

Summer
2017

CookChildren's
Health Plan

Provider Newsletter



STAR KIDS - LONG TERM SERVICES AND SUPPORTS (LTSS) BILLING MATRIX

The STAR Kids billing matrix has been updated to include the registered nurse modifier (TD) to the private duty nursing (PDN) billing code, T1000. Additionally, the billing codes for PDN independently enrolled LVNs and RNs have been added to the matrix. The Revenue Code 663 was added to the Out-of-Home Respite codes.

The new billing matrix became effective on June 5, 2017* and can be found on the Health and Human Services (HHS) website [here](#).

**Please note that new authorizations must follow the June 5, 2017 STAR Kids billing matrix; however, existing authorizations do not have to be updated.*

AGE APPROPRIATE DIAGNOSIS AND PROCEDURE CODE

As a reminder, a clean claim includes the code or codes that correctly describe the health care services provided, including reporting age appropriate diagnosis and procedure codes. Diagnosis and/or procedure codes reported inappropriately will be considered billing errors and will not be reimbursed.

REQUIRED MODIFIER FOR ZIKA VIRUS TESTING CODES

Effective May 5, 2017, Texas Health and Human Services (HHS) requires lab providers to include modifier U4 with procedure code 86790, 87798, or 87799, when submitting a fee-for-service claim for Zika virus testing. More information can be found on the Texas Medicaid website [by clicking here](#).

Important: To ensure laboratories are able to submit Zika virus testing claims correctly, the ordering provider must clearly indicate when a test is for Zika virus screening. Providers are expected to use clinical judgement and follow recommendations from the Department for State Health Services (DSHS) regarding testing. These guidelines can be found at [TexasZika.org](#).

THE TEXAS CLINICIAN'S POSTPARTUM DEPRESSION TOOLKIT

Postpartum Depression (PPD) is a common, potentially serious and sometimes life-threatening condition. Although the term PPD is commonly used, it is important to note that depression can occur during pregnancy as well as after the baby is born.

The new Texas Clinician's Postpartum Depression Toolkit is intended to be a resource for Texas clinicians on screening, diagnosis and treatment of PPD. The toolkit also includes coverage and reimbursement options for PPD through Medicaid, CHIP, the Healthy Texas Women Program, the Family Planning Program and other referral options. [Click here to download this helpful resource](#).

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THSTEPS FOR RNS

RNs without Clinical Nurse Specialist (CNS), Nurse Practitioner (NP), or Certified Nurse Midwife (CNM) certification may provide THSteps medical checkups only under direct physician supervision, meaning the physician is either on site during the checkup or immediately available to furnish assistance and direction to the RN during the checkup.

Prior to performing THSteps checkups, the RN must complete required training modules developed by THSteps. A complete list of all required modules, as well as access to required training modules, is available on the THSteps Online Provider Education (OPE) at [Courses by Topic](#). (Scroll down to **Required Courses for Texas Health Steps Nurses**). Additional information can be found in the [Texas Medicaid Provider Procedures Manual \(TMPPM\)](#).

SPEECH THERAPY REQUESTS AND HEARING SCREEN REMINDER

CAN YOU HEAR ME NOW?

Cook Children's Health Plan guidelines specify that requests for Speech Therapy must be accompanied by documentation of normal hearing in at least one ear by pure-tone audiometry or formal evaluation by a physician or pediatric audiologist. This hearing evaluation must have been performed within the last six months for children birth to 3 years of age and within the last twelve months for Members 3 years of age and older as recommended by the American Speech-Language-Hearing Association. Otoacoustic Emissions Testing (OAE) is not sufficient. Please be sure to submit a hearing evaluation with your request for speech therapy services to ensure that authorization is not delayed.

ELECTRONIC SUBMISSION SERVICES

Cook Children's Health Plan encourages providers to access our electronic transaction services such as Electronic Claims Submission, Electronic Fund Transfer (EFT) and Electronic Remittance Advice (ERA). We are committed to helping our providers maximize the use of online tools and increase efficiencies. Please review the information below and access on our website at <http://www.cookchp.org/English/Providers/Pages/Electronic-Submission-Services.aspx>.

Electronic Claim Submission

We're pleased to partner with Availity to provide a secure platform where providers can submit single claim submissions at no cost. Follow the links below to register and login to the Availity portal. For questions, call Availity Client Services at 800-282-4548.

- *Register* - <https://www.availity.com/resources/support/web-portal-registration>
- *Login* - <https://apps.availity.com/availity/web/public.elegant.login>

Electronic Fund Transfer (EFT)

Are you looking for ways to improve your cash flow? 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.](#)

Electronic Remittance Advice (ERA)

Following EFT enrollment (providers must be enrolled in EFT in order to be eligible for enrollment in ERA), 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. [You may also enroll by completing the Availity ERA enrollment form listed here.](#) For questions, call Availity Client Services at 800-282-4548.

CLAIM DOCUMENTATION REQUIREMENTS

Providers must include or adhere to the following documentation guidelines when considering claim submission:

NPI and Taxonomy Codes - Providers must submit the appropriate Billing NPI and Taxonomy code and the appropriate Rendering NPI and Taxonomy on all electronic and paper claim submissions. The rendering provider is the individual who provided the care to the Member. If a rendering provider is available, the rendering provider NPI and Taxonomy must be included on the claim.

- It is critical that the taxonomy code selected as the primary or secondary taxonomy code during a provider's enrollment with the Texas Medicaid & Healthcare Partnership (TMHP) is included on all electronic and paper claim submissions. Claims submitted without a taxonomy code will be rejected and/or denied. Taxonomy codes are used to crosswalk the NPI to a TPI.

CLAIM STATUS ASSISTANCE

Provider Secure Portal

Cook Children's Health Plan Provider Secure Portal offers tools to assist your office. Go to our website at cookchp.org, proceed to the Provider screen and select Provider Secure Portal. In order to use our Provider Secure Portal you must first register online. You will be required to enter information such as your tax identification number, provider NPI, contact name and email address. Once you complete and submit the registration form, you will receive an email confirmation to validate your account.

Please note that although multiple staff members within one office or group can have an account, each user within the office must create their unique user name and password. Sharing accounts between staff is not permitted.

Here are some of the features currently available:

- verify eligibility: find out patient coverage, coordination of benefits and copays by simply entering the necessary search criteria
- Member listing: Primary Care Providers can access a list of Members assigned to you for primary care services.
- claim appeals: file appeals
- claim status: confirm the status of submitted claims
- payment Search: enter check number to confirm EOP details
- submit and review online authorizations: avoid the fax machine and submit service authorization requests directly to us online, check on status of authorizations by Member and/or authorization number

Automated System

The Interactive Voice Response (IVR) is an automated system feature available to providers twenty four (24) hours a day, seven (7) days a week. Providers can utilize the automated feature to verify eligibility and claim status. Features include:

- no waiting for a live representative
- choose verbal playback or fax back
- no limits on the amount of status requests
- allows you to go back to main menu or speak to live representative (applicable during regular business hours)

How to use IVR:

- call local 682-885-2247 or toll free 800-964-2247
- select option 5 for Provider
- select option 3 for Automated System (IVR)

COOK CHILDREN'S HEALTH PLAN MAIN NUMBER:

682-885-2247 OR 800-964-2247 TOLL FREE

Hours of Operation: Monday – Friday 8:00am – 5:00pm

Visit our website at www.cookchp.org

| Department | Fax Number | Service Provided |
|---------------------|--|--|
| Member Services | 682-885-8401 STAR Kids 800-964-2247 cchpmemberservices@cookchildrens.org | Eligibility, Benefits, or General Inquiries |
| Claims Department | 682-885-8404 CCHPClaims@cookchildrens.org | Claims Status, Payments, Appeals or Questions |
| Care Management | 682-885-8402 844-346-8402 Toll Free Fax 682-303-0005 STAR Kids LTSS 844-843-0005 Toll Free Fax | Prior-Authorizations, Case Management, Referrals, Disease Management |
| Compliance | 682-303-0276 CCHPCCompliance@cookchildrens.org | Member & Provider Complaints, Fraud, Waste, and Abuse |
| Network Development | 682-885-8403 CCHPNetworkDev@cookchildrens.org | Credentialing, Contracting, Demographic Changes, NPI/TPI update, Billing Updates |
| Provider Relations | 682-885-8436 CCHPPProviderRelations@cookchildrens.org | Provider Education & Training |
| Outreach | 682-303-2245 CCHPOutreach2@cookchildrens.org | Questions about Migrant Farm Workers, THSteps/Well Child Appointments |
| Outbound | 682-303-2244 CCHPOutbound@cookchildrens.org | Health Risk Assessments (HRA) |

| Department | Phone Number | Fax Number | Service Provided |
|--------------------------------------|--|--------------|------------------------|
| National Vision Administrators (NVA) | 888-830-5630 providers@e-nva.com | 888-830-5560 | Vision Services |
| Beacon Health Services | 855-481-7045 Provider.Relations@beaconhs.com | 855-371-9227 | Mental Health Services |

Paper Claims Address:
Cook Children's Health Plan
P.O. Box 961295
Fort Worth, TX 76161-1295

Appeals, COB, and General Mailing Address:
Cook Children's Health Plan
P.O. Box 2488
Fort Worth, TX 76113-2488

CHIP Payor ID
CCHP1

STAR/STAR Kids Payor ID
CCHP9