

# the **checkup**



MAY 2016

A monthly publication of Texas Children's Health Plan



## Take Action Now!

**All providers must re-enroll in Texas Medicaid.** To avoid potential disruption in payment, a complete re-enrollment application must be received on or before **June 17, 2016** in order to be re-validated by **September 24, 2016**.

In the event that the re-enrollment process is not completed by September 24, 2016, and the provider is still working toward addressing identified deficiencies at the time, the provider will continue to remain enrolled in Texas Medicaid as long as the provider responds to the deficiency notifications within the defined timeframe for response. **If providers have not yet started the process please do so immediately!**

For help with enrollment, call 1-800-925-9126 or visit [www.tmhp.com/Pages/Topics/Reenrollment.aspx](http://www.tmhp.com/Pages/Topics/Reenrollment.aspx).

ND-0316-290



## Did you miss the March CME?

Visit the [Checkup.org](http://Checkup.org) to learn the key points from our latest presentation.

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# 5 ways to encourage speech development and language skills

**As pediatricians, we can play a key role in fostering appropriate language development.** During our interactions with families – we must educate and empower parents to positively influence their child’s speech and language development from early infancy, as they hold the key to impact not only their child’s linguistic capabilities, but also their future cognitive potential and a child’s future success.

Here are some suggestions that can be incorporated into practices providing care to infants and children to **encourage successful early language development:**

- Encourage parents and caregivers to read, talk, sing and play with their children beginning at birth.
- Educate parents to avoid criticizing their child’s articulation or speech patterns. Instead they should praise their child’s efforts and lovingly repeat their statements with correct pronunciation or word usage.
- Implement a literacy promotion program such as “Reach Out and Read” that incorporates reading and literacy into the well child visit beginning at birth.
- Encourage parents and other caregivers to visit their local library with their children to borrow books and for story time.

(continued above right)

- Educate families to use television and technology sparingly. The American Academy of Pediatrics recommends that children younger than 2 not watch television at all. Children at this age learn better from interactions with the world around them.

**For more information about speech development, visit [TheCheckup.org](http://TheCheckup.org).**

by **Dr. Lia Rodriguez, MD**  
Medical Director, Texas Children’s Health Plan



## The benefits of STAR Kids

STAR Kids will be tailored to the needs of youth and children with disabilities.

The program will provide benefits such as prescription drugs, hospital care, primary and specialty care, preventive care, personal care services, private duty nursing, and durable medical equipment and supplies. Children and youth who get additional services through MDCP will receive additional long-term services and supports through STAR Kids.

Through STAR Kids, families will also receive coordination of care, which will help identify needs and connect members to services and qualified providers. Each member will have their service needs assessed, which will form the basis of that member’s individual service plan. Providers will be able to work with the care coordinators to ensure patients have access to the care and equipment they need. In addition, care access will be enhanced through promotion of health homes and support from experts in caring for medically complex children. Coordination will reduce unnecessary health care utilization and increase the ability of members with disabilities to remain in their communities.

The STAR Kids program emphasizes improving key transitions for children with disabilities. Whether transitioning from the hospital to home, or into adult care, members and providers will be equipped with support through care coordination by the health plan. Texas Children’s Health Plan looks forward to partnering with our existing provider network, as well as some new partners to achieve better care for the most vulnerable children in our community.

## STAR KIDS 101: LEARN THE BASICS

### What is STAR Kids?

STAR Kids will be the first Medicaid managed care program in Texas specifically **servicing youth and children who receive disability-related Medicaid.** Texas Children’s Health Plan STAR Kids program will provide services, including long term support services (LTSS), for members ages 20 or younger who either receive Supplemental Security Income (SSI) Medicaid or are enrolled in the Medically Dependent Children Program (MDCP). Children and youth who receive services through other 1915(c) waiver programs will also receive their basic health services (acute care) through the STAR Kids program. **Most of these children currently receive services through traditional Medicaid and will be transitioning to this managed care program.**

Major conditions of this population include:

- Behavioral health disorders
- Blind
- Cardiovascular disorders
- Congenital anomalies (e.g., Down Syndrome, Spina Bifida)
- Disabled
- Injuries (e.g., traumatic brain injuries, limb amputations)
- Neuromuscular disorders (e.g., Cerebral Palsy)
- Technology Dependent



# Annual Chlamydia Screening No Pelvic Necessary!

Annual chlamydia screening is recommended for all sexually active women ages 15 to 24, as well as older women with risk factors such as new or multiple sex partners, or a sex partner who has a sexually transmitted infection. Nucleic Acid Amplification Tests (NAATs) are the most sensitive tests, and can be performed on easily obtainable specimens such as urine or vaginal swabs (either clinician- or patient-collected).

The majority of people with *C. trachomatis* infection are not aware of their infection because they do not have symptoms that would prompt them to seek medical care. **Consequently, screening is necessary to identify and treat this infection.**

## How is chlamydia diagnosed?

There are a number of diagnostic tests for chlamydia, including NAATs, cell culture, and others. NAATs are the most sensitive tests, and can be performed on easily obtainable specimens such as vaginal swabs (either clinician- or patient-collected) or urine.

## Which tests do I use?

Examples of NAATs include APTIMA® COMBO2 Assay (GEN-PROBE), CT APTIMA®, CT TMA.

## How do I code for this?

Texas Children's Health Plan exclusively uses Quest for laboratory testing. The CPT code for the NAAT testing is 87491. Other CPT Codes for chlamydia testing/screening include: 87110 and 87270.

## Do I need to report a positive chlamydia test?

Reporting chlamydia is mandated by the state of Texas. The primary responsibility for reporting rests with the physician, although laboratories, nursing homes, hospitals, and other locations providing health services are also required to report.

To learn more about Chlamydia screenings, visit [TheCheckup.org](http://TheCheckup.org).

## Additional electronic payments offered with Virtual Credit Card option

The Virtual Credit Card (VCC) is an additional payment option made available through ChangeHealth, previously known as Emdeon. This option is available for all providers. VCC allows providers to accept a virtual payment instead of a paper check or electronic funds transfers. With VCC, for every payment made by Texas Children's Health Plan, a provider will receive a unique 16 digit credit card number, that they will key into their credit card terminal to receive payment transfer.

Texas Children's Health Plan encourages all providers to move to an electronic payment option- either Electronic Funds Transfer or Virtual Credit Card payments.

### Providers have the following options once they receive the introduction letter from ChangeHealth:

1. Contact ChangeHealth to opt in to electronic funds transfer or VCC.
2. Contact ChangeHealth to stay with paper checks.

3. No action by the provider will be tacit approval – they will start to receive VCC payments and can contact ChangeHealth at any time to change their payment method. Even if they get a VCC and do not want it, it can be voided by ChangeHealth and a paper check sent.

visit  
[TheCheckup.org](http://TheCheckup.org)



## Feeling lost providing resources for patients?

Try the new **Doctors for Change Guide** for local services and educational materials: <http://dfcguide.org>.

## Complete Your Cultural Competency Training Online

Providers have a requirement to show proof of a cultural competency training. Texas Children's Health Plan suggests the following preferred online training courses:

- The Office of Minority Health training course provides CME credit and meets the cultural training requirement, <https://cccm.thinkculturalhealth.hhs.gov/>
- A free online cultural competency module is offered with CME credit at [www.txhealthsteps.com](http://www.txhealthsteps.com)





# 340B Drug Pricing Program

## IMPORTANT

All eligible organizations and covered entities that are enrolled in the federal 340B Drug Pricing Program to purchase 340B discounted drugs **must use modifier U8 when submitting claims for 340B clinician-administered drugs.**

Non-compliance with this new requirement to use modifier U8 on all claims submitted for 340B clinician-administered drugs may jeopardize a covered entity's 340B status with the U.S. Department of Health and Human Services Health Resources and Services Administration (HRSA). Providers can refer to the HRSA website at [www.hrsa.gov/opa/index.html](http://www.hrsa.gov/opa/index.html) for more information about the 340B Drug Pricing Program.



## For further reading

You can go to our website and log-in to **Provider TouCHPoint** to learn more on topics like:

- Quality program goals, processes, and outcomes
- Referrals to case management
- Pharmaceutical management procedures
- Disease Management Programs
- Formulary
- How practitioners can access authorization criteria
- Limits/quotas
- Availability of staff to discuss authorization process
- Supporting an exception process
- Availability of TDD/TTY services
- Member rights and responsibilities
- Availability of language assistance for members
- Generic substitution, therapeutic interchange, and step therapy protocol
- Prohibiting financial incentives for utilization management decision makers
- Clinical practice guidelines and preventive health guidelines

## UPDATE DEMOGRAPHICS VERIFY YOUR INFORMATION

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All Texas Children's Health Plan providers are required to verify and update their demographic information on file. Please contact provider relations at **832-828-1008** to verify or update your information as needed.



## Join us at our next CME!

Thursday, July 21  
Beaumont, TX  
More information  
to come!