



Louisiana Department of Health and Hospitals BAYOU HEALTH Informational Bulletin 12-9 February 16, 2012

Issue: How BAYOU HEALTH Will Affect EPSDT and General Claim Submission

The “KIDMED” **program name** for EPSDT Screening for Medicaid recipients and the **administration of that function through the traditional Medicaid Program** are being discontinued effective May 31, 2012.

The five BAYOU HEALTH Plans are responsible for the administration of EPSDT Screening for their members under age 21. While the periodicity schedule will not change, certain policies and procedures will change and may differ depending on the Health Plan.

Effective immediately, Louisiana Medicaid will no longer enroll Provider Type 66-KIDMED Screening Clinics, and effective May 31, 2012 all providers who are enrolled under this provider type will be closed. KIDMED claims will deny for provider type 66 as BAYOU HEALTH rolls out to each DHH Geographical Service Area:

1/31/2012 for recipients residing in Administrative Regions 1 and 9

3/31/2012 for recipients residing in Administrative Regions 2, 3, or 4

5/31/2012 for recipients residing in Administrative Regions 5, 6, 7, or 8

Stakeholders are encouraged to--

- 1. Refer to the BAYOU HEALTH Plan’s website for Providers and Provider Handbook information regarding EPSDT Screening policies and procedures; and**
- 2. Contact the Health Plan’s Provider Services to discuss possible inclusion in their provider network or for EPSDT Screening questions that are not addressed in the Provider Handbook.**

All claims for BAYOU HEALTH members must be submitted to the Health Plan in which the patient is enrolled on the date of service. However, final claims processing will be managed differently depending on the BAYOU HEALTH Plan model the recipient is enrolled in. There are two types of BAYOU HEALTH Plans; Prepaid and Shared Savings Models.

Prepaid BAYOU HEALTH Plans are Louisiana Healthcare Connections (LHC), LaCare, and Amerigroup.

- They will provide all editing and processing related to their member’s claims.

- They can have different billing requirements than traditional Medicaid, specific to their claims processing systems; therefore you must adhere to their billing instructions.
- Prepaid Plans may contract with both Medicaid and non-Medicaid enrolled providers (RN's for example) to deliver Medicaid services.

Shared Savings BAYOU HEALTH Plans are UnitedHealthcare and Community Health Solutions (CHS).

- *These plans will manage the EPSDT services and coordinate the specialty services for their members.*
- **All claims must be submitted to them for preprocessing and the Health Plan will send clean claims to Molina for payment within two business days.**
- To be reimbursed for services provided to members of a Shared Savings Plan, the provider must be enrolled as a Louisiana Medicaid provider.
- Medicaid appropriate codes and modifiers must be used to assure correct reimbursement.

Example: 99173 (when billed for an EPSDT vision screening) must be billed with an EP modifier; or 99381-99385 (initial medical screening service) when provided by an RN, must be billed with the TD modifier.

EPSDT screening services claims (including immunization claims) for patients enrolled in a BAYOU HEALTH Plan on the date of service (which can be verified through the eMEVS system), must submit either electronically via 837-P or hardcopy using the CMS-1500.

There will not be a K-3 segment for electronic submissions nor a KM-3 hardcopy claim form. However, providers are responsible for maintaining the information that would be captured on those segments until further notified.