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Specialists and Facilities:

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Smoke-free homes lead to better health outcomes and reduced ED admissions for patients with asthma. Texas Children's Health Plan provides free smoking cessation counseling and up to \$75 of nicotine replacement products for the parents and caregivers of members with asthma. As a provider, you can help your patients more by supporting smoking cessation for parents and caregivers. If your practice site is interested in learning how to enroll parents/ caregivers in this program, please contact the Texas Children's Health Plan's Care Coordination team at 832-828-1430.

Smoking cessation help available for parents and caregivers

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UPDATES: Prior authorization requirements

Please note the following key prior authorization requirement changes for providers.

Updates: Effective July 1, 2019

Psychological testing (procedure codes 96130, 96131, 96136, and 96137), **neurobehavioral testing** (procedure codes 96116 and 96121), and **neuropsychological testing** (procedure codes 96132, 96133, 96136, and 96137) are limited to four hours per member, per day and eight hours per member, per calendar year. Prior authorization will not be required when billed within these limits. Additional hours require prior authorization.

Botulinum toxin injections will only require authorization when billed outside of the guidance of the Texas Medicaid Provider Procedure Manual Clinician Administered Drugs Handbook. Effective November 7, 2019 – Texas Children's Health Plan will be updating the prior authorization listing.

New to the list:

Clinician Administered Drugs

C9045 - Injection, moxetumomab pasudotox-tdfk, 0.01 mg

C9049 - Injection, tagraxofusp-erzs, 10 mcg

C9050 - Injection, emapalumab-lzsg, I mg

Mobility Aids

E0639 - Patient lift, moveable from room to room with disassembly and reassembly, includes all components/accessories

E0640 - Patient lift, fixed system, includes all components/accessories

The new Texas Children's Health Plan prior authorization list will also be posted on **texaschildrenshealth.org/for-providers**. You can find it under the *Provider Resources* section.

If there are further questions, please contact the Provider Network Management Department at **I-800-73I-8527**.

What is the Medically Dependent Children's Program (MDCP) waiver?

If you have STAR Kids patients, there's a chance some of them receive the Medically Dependent Children's Program (MDCP) waiver, which is a home and community based services program. The goal of this program is to support families and children by preventing institutionalization and hospitalization, while helping them remain safely in their homes with the appropriate services. Examples of these services include:

- Flexible family support service
- Respite care
- Minor home modifications
- Adaptive aids
- Transition assistance services
- Employment assistance
- Supported employment
- Financial management services

The purpose of enrolling a child into the MDCP waiver is to improve quality of life while decreasing cost of care, improving his or her health and psychosocial outcomes, and provide the most effective and appropriate in-home and community services.

For basic qualification, the MDCP waiver does not take into account the caregiver's income, but it does

consider the child's income. To enroll in and receive services from this waiver, the caregiver has 2 options:

- Enroll and be placed on the state's interest list, or bypass the interest list –which can be at least a 10 year wait
- Undergo the Money Follows the Person (MFP) process, which requires the family to be responsible for paying for an overnight nursing facility stay and a physician recommendation for that stay to occur

The caregiver is responsible for contacting the state to begin the enrollment process for either the Interest List or MFP process. A Texas Children's Health Plan Service Coordinator will conduct the Screening and Assessment Instrument (SAI) for the child to gauge if he or she meets the medical necessity for the waiver. Texas Children's Health Plan then assumes the responsibility of managing the services provided via the MDCP waiver. The member must use at least one (1) service a month in order to remain active with the waiver.

If you think one of your STAR Kids patients may qualify for the MDCP waiver, educate the family about it today!

What does Service Coordination mean for your STAR Kids patients?



As a provider, you may have questions regarding the role Service Coordination plays in the lives of your STAR Kids patients. At Texas Children's Health Plan, the goal of Service Coordination is to optimize health to ensure that the member's tomorrow is better than his or her today. Service Coordination is a person-centered approach to care. Each of our members is assigned an appropriately licensed Service Coordinator. Our Service Coordinators are responsible for the following:

- Providing each member with initial and ongoing assistance identifying, selecting, obtaining, coordinating, and using Covered Services and other supports to enhance the member's well -being, independence, and integration in the community.
- Working with the member and the member's Legally Authorized Representative (LAR) and other caretakers in the design of an Individual Service Plan (ISP) with clear needs, goals, objectives, and interventions that are continually reviewed and enhanced during each touchpoint with the family.
- Helping remove barriers to preventative, well, and episodic care (i.e. transportation, education, psychosocial issues) as well as increase health literacy and reduce costs for the member.
- Intervening on behalf of the member if approved by the member/LAR and empowering the member/LAR to advocate for self, needs, and services in order to help the member remain in his or her community setting.

Appointment availability standards

What are appointment availability standards? How do you as a provider with Texas Children's Health Plan play a role?

In 2015 Senate Bill 760 passed, requiring Texas Health and Human Services Commission (HHSC) to monitor the provider networks of managed care organizations. Texas Children's Health Plan would like to ensure members are able to schedule appointments with providers in accordance with the HHSC's appointment accessibility guidelines.

Provider Type	Level / Type Of Care	Appointment Availability Standards
Specialty Care*	Emergency services	Immediately
	Urgent condition	Within 24 hours
	Specialty routine care	Within 21 days
Behavioral Health	Emergency services	Immediately
	Urgent condition	Within 24 hours
	Care for non-life threatening emergency - Behavioral Health	Within 6 hours
	Initial visit for routine care - Behavioral Health	10 days
	Follow-up routine care - Behavioral Health	90 days
	Initial outpatient behavioral health visit (This does not apply to CHIP Perinate members)	14 days

