please help us by taking a few moments to review some documentation reminders:
 - Slash marks and dots DO count! Please be sure not to leave blank sections or empty boxes on checklists and assessments.
 - Education/anticipatory guidance requires an actual topic NOT related to the problem presented at the exam (i.e., handwashing discussed during a sick visit for a cold will not count).
 - ✓ A topic handout recorded as given will NOT count unless a discussion is also documented as given.
 - Noting a history or records are “on file” without also indicating they were reviewed will not count.
 - Please be descriptive during the physical and mental development sections and all assessments. Common abbreviations and notations which do NOT count include:
 - ✓ “Well-developed”
 - ✓ “Well-nourished”
 - ✓ “WNWD”
 - ✓ “Normal development”
 - ✓ “Appropriately responsive for age”
 - ✓ Development problems: Yes/No
 - ✓ Development: Normal/Abnormal

Other Health Insurance/Notification of Benefit Information

Notification of a change to other health insurance such as, termination of primary insurance can be submitted through our Secure Provider Portal, by [email](#) or fax 682-885-8401. For more information on [Notification of Other Health Insurance](#) visit our Electronic Submission Services page at cookchp.org.

Electronic Fund Transfer (EFT) & Electronic Remittance Advice (ERA)

Sign up for EFT and enjoy the benefits of decreased data errors and improved cash flow resulting from no checks lost in the mail, reduced paperwork and expedited account reconciliations. Complete and submit this [form](#) to get started and fax to CCHPFinance@cookchildrens.org.

Following EFT enrollment, providers may elect to receive Electronic Remittance Advice (ERA) through the Availity Health Information Network. To enroll for ERA delivery on the Availity Web Portal, select Enrollments > ERA Enrollment from the Availity menu, or click ERA Enrollment in the Additional Enrollments section on the Administrator Dashboard. For questions, call Availity Client Services at 800-282-4548.