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Medicaid

bulletin

BI-MONTHLY PUBLICATION FOR DC MEDICAID PROVIDERS

Latest News

National Lead Poisoning Prevention Week

In response to National Lead Poisoning Prevention Week, you play an important role in providing lead screening to children in your care. Remember, "Every Child, Twice by Two."

All children covered under Medicaid should receive 2 blood lead tests. District law requires all Medicaid-enrolled children receive a lead test at least twice: first between ages 6 and 14 months, and a second time between ages 22 and 26 months. In addition, if there is no documentation of previous lead screening, district and federal laws require that all Medicaid-eligible children between the ages of 36 and 72 months of age also receive a screening blood lead test. All other children 36-72 months require a test unless assessed as low lead risk. Lead level of reference: greater than or equal to 5 ug/dL.

NOTE: These requirements comply with federal law requiring that all children covered under Medicaid receive a screening blood lead test at 12 months and 24 months of age. Children between the ages of 36 months and 72 months of age must receive a screening blood lead test if they have not been previously screened for lead poisoning.

To read more about screening and reporting, please see the [2017 Medicaid and Department of Energy and Environmental Transmittal](#).



Well-Child Visit Billing Reference Guide

When conducting a well-child visit, you must perform all components required in a visit and all age-appropriate screenings and/or assessments as required in the DC Medicaid HealthCheck Periodicity Schedule. Covered screening services are medical, developmental/mental health, vision, hearing and dental. [Use this guide to bill for these visits.](#)

If you have any questions on EPSDT provider training requirements, please contact HealthCheck@dc.gov.

Healthy Students are Better Learners

To ensure that all District of Columbia (DC) students have the opportunity to be healthy and successful, District law requires all children to submit a [DC Universal Health Certificate \(UHC\)](#) and [Oral Health Assessment \(OHA\)](#) form each year as a part of school enrollment. These forms document an annual visit to the primary care provider and primary dental provider—to be valid for school reporting purposes. The UHC and OHA the primary sources of information used by schools to document a child's health status. [Click here](#) to see what steps you can take to ensure your patients are healthy and ready to learn for the next school year!

EPSDT Periodicity Schedule Updates

The 2017 Recommendations for Preventive Pediatric Health Care (Periodicity Schedule) have been approved by the American Academy of Pediatrics (AAP) and represents a consensus of AAP and the Bright Futures Periodicity Schedule Workgroup. The recommendations include various additions/changes to screenings conducted during a well child visit. DHCF has updated the EPSDT periodicity schedule to align with recently revised recommendations from the American Academy of Pediatrics and Bright Futures. [Click here](#) to learn more. Please make sure to download the newest version of the [EPSDT Periodicity schedule](#)!

Pediatricians and EPSDT Providers—Have You Completed Your HealthCheck Training?

All Primary Care Providers serving Medicaid beneficiaries under the age of 21 are required to complete HealthCheck training every two years. The web-based training can be accessed at www.dchealthcheck.net and provides five (5) free CME credits. Visit www.dchealthcheck.net today to complete your HealthCheck training requirement and to browse the available provider resources.

HealthCHECK ✓
Training & Resource Center
Materials on Medicaid's EPSDT benefit for DC providers & families
District of Columbia Department of Health Care Finance (DHCF) & Bright Futures at Georgetown University

Home | Provider Trainings | Resources for: Providers | Government Agencies | Families | School Health | Search | Logout

Your gateway for materials to promote a high standard of care for DC's children...

HealthCheck Trainings
Receive CME credit to review how to provide and document all HealthCheck services for children covered by Medicaid's EPSDT benefit...

Learn More | Trainings | ORAL HEALTH: Fluoride Varnish | MENTAL HEALTH | For Agencies | Family Corner | School Health

This website provides access to resources and trainings for providers in DC who see children covered under Medicaid:

- HealthCheck Training:** Please note that the HealthCheck training will fulfill your obligations for all Medicaid Managed Care Organizations (MCOs) with which you are paneled.* You will receive 5 CME's upon completion of the curriculum.**
- Fluoride Varnish Training:** This training will fulfill your obligations to provide and bill for fluoride varnish application in the District.
- DC Children's Health, Wellness, and Education Calendar:** The Health and Well-Being Subcommittee of the State Early Childhood Development Coordinating Council has developed this online calendar of events that includes health/wellness/educational items

Important Reminders!!!!

Anesthesiologist Assistant Services for Medicaid-Reimbursable Claiming

Under the District of Columbia State Plan for Medical Assistance (State Plan), anesthesiologist assistants are not authorized as Medicaid providers in their own right; and therefore are ineligible to claim Medicaid reimbursement for medical services. However, services provided by anesthesiologist assistants may be billed to Medicaid using the NPI of the supervising anesthesiologist. Additionally, the beneficiary's medical records must indicate that services were provided by an anesthesiologist assistant and were subsequently approved by the supervising anesthesiologist.

Relevant modifiers to report anesthesia services are as follows:

QK	Medical direction of two, three or four concurrent anesthesia procedures involving qualified individuals	This modifier is used on physician claims to indicate that the physician provided medical direction of two to four concurrent anesthesia services. Physician payment is reduced to 50 percent of the fee schedule amount.
QX	CRNA (certified registered nurse anesthetist) service: with medical direction by a physician	This modifier is appended to CRNA or anesthetist assistant (AA) claims. This informs a payer that a CRNA or AA provided the service with direction by an anesthesiologist. Payment is usually reduced by 50 percent.

Important Numbers & Addresses

Conduent Provider Inquiry PO Box 34734 Washington, DC 20043-4734	(202) 906-8319 (inside DC metro area) (866) 752-9233 (outside DC metro area) (202) 906-8399 (Fax)	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
MAXIMUS Provider Enrollment 1111 14 th St. NW, Ste. 720 Washington, DC 20005	844-218-9700 (toll-free) www.dcpdms.com	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
Magellan Pharmacy Benefits Management	Technical Assistance: (800) 272-9679 Clinical Assistance: (800) 273-4962 http://www.dc-pbm.com	Hours of Operation 24/7/365
Conduent EDI Gateway Services	(866) 407-2005 http://www.acs-gcro.com	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
Transportation Broker Medical Transportation Management (MTM)	(888) 561-8747 (866) 796-0601 (to schedule appointment) http://www.mtm-inc.net/index.asp	
Dental Help Line	(866) 758-6807	
Medicaid Fraud Hotline	(877) 632-2873	
Health Care Ombudsman	(877) 685-6391	
Conduent Provider Field Services	dc.providerreps@conduent.com	

Claims Department	
UB04 Claim Forms	PO Box 34693 Washington, DC 20043-4693
CMS1500 Claim Forms	PO Box 34768 Washington, DC 20043-4768
ADA and Pharmacy Claim Forms	PO Box 34714 Washington, DC 20043-4714
Adjustment/Void Forms	PO Box 34706 Washington, DC 20043-4706
Medicare Crossover Claim Forms	PO Box 34770 Washington, DC 20043-4770
278 Prior Authorization Transaction Attachments	PO Box 34756 Washington, DC 20043-4756
837 Claim Transaction Attachments	PO Box 34631 Washington, DC 20043-4631
Claim Appeals	PO Box 34734 Washington, DC 20043-4761



Department of Health Care Finance
441 4th Street, NW Suite 1000S
Washington, DC 20001
Phone: 202-442-5988
Fax: 202-442-4790
www.dhcf.dc.gov