

# the checkup

by  
Texas  
Children's  
Health Plan  
Medical  
Directors

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## Diabetes Gift Card Available to Adult Texas Children's Health Plan Members

If you currently treat an adult Texas Children's Health Plan member (18 years or older) with diabetes, they can receive up to **three \$20 gift cards upon completion of each of the following:**

- Annual diabetic eye exam OR
- Biannual HbA1c blood test (every 6 months) OR
- Maintain an under 8 HbA1c blood result every 6 months



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**Specialists and Facilities**

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PO Box 301011  
Houston, Texas 77230

**Texas Children's  
Health Plan**



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## Be a HEDIS Hero

The National Committee for Quality Assurance (NCQA) is a non-profit organization that measures the quality of healthcare across large populations. NCQA does this through its Health Effectiveness and Data Set, also known as HEDIS. HEDIS measures are a set of evidence-based standards that Texas Children’s Health Plan is committed to improving upon in order to provide the best care for our members.

**Making changes across your patient population is easier than you think!** In fact, you can become a **HEDIS Hero** simply by ensuring that your patients are scheduled to see you for well-child visits at the most important stages of their development.

Below are the types of well-child/adolescent visits that have been studied to improve the health and wellness of the population that you serve. They each correspond to a different HEDIS measure that Texas Children’s Health Plan has identified for improvement. Become a **HEDIS Hero** today by ensuring that all of your patients meet the following:

1. **One documented well-child visit in the 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, AND 6<sup>th</sup> years of life for every patient.**
2. **One annual comprehensive well-child visit for each patient ages 12-21.**
3. **Counseling for nutrition and physical activity documented for all patients ages 3-17.**
4. **Six or more well-child visits for each patient documented in the first 15 months of life.**



## ADHD Provider Tool Kit

### Evaluation and diagnosis resources

The ADHD Provider Tool Kit is the online Texas Children’s Health Plan resource for a wide range of relevant material to assist clinicians in the diagnosis, treatment, and management of patients with ADHD and their families.

#### Evaluation and Diagnosis

To assist with diagnosis, current DSM-5 criteria are listed in the tool kit. Symptoms fall into two primary clusters: Inattention and Hyperactivity/Impulsivity. Specific symptoms are clearly delineated to identify the behaviors that characterize this diagnosis. As patients age, the presentation of ADHD may change and symptoms may vary in type and number. Helpful tips regarding age specific differences are listed to assist diagnosis in child versus adolescent patients. This section also has information on common co-occurring diagnoses, including other disruptive behaviors and learning disabilities.

Because there is normal variation in attentiveness, impulsivity, and attention span, rating scales can help identify which patients meet criteria for this diagnosis and help quantify symptom number and severity. To meet full diagnostic criteria, it is important to document that symptoms occur in more than one setting. The kit includes links to open source

ADHD rating scales with teacher and parent versions so specific symptom information can be obtained from both parties. These scales are not only useful in the assessment phase, but when repeated, are also helpful in monitoring ongoing treatment efficacy.

A step-by-step Algorithm for Evaluation and Diagnosis provides guidance for the elements and sequence of a comprehensive diagnosis. This includes suggestions for initial and follow-up visits; it also delineates the role of rating scales and when to consider further evaluation by a school-based psychologist or a Texas Children’s Health Plan behavioral health professional. Because patients with other diagnoses may present with increased activity level and inattentiveness, careful diagnosis can help ensure correct treatment plans are initiated.

#### How Do I Find It?

The tool kit is available online to participating providers through the Texas Children’s Health Plan Provider Portal. It is also available by contacting Texas Children’s Health Plan Provider Relations. We welcome provider feedback and comments on the tool kit.



## Managing allergic rhinitis

Although many medications for treating allergic rhinitis are available over the counter (OTC), always remember to write a prescription for these medications. This ensures that your patients can take advantage of their Medicaid and CHIP benefits to receive these prescriptions for as little as \$0!

Below are Texas Children's Health Plan medication recommendations for treating allergic rhinitis. [All recommendations below are available to Texas Children's Health Plan members without prior authorization.](#)

**Oral Antihistamines:** Oral cetirizine or loratadine (once daily) offers relief for itchy eyes/nose/throat and congestion. Both medications are available in liquid and tablet formulations. Cetirizine can be prescribed in patients as young as 6 months of age whereas loratadine is only approved in patients 2 years of age and older. Headache and drowsiness are the most common side effects. If side effects are a concern, try a different oral antihistamine.

**Intranasal Corticosteroid:** Intranasal fluticasone (1-2 sprays per nostril once daily) offers relief for

itchy eyes/nose/throat and congestion. Although administered nasally, intranasal fluticasone is absorbed systemically and should be used only as needed to avoid over exposure to corticosteroids. Remind caregivers not to share an intranasal device between family members. Review instructions for use (aim for outer nares) to avoid swallowing the medication upon administration. Patients who experience bloody nose due to intranasal fluticasone should avoid continued use.

**Ophthalmic Agents:** Ophthalmic cromolyn solution (1-2 drops four times daily) offers relief for itchy eyes. Instruct caregivers to clean hands before administering and to instill drops into lower eyelid (not directly on cornea).

**Oral Decongestant:** Oral pseudoephedrine (15-30 mg every 4-6 hours as needed) offers temporary relief of nasal congestion. Pseudoephedrine may only be prescribed in patients 4 years of age and older. Due to its stimulant-like effects, use pseudoephedrine with caution in patients with cardiovascular conditions. Advise last dose to be taken no later than 6 hours before desired bedtime to avoid sleep disruption.



## EVV Prospective Process: What is it?

Beginning 05/01/2018, Texas Children's Health Plan will activate the Prospective Process for the EVV system. This process will match claims to EVV transactions prior to the claim being paid. If a matching EVV transaction is not found, the claim will be denied. It is imperative that all providers ensure that all members have the correct payor ID set up in the EVV software. If a member does not have the appropriate payor ID set up, Texas Children's Health Plan will not receive EVV visits from Vesta or MedSys, which will result in a denial of the claim.

**Additionally, all EVV transactions will be matched with claims on the following attributes:**

- Medicaid ID
- NPI Number
- Date of Service
- The HCPCS code and modifiers

If any of the attributes above do not match between the claim and the EVV Transaction, the claim will be denied. It is the provider's duty to ensure that all information matches between the EVV Transaction and the submitted claim.

Due to EVV Transactions and claims being matched prospectively, providers will also need to ensure that all EVV Transactions are submitted before the claim. Since Vesta and MedSys only send EVV Transaction files daily, it may take up to 48 hours before the EVV Transaction is processed in our system. Submitting a claim prior to the EVV Transaction being received will result in a denial of the claim.

**Please visit the Provider Portal to stay up to date on the EVV process.**





# 5 steps to a successful authorization

### 1. Know what requires a prior authorization.

Go to [TexasChildrensHealthPlan.org](http://TexasChildrensHealthPlan.org) or [Navitus.com](http://Navitus.com) to check prior authorization requirements for Medical/Behavioral Health services before providing services or sending prescriptions to the pharmacy.

### 2. Become familiar with the authorization guidelines.

Guidelines are available upon request and on the Texas Children's Health Plan Provider TouCHPoint portal at [TexasChildrensHealthPlan.org/for-providers](http://TexasChildrensHealthPlan.org/for-providers).

### 3. Submit requests in advance of the scheduled service.

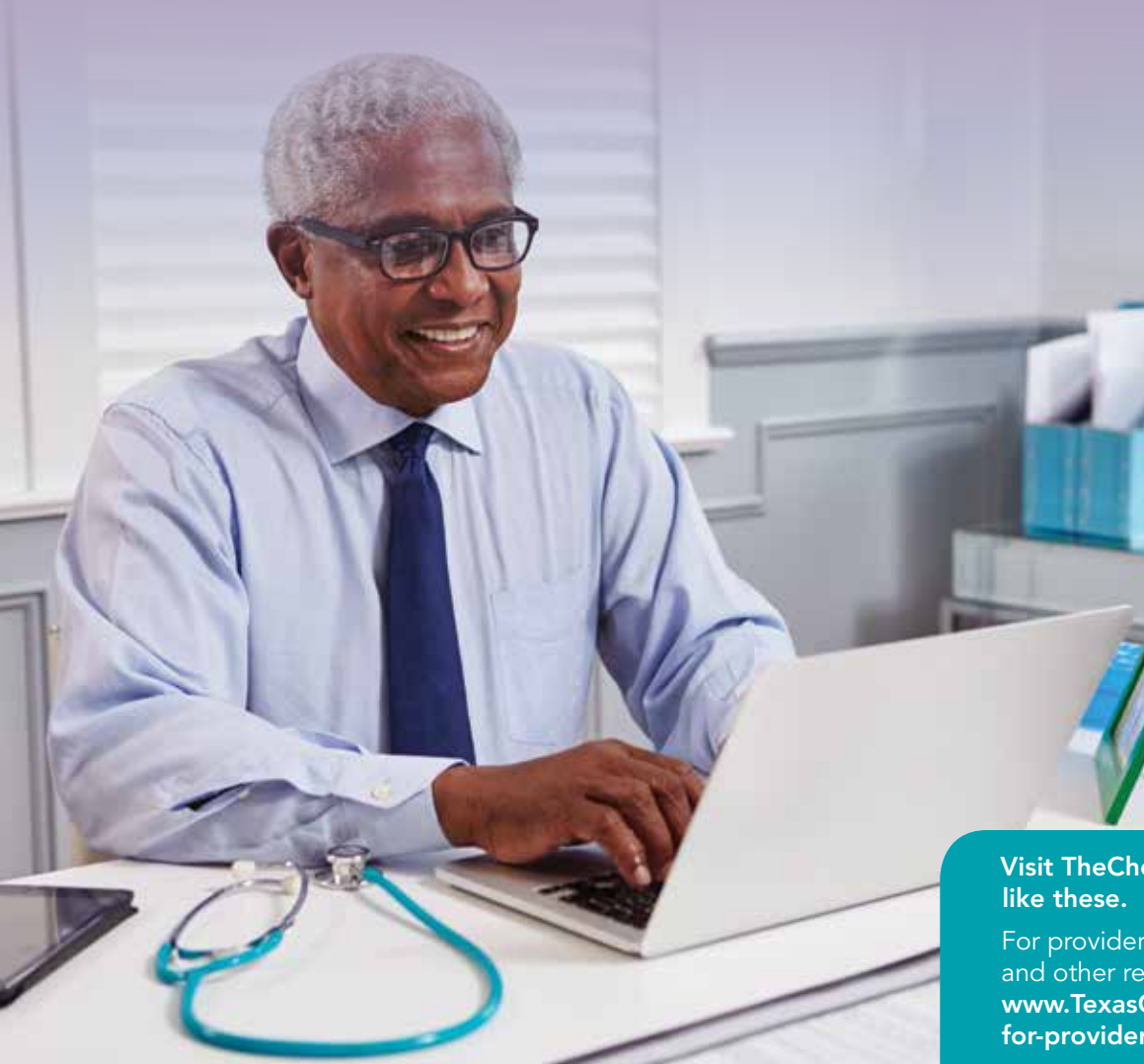
Authorizations for outpatient services can take 3 business days to process. Ensuring that submissions are done in advance will avoid potential claim denials.

### 4. Be comprehensive in clinical documentation.

Establish a protocol to consistently document data required for prior authorization in the medical record, which can help avoid delays in patient therapy, prevent potential follow-ups with patients for additional information, and minimize time spent on authorization.

### 5. Submit all required information.

Incomplete documentation can delay the authorization process. Know what documentation is required and submit it with the authorization request.



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Director, Marketing  
**Cristina Garcia Gamboa**

Editor  
**Kate Andropoulos**

Designer  
**Scott Redding**

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Houston, Texas 77230-1011  
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