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## **Banner Messages for the 02-27-12 and 03-02-12 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 (42)**

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### **1 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted with procedure code 36460 for clients who were 21 years of age and older. Claims with dates of service from April 1, 2010, through February 16, 2012, may have been denied in error by Texas Medicaid.

When these claims are reprocessed, providers may receive additional payment, which 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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### **2 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted with procedure codes J9178, J9217, J9263, or J9201 in combination with specific National Drug Code numbers (values). These claims may have been denied in error by Texas Medicaid and will be reprocessed.

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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**3 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is an update to the article titled "Changes to Medicare Crossover Claims Processing and Reimbursement Effective January 1, 2012," which was published on December 1, 2011, on the TMHP website at [www.tmhp.com](http://www.tmhp.com).

The TMHP Standardized Medicare and Medicare Advantage Plan (MAP) Remittance Advice Notice Form Instructions have been revised for claim types 30, 31, and 50. The instructions have been updated to specify the additional documentation that is required when providers submit a TMHP Standardized Medicare and Medicare Advantage Plan (MAP) Remittance Advice Notice Form.

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

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**4 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Effective for dates of service on or after March 1, 2012, liquid formulations of vitamin and mineral products may be considered for quantities that exceed the 30-day supply to allow for variance in container sizes.

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

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**5 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

This is a clarification to the article titled "Benefit Changes for Texas Health Steps Preventive Medical Checkups Effective December 1, 2011," which was published on October 28, 2011, on the TMHP website at [www.tmhp.com](http://www.tmhp.com). The article stated that a newborn examination is considered a Texas Health Steps newborn checkup when a claim is submitted for procedure codes 99460, 99461, or 99463. These procedure codes should not be billed with modifier 52, which indicates a brief newborn examination that does not fulfill periodic checkup criteria.

This benefit change also applies to the newborn services information in the 2011 Texas Medicaid Provider Procedures Manual, Medical and Nursing Specialists, Physicians, and Physician Assistants Handbook, subsection 8.2.43.4, "Hospital Visits and Routine Care."

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

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**6 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

Reminder: Providers must always inform clients of their liability for services that are not covered by Texas Medicaid.

Texas Medicaid reimburses only services that are medically necessary or benefits of special preventive and screening programs. Medicaid providers may bill the client only if a specific service or item that is not covered or not included as part of or bundled in another service, is provided at the client's request and the provider has obtained and kept a written Client Acknowledgment Statement signed by the client.

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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**7 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

The Department of State Health Services (DSHS) has prepared a new tutorial and video to inform providers of the services that are available through the Case Management for Children and Pregnant Women program.

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

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**8 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All Medicaid Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted with procedure code 90472 for dates of service from October 1, 2010, through June 30, 2011. These claims may have been incorrectly denied by Texas Medicaid and will be reprocessed.

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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**9 (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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**10 (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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**11 (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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**12 (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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**13 (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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**14 (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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**15 (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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**16 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted with multiple therapy modalities on the same date of service from October 1, 2010, through February 26, 2012. Affected claims include physical therapy procedure codes submitted with modifier GP, occupational therapy procedure codes submitted with modifier GO, and speech therapy procedure codes submitted with modifier GN.

Claims with multiple therapy modalities may have been denied incorrectly by National Correct Coding Initiative guidelines, which do not take modifiers into consideration.

When these claims are reprocessed, providers may receive additional payment, which will be reflected on Remittance and Status Reports. No action on the part of the provider is necessary.

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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**17 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

This is a correction to the January 2012 HCPCS Special Bulletin, No. 4. The 2012 HCPCS Procedure Code Additions table incorrectly includes the assistant surgery component of procedure code 36254 as a new benefit effective January 1, 2012, that requires a rate hearing.

The correct information is that the assistant surgery component of procedure code 36254 will not be made a benefit. However, the surgical component of procedure code 36254 was made a benefit effective for dates of service on or after January 1, 2012, and requires a rate hearing.

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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**18 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

TMHP has identified an issue that impacts claims that were submitted for drug screening procedure code 80101 with modifier QW by providers with a Clinical Laboratory Improvement Amendments (CLIA) certification type 2 or 4. Claims for dates of service from October 1, 2010, through February 14, 2012, may have been incorrectly denied payment by Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program. When these claims are reprocessed, providers may receive additional payment, which will be reflected on Remittance and Status Reports.

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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**19 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

This is an update to an article titled "Issue Identified for Clinical Laboratory Procedure Codes," which was published on August 24, 2011, on the TMHP website. The issue described in the article has been resolved.

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 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.

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**20 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

The Children with Special Health Care Needs (CSHCN) Services Program is not impacted by the statewide expansion of Medicaid managed care, which will go into effect March 1, 2012. CSHCN Services Program clients who are not eligible for Medicaid are not required to enroll in a managed care organization (MCO) in order to receive CSHCN Services Program benefits. However, clients who are dual eligible for Medicaid benefits may be required to enroll in a Medicaid MCO to receive Medicaid services.

More information about Medicaid Managed Care changes that may impact Medicaid-eligible CSHCN Services Program clients is available on the Texas Health and Human Services (HHSC) website at [www.hhsc.state.tx.us/medicaid/MMC.shtml](http://www.hhsc.state.tx.us/medicaid/MMC.shtml) and on the Medicaid Managed Care web page of the TMHP website at [www.tmhp.com/Pages/Medicaid/Medicaid\\_Managed\\_Care.aspx](http://www.tmhp.com/Pages/Medicaid/Medicaid_Managed_Care.aspx).

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**21 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

On December 16, 2011, Provider Enrollment on the Portal (PEP), the paper Texas Medicaid Provider Enrollment Application (Revision XIX), and the paper Children with Special Health Care Needs (CSHCN) Services Program Provider Enrollment Application (Revision XVI) were updated.

Previous Texas Medicaid Provider Enrollment Application (Revisions XVII, XVIII) and CSHCN Services Program Provider Enrollment Application (Revision XV) paper versions may be used, but must be received by TMHP no later than March 31, 2012.

Effective April 1, 2012, the previous versions of the paper enrollment applications will no longer be accepted, and Revision XIX of the Texas Medicaid Provider Enrollment Application and Revision XVI of the Children with Special Health Care Needs (CSHCN) Services Program Provider Enrollment Application must be used.

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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**22 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

Effective January 27, 2012, for dates of service on or after January 1, 2011, injection procedure code J3095 is a benefit of Texas Medicaid and the Children with Special Health Care Needs (CSHCN) Services Program when rendered by a hospital provider in the outpatient hospital setting.

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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**23 (02/17/12 through 03/09/12) \*\*\*\*\* Attention All Medicaid and CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of service on or after February 1, 2012, the interpretation component for cytopathology procedure code 88112 is a benefit of Texas Medicaid when services are rendered by a County Indigent Health Care Program or physician provider in the outpatient hospital setting.

This service is also a benefit of the Children with Special Health Care Needs (CSHCN) Services Program when rendered by physician providers in the outpatient hospital setting.

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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**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).[\[link\]](#)

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 (03/02/12 through 03/23/12) \*\*\*\*\* Attention All Medicaid Dental Providers\*\*\*\*\***

Effective for dates of service on or after March 1, 2012, the THSteps orthodontic dental services benefit 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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**26 (02/24/12 through 03/16/12) \*\*\*\*\* Attention All Medicaid Hospital Providers\*\*\*\*\***

The "Potentially Preventable Readmissions in the Texas Medicaid Population, Fiscal Year 2010" report is now available on the Texas Health and Human Services Commissions (HHSC) website.

Providers can access the report at [www.hhsc.state.tx.us/reports/2012/potentially-preventable-readmissions.pdf](http://www.hhsc.state.tx.us/reports/2012/potentially-preventable-readmissions.pdf).

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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 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All Medicaid Managed Care Providers\*\*\*\*\***

A Frequently Asked Questions (FAQ) document is now available for Medicaid managed care claims that can be filed through TMHP TexMedConnect and electronic data interchange (EDI) beginning March 1, 2012. Providers may refer to the PCCM and EDI web pages on the TMHP website at [www.tmhp.com](http://www.tmhp.com) for more information.

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

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**30 (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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**31 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Providers\*\*\*\*\***

The TMHP Contact Center and the TMHP-CSHCN Services Program Contact Center have compiled a list of suggestions to help providers get quicker, better results when calling one of the contact centers.

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

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**32 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Providers\*\*\*\*\***

Reminder: Providers that call TMHP Contact Center provider telephone numbers are given the opportunity to respond to a short customer satisfaction survey after the call is completed. Providers are encouraged to participate in the survey following each call to TMHP. The information gathered through

this survey helps TMHP to serve providers better by confirming services that are working well, identifying services that could be improved, and suggesting additional resources that could serve the needs of state health-care providers.

The survey consists of approximately five questions, which providers can answer using the buttons of the telephone. Survey responses are anonymous.

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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**33 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All Providers\*\*\*\*\***

On April 1, 2012, TMHP will implement first quarter 2012 Healthcare Common Procedure Coding System (HCPCS) additions, changes, and deletions that will be effective for dates of service on or after April 1, 2012. Deleted procedure codes will no longer be benefits of Texas Medicaid, Medicaid managed care, or the Children with Special Health Care Needs (CSHCN) Services Program.

Details of these changes will be available on the Code Updates-HCPCS web page beginning April 1, 2012.

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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**34 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All Family Planning Providers\*\*\*\*\***

Effective for dates of service on or after January 15, 2012, benefit criteria for family planning services for Department of Health Services have changed.

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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**35 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All THSteps Medical Providers\*\*\*\*\***

TMHP has identified an issue that affects claims that were submitted with Texas Health Steps medical checkups (procedure codes 99211, 99381, 99382, 99383, 99384, 99385, 99391, 99392, 99393, 99394, or 99395) and procedure codes 83655 or 86580. On claims with dates of service from December 1, 2011, through December 21, 2011, procedure codes 83655 and 86580 may have been incorrectly denied payment by Texas Medicaid.

When these claims are reprocessed, providers may receive additional payment, which will be reflected on Remittance and Status Reports. No action on the part of the provider is required.

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

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**36 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of service on or after March 1, 2012, the botulinum toxin type B benefit will change for the Children with Special Health Care Needs (CSHCN) Services Program. Procedure code J0587 will be limited to 100 billing units per day, any provider. One billing unit represents 100 units of medication. Currently, this medication is limited to 150 billing units per day, any provider.

For dates of service on or after March 1, 2012, any claim that is submitted in excess of 100 billing units per day will be cut back or denied.

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

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**37 (03/02/12 through 03/23/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of service on or after April 1, 2012, provider types and places of service for cytopathology procedure codes 88104, 88106, 88108, and 88112 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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**38 (02/24/12 through 03/16/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

The Children with Special Health Care Needs (CSHCN) Services Program has reviewed the CSHCN Services Program Rules as mandated by Texas Government Code §2001.039 and is now soliciting stakeholder input on the proposed draft rules.

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

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**39 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective for dates of service on or after April 1, 2012, additional places of service will be valid for clinician-directed care coordination services 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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**40 (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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**41 (02/17/12 through 03/09/12) \*\*\*\*\*Attention All CSHCN Services Program Providers\*\*\*\*\***

Effective March 26, 2012, medical foods providers that enroll in the Children with Special Health Care Needs (CSHCN) Services Program must select taxonomy code 335G00000X during the enrollment process.

Taxonomy code 335G00000X indicates that the provider is a medical foods supplier. Applications that are submitted without this taxonomy code will be returned to the provider as deficient.

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

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**42 (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.