

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

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**Prior Authorization Determination Letters**

Beginning April 1, 2022 Prior Authorization determinations letters will be sent to the [Secure Provider Portal](#) Users In Basket. Any Provider representative with access to the Secure Provider Portal and linked to the Provider Tax ID or NPI will have access to the prior authorization determination via the Secure Provider Portal In Basket.

If you do not have access to the Secure Provider Portal please request access by following the instructions in the [Secure Provider Portal Reference Guide](#).

**Case Management Referrals**

Providers can now initiate a referral to STAR/CHIP Care Management, Population Health or Disease Management via the Secure Provider Portal.

- Log in to the [Secure Provider Portal](#)
- Click Customer Service on the homepage
- Select the Topic: Link – Referral to STAR/CHIP Care Management Population
- Complete the required fields and submit the form

**Secure Provider Portal Reporting**

Secure Provider Portal Users may now access the dashboard from the homepage to run claim, authorization and Member reports. Users can view the results or export the results to Excel.

**Maternal Level of Care Designation**

Hospitals enrolled in Texas Medicaid can be reimbursed for inpatient and outpatient maternal services only if the hospitals have received a maternal level of care designation from the Department of State Health Services (DSHS).

Claims will be denied if the address on the submitted claim does not match the physical address of the location that was issued a maternal level of care designation.

Example:

- Numbers must be spelled out as words or left numeric on the claim to match the address on the maternal level of care designation on file
  - “Street” or “Avenue” must either be spelled out or abbreviated, etc.

Providers can refer to the DSHS approval letter for the correct address.

For additional information please visit [tmhp.com](http://tmhp.com).

### **Abbott Recall of Certain Powdered Formulas**

Abbott has initiated a voluntary recall of specific lots of Similac products (including Alimentum, Total Comfort, Spit Up, and Sensitive), and EleCare powdered formulas. Isomil, Neosure and Similac PM 60/40 are not impacted. The voluntary recall is in response to consumer complaints related to *Cronobacter sakazakii* and *Salmonella* Newport.

For more information please visit the [Provider News page](#) located at [cookchp.org](http://cookchp.org).

### **Online Education Courses for Members**

Cook Children's Health Plan and Tarrant County Public Health are teaming up to help you learn more about health topics.

- Online Courses available in both English and Spanish
  - At no cost to the Member
- Upcoming Courses
  - Living with Hypertension
  - Healthy Pregnancy
- Resources:
  - [Events and Classes](#)

### **Diagnosis and Procedure Code Validation**

When submitting prior authorization requests you must ensure the diagnosis codes and procedure codes are valid on the date of service and are coded to the highest level of specificity. Providers must follow the billing and coding guidelines outlined in the Texas Medicaid Provider Procedures Manual (TMPPM), Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPC) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD10-CM).

## Applied Behavior Analysis Provider Training

Effective for dates of service on or after February 1, 2022, Autism Services, to include Applied Behavior Analysis (ABA) evaluation and treatment, is a benefit of the Texas Health Steps-Comprehensive Care Program (THSteps CCP) for Texas Medicaid recipients who are 20 years of age and younger and who meet the criteria outlined in the Autism Services benefit description.

Providers may refer to [HHSC Release of Autism Services Benefits Effective February 1, 2022](#) for additional information. A comprehensive outline of the [Autism Services Policy](#) may be found in the [Texas Medicaid Provider Procedures Manual](#).

[Applied Behavioral Analysis Provider Training](#)

## External Medical Review (EMR) Provider Training

Texas Health and Human Services recently conducted a training to provide an overview to Providers on the role/responsibilities for participants involved in an External Medical Review (EMR) following receipt of an Adverse Benefit Determination from an MCO or Dental Contractor.

To view the training please visit the [Provider News page](#) located at [cookchp.org](http://cookchp.org).

## Medicaid and CHIP COVID-19 Flexibilities

Providers can obtain the most current COVID-19 flexibility updates by visiting:

- [HHSC Coronavirus Provider Information](#)
- [Texas Medicaid & Healthcare Partnership](#)

Recent flexibility updates include:

- CHIP Copayment Waiver extended to March 2022
- Changes related to Appeals and Fair Hearing extended through March 2022

## Update to COVID-19 Testing Billing Code 86328

Health and Human Services Commission (HHSC) is requiring Providers to include modifier QW when billing for the COVID-19 procedure code 86328 for dates of service on or after September 23, 2020.

The QW modifier is a CLIA guidelines requirement for specific procedure codes based on their complexity and must be included on claims that have CLIA waived procedure codes. Providers must have the required CLIA certification on file, and must use the QW modifier when it is required.

- Claims will be denied if the QW modifier is not present on applicable CLIA-waived tests.

Providers must refer to the [CMS CLIA website](#) for information about CLIA-waived tests, Provider certifications, and billing requirements.

Resource: [Code 86328](#)

## Informational Only Procedures

All procedures, including the informational only procedures, must have a billed amount associated with each procedure listed on the claim.

Informational only procedure codes must be billed in the amount of at least \$0.01.

## HEDIS Medical Records

Providers can submit HEDIS medical records via the Secure Provider Portal.

Log in to the [Secure Provider Portal](#)

Click Customer Service on the homepage

Select the Topic: Link – Quality Medical Records

Completed the required fields, attach the documents and submit the form

## Home Health Agency Claims Filing and Reimbursement

Skilled Nursing, Home Health Aide, Occupational Therapy and Physical Therapy Services provided by a Medicaid enrolled Home Health Agency must be billed on a UB-04. For initial claims Providers must only use type of bill 321.

- Other type of bills are invalid and will result in a claim denial.

When completing a claim form, all required information must be included on the claim.

- Prior authorization numbers must be indicated on the claim form in block 63
- Point of Origin for Admission of Visit must be indicated on the claim form in block 15
  - Providers can refer to the National Uniform Billing Code website for the current list of Point of Origin for Admission or Visit codes

Resource: [Texas Medicaid Provider Procedures Manual, Vol. 1 Claims Filing](#) (Claims Filing for Home Health Agency Services) and [Vol. 1 Texas Medicaid Fee for Service Reimbursement](#) (Home Health Agency Reimbursement).

## Claim Overpayments and Refund Mailing Address

When an overpayment is identified by the Provider due to a billing error, the Provider should submit a corrected claim. The health plan will process the corrected claim and will recoup the overpayment.

When an overpayment is identified by the Provider due to a health plan processing error, the Provider should submit a claim appeal via the Secure Provider Portal requesting reconsideration and recoupment if appropriate.

To ensure the refund request is applied correctly, Providers should include a letter of explanation or the refund request letter and the Explanation of Payment (EOP).

Providers can submit refund checks to:  
Cook Children's Health Plan  
Attention: Finance Department  
PO Box 2488  
Fort Worth, TX 76113-2488

### **Critical Incident Management Reporting System**

The Health and Human Services Commission (HHSC) will implement a new a statewide Critical Incident Management System (CIMS) for reporting critical incidents. The system is targeted to go live June 6, 2022.

This will include information on abuse, neglect and exploitation allegations in addition to other critical incidents required by program policy. All waiver Providers will be required to report information into the new system.

For more information please visit: [hhs.texas.gov](https://hhs.texas.gov)

Resource: [Information Letter No. 2022-14](#)

### **Place of Service Code 10**

Effective January 1, 2022, Place of Service (POS) code 10 is available for Providers who provide telehealth services to patients who attend the telehealth appointments in their own homes. Claims provided via telehealth should append modifier 95 to the procedure code.

Providers should continue to use POS code 02 when telehealth is provided and the patients attend the telehealth appointments anywhere other than their own homes (e.g., a hospital or skilled nursing facility).

### **Service Facility Location**

Providers seeing Members outside their normal office location (excluding the Member's home) must populate the box 32 of the HCFA.

- Box 32 should be left blank if the services were provided in the Provider's office or Member's home
- If services were provided in a Facility you must enter the Facility Name, National Provider Identifier, Taxonomy code and Taxonomy qualifier
  - If you enter any information in box 32 you must complete all fields
- If the field does not apply to your claim, please leave it blank.
  - Do not partially complete a field as it will cause the claim to reject or deny

## Texas Health Steps (THSteps)

### Medical Checkup Diagnosis Codes

Providers must bill the age appropriate preventive diagnosis code for the Texas Health Steps (THSteps) visit.

- Bill only one age appropriate preventive diagnosis code per claim
  - Z00.110, Z00.111, Z00.129, Z00.121, Z00.00, Z00.01
- Must point to the age appropriate preventive diagnosis code as the primary diagnosis code for each claim line
  - This includes the preventive E/M, vaccine/toxoid, vaccine administration code, screenings, etc.
  - The Encounter for immunization diagnosis code, Z23, may be billed as the secondary diagnosis code for the vaccine/toxoid code(s) and vaccine administration code(s)

### Texas Health Steps Quick Reference Guide

We encourage Providers to utilize the Texas Health Steps Quick Reference Guide when billing THSteps medical checkups.

#### Resources:

- [Texas Health Steps Quick Reference Guide](#)
- [Texas Medicaid Provider Procedures Manual](#)
- [Texas Health Steps Training on the TMHP Learning Management System](#)
- [Texas Health Steps Online Provider Education - Free Continuing Education Credits](#)
  - [Texas Health Steps Overview](#)

## Benefits, Limitations and Exclusions

Providers should verify benefits, limitations and exclusions located in the Texas Medicaid Provider Procedures Manual at [tmhp.com](http://tmhp.com) prior to rendering services. Always refer to the most recent publication.

When submitting services for reimbursement, Providers should refer to the most recent publications of the:

- Texas Medicaid Provider Procedures Manual located at [tmhp.com](http://tmhp.com)
- Cook Children's Health Plan Provider Manuals located on [cookchp.org](http://cookchp.org)
- Electronic Data Interchange Requirements located on [tmhp.com](http://tmhp.com) and [cookchp.org](http://cookchp.org)
- CPT/ICD-10/HCPC coding books
- Medicaid National Correct Coding edits located on [Medicaid.gov](http://Medicaid.gov)

## Provider Training Webinars

We would love to have you or a member of your team attend our Provider training webinars. Visit the [Provider Relations page](#) located on our website [cookchp.org](http://cookchp.org) to view our [provider training webinar schedule](#) and register for an upcoming webinar.

## Provider Relations

How can we help you? If you need assistance or would like to know who your Provider Relations Coordinator is please email [CCHPProviderRelations@cookchildrens.org](mailto:CCHPProviderRelations@cookchildrens.org).