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## **Banner Messages for the 02-06-12 and 02-10-12 R&S Reports**

This file contains abbreviated messages meant to provide timely notifications that affect all provider groups (physicians, dentists, and so forth). Additional current and historic information affecting the Medicaid, Medicaid Managed Care, and Children with Special Health Care Needs (CSHCN) Services Program provider community may be found in the earlier postings of these files in the TMHP banner library at [www.tmhp.com](http://www.tmhp.com) as well as in the bi-monthly editions of the *Texas Medicaid Bulletin* and the quarterly *CSHCN Services Program Provider Bulletin*, which update the *Texas Medicaid Provider Procedures Manual* and *CSHCN Services Program Provider Manual*, respectively.

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## **Total Messages (37)**

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### **1 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to an article titled "Valid NDC Codes Added Retroactively," which was published on the TMHP website on June 8, 2011.

National Drug Code (NDC) 07035-7471-11 was incorrectly included in the codes table in this article. NDC 07035-7471-11 is not a valid NDC number.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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### **2 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to the 2011 Texas Medicaid Provider Procedures Manual, Hospital Services Handbook, subsection 2.6.6, "Provider Cost and Reporting." The phone number for the TMHP Medicaid Audit department listed in this section is incorrect. The correct phone number for the TMHP Medicaid Audit department is (512)-506-6117.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**3 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to an article titled, "Benefit Updates for Some Texas Medicaid Radiology Diagnostic Imaging Procedure Codes Effective August 2011," which was published on this website on June 17, 2011, and also appeared in the September/October 2011 Texas Medicaid Bulletin, No. 237. The article indicated that fluoroscopy procedure codes 75956, 75957, 75958, and 75959 would be a benefit for clients of all ages effective August 1, 2011.

However this benefit change did not take effect on August 1, 2011. The benefit change was effective on January 1, 2012.

Providers may refer to the article titled, "Benefit Criteria to Change for Some Radiology Diagnostic Imaging Services," which was published on December 8, 2011, for the complete benefit information for these services.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**4 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to an article titled "Clarification: Billing for Psychological and Neuropsychological Testing Services," which was published on October 28, 2011, on the TMHP website.

The article incorrectly indicated that the number of units on the claim must reflect the time spent during face-to-face testing of the client and that time spent while scoring and interpreting the results must not be repeated separately on the claim even if scoring and interpretation are completed on a different date from the testing.

The correct information is that the claim must reflect the time spent during face-to-face testing of the client plus the time spent while scoring and interpreting the results. The units on the claim represent one hour each.

If the performance, interpretation, and reporting of the testing span more than one day, the date of service on the claim must reflect the date and the time spent for each service performed. Providers must submit only one claim for each psychological or neuropsychological testing performed even if the scoring and interpretation cannot be completed on the same date as the testing. A claim must not be submitted until testing is complete. Providers can submit one claim with multiple details on separate claims for each date of service.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**5 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a follow-up to an article titled "Coming Soon: TexMedConnect and EDI to Accept Most Claim Submissions for Routing to Health and Dental Plans," which was published on this website on December 1, 2011.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com)..[[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**6 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Medicaid providers who have contracted with STAR and STAR+PLUS Medicaid managed care organizations (MCOs) or children's Medicaid dental services organizations for the Medicaid managed care

expansion effective March 1, 2012, must have their current provider information on the Online Provider Lookup (OPL) portion of the TMHP website at [www.tmhp.com](http://www.tmhp.com). The information on the OPL must match the information that was provided to the MCOs when the provider was completing the contracting and credentialing process for inclusion in the MCO provider network. Providers must have a Texas Provider Identifier (TPI) number for each location that will be listed in the MCO provider directories. Providers can update their information by going to the TMHP provider page at [www.tmhp.com](http://www.tmhp.com) and logging into their provider account.

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**7 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

As a result of the rate hearing on January 18, 2012, reimbursement rates for some therapy services will change. Effective for dates of services on or after March 1, 2012, the reimbursement rates for some independent therapy, home health agency therapy, comprehensive outpatient rehabilitation facility, and outpatient rehabilitation facility therapy services procedure codes will change for Texas Medicaid.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**8 (02/10/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

A town hall meeting is scheduled for February 10, 2012, in Harlingen to provide information about the STAR and STAR+PLUS Medicaid managed care expansion, which is effective March 1, 2012.

Representatives from HHSC and Medicaid managed care organizations (MCOs) will be in attendance to answer providers' questions. All acute care providers are invited to attend. Pre-registration is not required.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

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**9 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Reminder: Physicians must verify medical necessity before they sign a certification form or statement that is presented by durable medical equipment (DME) suppliers or home health agencies. Physicians must complete Section B of the Home Health Services (Title XIX) Durable Medical Equipment (DME)/Medical Supplies Physician Order Form, which documents medical necessity of the requested items. Completion of forms, such as those for claims and prior authorization, is considered an administrative cost and is not eligible for reimbursement by Texas Medicaid.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**10 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Reminder: Blood pressure devices may require prior authorization depending on grade and diagnosis.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**11 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective for dates of service on or after February 1, 2012, additional places of service will be valid for clinician-directed care coordination services.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**12 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to an article titled "Reminder: TPIs Without Claims or Encounter Activity for at Least 24 Months Are Deactivated," which was published on the TMHP website on December 16, 2011.

The article incorrectly stated that providers who submit claims to the North Star Health Maintenance Organization (HMO) program may contact TMHP to file an exemption to the 24-month inactivity requirement to prevent deactivation of Texas Provider Identifiers (TPIs) since these providers do not file claims directly with TMHP.

The correct information is that all managed care organizations (MCOs) are required to submit encounter claim data to TMHP.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [\[link\]](#)

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**13 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims for some outpatient radiological services that were submitted on or after January 5, 2012. Prior authorizations for outpatient radiology that were granted by MedSolutions on or after January 5, 2012, may not have been transmitted to TMHP causing claims to be incorrectly denied.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**14 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

The Texas Health and Human Services Commission under directive from the 2012-13 General Appropriations Act (Article II, Health and Human Services Commission, Rider 46, H.B. 1, 82nd Legislature, Regular Session, 2011), is conducting a survey to collect information from providers who received funds related to the Disproportionate Share Hospital and Upper Payment Limit programs during federal fiscal year (FFY) 2011. The survey responses should be based on the funds received during FFY 2011.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

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**15 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

The Centers for Medicare & Medicaid (CMS) has extended the Medicaid Women's Health Program (WHP) through March 31, 2012. Providers that are certified to participate in WHP as of January 1, 2012, can continue to submit claims for services provided through the program.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**16 (01/27/12 through 02/17/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective January 6, 2012, additional National Drug Codes (NDCs) will be added retroactively as valid to submit with Texas Medicaid claims for medical services procedure codes J1626, J9045, J9178, J9265, J9217, and J0640.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**17 (01/27/12 through 02/17/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is an update to "Some Procedure Codes No Longer a Benefit Effective October 1, 2011," which was published on the TMHP website on August 30, 2011. Effective October 1, 2011, the surgical component of procedure codes 55200, 55400, and S2117 was inactivated in the TMHP claims processing system. Effective January 17, 2012, for dates of service on or after October 1, 2011, the remaining components for these procedure codes will be inactivated.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**18 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted by hospitals for outpatient clients for clinical laboratory services procedure code 81007. Affected claims that were processed from April 1, 2010, through December 13, 2011, were reimbursed using an incorrect methodology. These claims were reimbursed at a percentage of the billed amount, but for outpatient claims, procedure code 81007 should be reimbursed at a fixed rate equivalent to the maximum fee for physician providers.

When these claims are reprocessed, providers who were underpaid may receive additional payment, and providers who were overpaid may have the overpayments deducted from future payments (i.e., recouped). Adjustments will be reflected on Remittance and Status Reports.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**19 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to an article titled "Upcoming Reimbursement Rate Adjustments for Some Texas Medicaid Procedure Codes," which was published on November 22, 2011, on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

The article incorrectly stated that the rate adjustments were effective for dates of service on or after January 1, 2011. The correct effective date is January 1, 2012.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**20 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective for dates of service on or after March 1, 2012, benefit criteria will change for botulinum toxin types A and B for Texas Medicaid.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [[link](#)]

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**21 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective for dates of service on or after March 1, 2012, the abatacept benefit will change for Texas Medicaid. Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).  
For more information, call the TMHP Contact Center at 1-800-925-9126.

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**22 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a correction to the 2011 Texas Medicaid Provider Procedures Manual, Behavioral Health, Rehabilitation, and Case Management Services Handbook, subsection 5.2, "[Licensed Clinical Social Worker (LCSW), Licensed Marriage and Family Therapist (LMFT), and Licensed Professional Counselor (LPC)] Services, Benefits, Limitations, and Prior Authorization."

This subsection states that "family psychotherapy and counseling [procedure code 90847] is reimbursed for only one Medicaid-eligible client per session, regardless of the number of family members who are present during that session."

However, the subsection should also have stated that procedure code 90847 is limited to only one outpatient service per family per day.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**23 (01/20/12 through 02/10/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective for dates of services on or after March 1, 2012, some computed tomography and magnetic resonance imaging benefits will change for Texas Medicaid.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**24 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

On January 29, 2012, the first quarter 2012 National Correct Coding Initiative (NCCI) updates were implemented for dates of service on or after January 1, 2012, for Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

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**25 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

This is an update to the January 2012 HCPCS Special Bulletin, No. 4.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

For more information, call the TMHP Contact Center at 1-800-925-9126 or the CSHCN Services Program Contact Center at 1-800-568-2413.

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**26 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of service on or after February 1, 2012, the surgical component for procedure code 21248 will be a benefit in the office setting when services are performed by a doctor of dentistry practicing as a limited physician.

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

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**27 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid Hospital Providers\*\*\*\*\***

Texas Medicaid uses the Medicare Severity-Diagnosis Related Group (MS-DRG) structure as the basis for calculating inpatient hospital prospective payments.

Effective September 1, 2012, Texas Medicaid will transition to the All Patient Refined-Diagnosis Related Group (APR-DRG) structure as the basis for calculating inpatient hospital prospective payments.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**28 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Medicaid LCSW, LMFT, and LPC Providers\*\*\*\*\***

This is an update to "Correction Concerning Family Counseling and Psychotherapy Procedure Code 90847," which was published on the TMHP website at [www.tmhp.com](http://www.tmhp.com) on January 13, 2012. The article stated that procedure code 90847 is limited to only one outpatient service per family per day.

The update is that this limitation will be effective for licensed clinical social worker (LCSW), licensed marriage and family therapist (LMFT), and licensed professional counselor (LPC) providers for dates of service on or after March 1, 2012.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**29 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All Inpatient Hospital Providers\*\*\*\*\***

This is a correction to the article titled "Eight-Percent Rate Reduction to Be Eliminated for Inpatient Hospital Services to Most Medicaid Clients Effective March 1, 2012," which was published on January 25, 2012, on the TMHP website at [www.tmhp.com](http://www.tmhp.com). The correct information is as follows:

As a result of the expansion of Medicaid Managed Care, beginning March 1, 2012, The Texas Health and Human Services Commission (HHSC) will no longer apply an eight-percent rate reduction to the inpatient hospital services that are rendered to Medicaid clients who are Supplemental Security Income (SSI) or SSI-related clients. This change will affect hospital providers within the Bexar, Dallas, El Paso, Lubbock, Tarrant, Nueces, Harris, and Travis service areas that are reimbursed by diagnosis-related group.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**30 (02/03/12 through 02/24/12) \*\*\*\*\*Attention All Medicaid Inpatient Hospital Providers\*\*\*\*\***

As a result of the expansion of Medicaid Managed Care, beginning March 1, 2012, HHSC will no longer apply an eight-percent rate reduction to the inpatient hospital services that are rendered to Medicaid clients who are not Medicare Supplemental Security Income (SSI) or SSI-related clients. This change will affect

hospital providers within the Bexar, Dallas, El Paso, Lubbock, Tarrant, Nueces, Harris, and Travis service areas that are reimbursed by diagnosis-related group.

For more information, call the TMHP Contact Center at 1-800-925-9126.

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**31 (01/27/12 through 02/17/12) \*\*\*\*\*Attention All Providers\*\*\*\*\***

TMHP will perform scheduled maintenance to the Claims Engine and Long Term Care (LTC) systems on Sunday, March 11, 2012, from 4:00 p.m. until midnight Central Time. During the system maintenance window, some applications will be unavailable for both Acute Care and LTC systems. Batch claims and batch claims status inquiries (CSIs) may be submitted during the maintenance period.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [\[link\]](#)

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**32 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

This is a correction and update to the 2012 Children with Special Health Care Needs (CSHCN) Service Program Provider Manual, section 34.2, "[Respiratory Equipment and Supplies] Benefits, Limitations, and Authorization Requirements."

The manual incorrectly states that ventilators may be purchased or rented. The correct information is that ventilators may only be rented.

Also, effective for dates of service on or after February 1, 2012, procedure codes E0450 and E0460 are no longer limited to 4 rentals per lifetime.

For more information, call the TMHP-CSHCN Contact Center at 1-800-568-2413.

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**33 (02/10/12 through 03/02/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

The February 2012 version of the Children with Special Health Care Needs (CSHCN) Services Program Provider Manual is now available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

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**34 (02/03/12 through 02/24 /12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of services on or after March 1, 2012, the reimbursement rates for some medical, surgery, radiology [professional component], auditory system surgery, and male genital system surgery services procedure codes will change for the Children with Special Health Care Needs (CSHCN) Services Program.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [\[link\]](#)

For more information, call the TMHP-CSHCN Services Program Contact Center at 1 800-568-2413.

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**35 (01/27/12 through 02/17/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Benefit criteria changed in 2010 for some surgical and laboratory services that are benefits of the Children with Special Health Care Needs (CSHCN) Services Program. Affected procedure codes include 48999, 49061, 49062, and 93278.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com). [\[link\]](#)

For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

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**36 (01/27/12 through 02/17/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective January 17, 2012, for dates of service on or after January 1, 2012, the ambulatory surgical center component of procedure code S2117 is not a benefit of the Children with Special Health Care Needs (CSHCN) Services Program and will no longer be reimbursed.

For more information, call the TMHP-CSHCN Services Program Contact Center at 1 800-568-2413.

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**37 (1/20/12 through 02/10/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Reminder: Claims for Children with Special Health Care Needs (CSHCN) Services Program clients who have other health insurance must be submitted to TMHP on paper with proof that the claim was submitted to the other insurance carrier before the claim was submitted to the CSHCN Services Program.

Details are available on the TMHP website at [www.tmhp.com](http://www.tmhp.com).[\[link\]](#)

For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.