

PROVIDER NEWSLETTER

Spring 2016



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Health Choice Arizona Develops New Physician Toolkit

Health Choice Arizona (HCA) has implemented a new tool that aims to provide our physicians and their staff with the information they need to efficiently and effectively manage the care of their patients.

The HCA Physician Toolkit provides our physician partners with comprehensive patient data that corresponds with performance goals provided by the Arizona Health Care Cost Containment System (AHCCCS).

The Physician Toolkit includes the below materials:

- Performance Metric Guideline - Definition of the performance metrics and why members qualify for specific services.
- Physician Report Card – Description of how the specific provider's tax ID is performing in regards to the performance metrics.
- Gap Report - List of the specific provider's entire paneled membership, and each

member's specific gaps in care.

- Performance Reporting Form – Sheet for the physician with the proper ICD-10/CPT codes to provide to their biller to receive credit for their work.

Physician Toolkits are distributed quarterly to monitor progress. ■

Developmental Screenings

On August 1, 2014, AHCCCS began reimbursing qualified medical professionals for performing specific developmental screening services with proof of certification. Developmental screenings allow providers to be able to identify developmental delays or any other referral service that a child may need in order to receive the necessary care.

Developmental screenings should be completed at a child's 9 month, 18 month and 24 month visit.

There are three different Developmental Screening Training Certifications available through the Arizona Department of Health Services:

- Ages and Stages Questionnaire (ASQ) – Ages 2 months to 5 years old.
- Parents' Evaluation of Developmental Status (PEDS) – Birth to 8 years old.
- Modified Checklist for Autism in Toddlers (M-CHAT) – 16 month to 30 months.

It's important to remember that providers must obtain Training Certificates to submitting reimbursement requests. Please send your certification to Health Choice Arizona with your EPSDT claim. Providers can obtain certification by visiting <http://www.azdhs.gov/audiences/clinicians/#training-home>.

Supplemental Submissions For Performance and Quality Reporting

DID YOU KNOW?

Beginning January 1st, 2016:

- Health Choice will accept more than one claim form with the same date of service, which will assist with PQRS reporting (if applicable).
- This will help meet quality metrics and close the gaps early on the front end.

WHAT DOES THIS MEAN?

- This means that you can use multiple claim forms to report more codes for the same date of service.
- The claim form allows a maximum of 12 diagnosis codes and 6 CPT/HCPCS codes to be submitted per form.
- Providers can now submit additional diagnoses and CPT codes by using an additional claim form for the same date of service. 99499 should be used as the initial CPT code (line 1 of section 24) for any additional claim form.

SAMPLE OF SUPPLEMENTAL CLAIM FORM:

- Initial claim (not pictured) lists twelve ICD-10 diagnoses in section 21; section 24 lists CPT code G0439 (for the Annual Wellness Visit), and multiple other codes.
- Second claim form (shown above) lists additional diagnosis codes in section 21, and uses CPT code 99499 in line 1 of section 24. Additional CPT codes are listed in lines 2 - 6 as appropriate.
- Remember: use 99499 for the CPT service code on any subsequent form(s) to report additional codes for the same encounter.
- Bill the amount \$0.00 or \$0.01
- Submit all the claim forms to Health Choice

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY: Relate A-L to service line below (24E) ICD Ind. 22. RESUBMISSION CODE ORIGINAL REF. NO.

A. E66.01 B. K21.9 C. L40.50 D. 23. PRIOR AUTHORIZATION NUMBER

E. F. G. H. I. J. K. L.

24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) E. DIAGNOSIS POINTER F. \$ CHARGES G. DAYS CPT UNITS H. EFFORT Payor I. ID. QUAL. J. RENDERING PROVIDER ID. #

1 01 01 16 01 01 16 11 99499 A 0.00 1 NPI 0123456789

2 01 01 16 01 01 16 11 1160F A 0.00 1 NPI 0123456789

3 01 01 16 01 01 16 11 3074F A 0.00 1 NPI 0123456789

4 01 01 16 01 01 16 11 3050F A 0.00 1 NPI 0123456789

5 01 01 16 01 01 16 11 NPI

6 01 01 16 01 01 16 11 NPI

25. FEDERAL TAX I.D. NUMBER 123456789 26. PATIENT'S ACCOUNT NO. MEMBER ABC 27. ACCEPT ASSIGNMENT? (For govt. claims, see back) [X] YES [] NO 28. TOTAL CHARGE \$ 0.00 29. AMOUNT PAID \$ 0.00 30. Rvd for NUCC Use

31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS (I certify that the statements on the reverse apply to this bill and are made a part thereof.) Sample Simple, M.D. 01/01/16 32. SERVICE FACILITY LOCATION INFORMATION Example Clinic 123 Healthy Street Wellville, AZ 88888 33. BILLING PROVIDER INFO & PH # Dr. Sample Simple, M.D. (555) 555-5555 123 Healthy Street Wellville, AZ 88888

SIGNED DATE a. 9999999999 b. 9999999999 c. 9999999999

NUCC Instruction Manual available at: www.nucc.org PLEASE PRINT OR TYPE APPROVED OMB-0938-1197 FORM 1500 (02-12)

SPECIAL FEATURE:

Pregnancy and Depression

According to Postpartum Support International, approximately 15% of pregnant women will experience depression at some point in their pregnancy. Early identification of women at risk for depression is critical to the emotional well-being of the pregnant women and unborn fetus.

Obstetric providers should evaluate a pregnant woman's emotional state alongside her physical evaluation. The following are examples of depression symptoms:

- Excessive worry or anxiety
- Irritability or short temper
- Feelings of being over-whelmed
- Hopelessness
- Loss of interest or pleasure
- Loss of focus or concentration

If you have questions about Health Choice Arizona's behavioral health or maternal health services, please call our Member Services line at 1-800-322-8670. ■

Reduced Timelines for Health Choice Arizona Credentialing Process

Health Choice Arizona's initial credentialing process will now occur in 90 days or less! The process starts as soon as we receive a full and complete application from the provider.

This credentialing change also affects FQHCs, which now must be treated as temporary or provisional; this means their credentialing process will occur in 14 days or less.

In addition to timeline changes, we must now also credential License Board Certified Behavioral Health Analysts. ■

Controlled Substance Prescription Monitoring Program

Have you completed your online registration for the Arizona State Board of Pharmacy's Controlled Substance Prescription Monitoring Program (CSPMP)? The Controlled Substance Prescription Monitoring Program has been in place since October 2015,

and was developed to promote the public health and welfare by detecting diversion abuse and misuse of prescription medications.

Prior to prescribing a controlled substance, providers must remember to

check the CSPMP website and document in the medical record that the CSMPM has been checked prior to prescription. Providers can visit <https://pharmacypmp.az.gov/> to complete their online registration. ■

We Heard You!

We heard our provider's feedback. Our Provider Portal now provides more detail on your claims:

- **Claim Pends:** No longer do you have to wonder about the status of your claim or wonder what "pending" means: log in to the Provider Portal and see exactly where your claim is in processing through our systems.
- **Claim Denials:** Don't wait for a remit! Log in to the Provider Portal and see exactly why claims may have been denied and learn more about what you can do to ensure accurate and timely payment.
- **Claims Payment:** Your check is on the way! Log in to the Provider Portal to see the pay code, your check number, and the date the check was executed. We want to help you keep your AR timely.

An Additional Note - Important Security Notice for All Provider Portal Users

On April 1, 2016, Health Choice will be updating the security settings on our Provider Portal as part of our ongoing efforts to provide the highest level of security for our Portal users. You may have to update your browser security settings to continue to access the site after April 1. Instructions for doing so are on the Provider Portal. We encourage you to review your settings and make any necessary updates in advance. ■

Call for Provider Directory Updates

Has any of your information changed?

We like to keep our records up to date. Please contact your network representative or fax 480-760-4952 if you have changes to your roster, address, fax or phone number. ■

