



# San Francisco CHDP Newsletter

# FALL 2015

## Medi-Cal & ICD-10 Coding

Medi-Cal will be transitioning to ICD-10 codes on October 1, 2015. The following are details of the changes.

**Medi-Cal will be converting ICD-10 codes back to the corresponding ICD-9 codes to process claims.** Medicaid Management Information Systems (MMIS) is Medi-Cal's current claims/billing system. This system is over 30 years old and not capable of handling ICD-10 codes. Medi-Cal will convert each ICD-10 to a corresponding ICD-9 code, then process the claim. Use ICD-10 codes that have a corresponding ICD-9 code for ease of conversion.

**Medi-Cal will possibly process claims in this manner through late 2016.** Xerox operates the Medi-Cal claims and billing system for the state of California and is developing a new claims system capable of handling ICD-10 codes. The projected date for the new system is late 2016. According to a recent report from the California State Auditor the project has been significantly delayed. Fortunately the CHDP program will be one of the first programs to transition to the new Medi-Cal claims system.

**Medi-Cal will not publish a comprehensive list of ICD-10 to corresponding ICD-9 codes.** Providers may refer to the provider manuals for guidance.

*"The crosswalk will not be published since there is already a process for appeal of claim adjudication where there are disagreements between the amount paid and the amount submitted. However, the provider manuals will be updated with the ICD-10 codes as appropriate, allowing providers to refer to the manual for guidance."*

Until the new claims system is in place, consider using ICD-10 codes that obviously match an ICD-9 code when possible.

Free on-line ICD-10 lookup with corresponding ICD-9 code:

<http://www.icd10data.com/>

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## Immunization Only Visits

A PM 160 is needed for a vaccine only visit.

- Mark the 'partial screen' box
- Write "immunizations only" in the comments/problems area
- Document the vaccines administered
- Link this partial screen with the full health assessment by documenting the date of the recent well child visit

PM 160 Form filled out for partial screening visit:

<https://www.sfdph.org/dph/files/MCHdocs/CHDP/>

*Disclaimer: There are many online sources of ICD-10 codes with corresponding ICD-9 codes. CHDP has no affiliation with this particular organization and does not endorse its use or vouch for its accuracy.*

- Common Pediatric ICD-10 codes: <https://www.cms.gov/Medicare/Coding/ICD10/Downloads/ICD10ClinicalConceptsPediatrics1.pdf>
- Medi-Cal ICD-9 FAQ: [http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa\\_icd10\\_faqs.asp](http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa_icd10_faqs.asp).
- To contact Xerox: [ICD-10Medi-Cal@xerox.com](mailto:ICD-10Medi-Cal@xerox.com)
- References: [files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa\\_icd10\\_faqs.asp](files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa_icd10_faqs.asp)
- 2015 State Auditor letter report to the governor and legislative leaders on the California Medicaid Management Information System (CA MMIS): <http://www.bsa.ca.gov/pdfs/reports/2014-043.pdf>

## Eliminating Common Vaccine Errors

When CHDP reviews clinic medical records, we often encounter children who are not up to date with vaccinations. The following are tips to avoid the more common vaccine errors we encounter.

**Hepatitis B dose #3 should be given no earlier than 24 weeks of age.** Infants who received a birth dose of Hepatitis B vaccine, should get doses #2 and #3 at 1-2 months and at 6 months. The 3rd dose should be given no earlier than 24 weeks of age. If Hepatitis B vaccine is given at 0, 2, and 4 months, the 4 month dose does NOT count.

**All children need a booster dose of IPV at age 4 or older, even if they have already received 4 doses of polio vaccine.** Frequently immigrant children have received 4 doses of polio vaccine before age 4. They still need a dose of IPV at age 4-5. Four years is the minimum age for the final dose of IPV, regardless of the number of doses of polio vaccine previously received.

**Children who received *measles* or *MR* vaccine still need 2 doses of MMR.** The minimum interval between 2 doses is 4 weeks.

**Teens with no history of childhood DTaP need Tdap and 2 doses of Td** to complete their series.

**Children who got meningococcal vaccine before age 10 still need 2 doses of MCV4.** Meningococcal vaccine given before age 10 doesn't count toward the routine vaccination recommendations for ages 11-12 and 16 years. Also, childhood meningococcal vaccine given in China or other countries does not include all strains covered by MCV4. Refer to the following chart for recommendations on when to give MCV4.

MCV # 1	MCV # 2
10-12 years (on-time)	Age 16
13-15 years (catch-up)	Age 16-18, minimum 8wks after dose 1
16-18 years (catch-up)	N/A
19-21 years, will be in group home	N/A

# New Fluoride Varnish Policy in the San Francisco Health Network Primary Care Clinics

The SF Health Network (SFHN) is instituting the implementation of a fluoride varnish policy across the Department of Public Health. This came after an unanimous approval from the San Francisco Health Commission Board in February 2015 resulting in Resolution (No. 15-4) in *Support of Improving the Oral Health of All Children in the City and County of San Francisco County*. All children ages 0 through 5 years old seen for a well-child visit in a SFHN primary care clinic will be offered the Medi-Cal benefit of a fluoride varnish application up to 3 times a year.

SFGH Children’s Health Center has been offering this benefit for over 6 years. The target population is children whose medical homes are the SFHN primary care clinics. SFGH Family Health Center (FHC) was the first clinic trained on this preventive service. Led by Dr. Claudia Mooney, and advised by Dr. Susan Fisher-Owens, FHC has developed documentation and work flow protocols, which will be used to guide all SFHN clinics going forward. Electronic Health Records



## Code for Varnish

Effective October 1, 2015—CPT code 99188 is used to report the application of topical fluoride varnish by a physician or other qualified health professional.

## *Fluoride Varnish application is backed by the U.S. Preventive Services Task Force and the CDC*

have been formatted to receive both the providers Rx, and the post application documentation. Clinic Staff have been trained. The FHC FV pilot will be evaluated monthly and improvements will be added. Chinatown Public Health Center stepped up to be the second clinic trained and will now implement this new policy. Other primary care clinics are to follow.

**The U.S. Preventive Services Task Force (USPSTF)** recommends that primary care clinicians apply fluoride varnish to the primary teeth of all infants and young children beginning when their first primary tooth comes in (USPSTF Grade B recommendation, which means USPSTF recommends the service).

<http://www.uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/dental-caries-in-children-from-birth-through-age-5-years-screening>

**CDC MMWR Morbidity and Mortality Weekly Report** identified Fluoride Varnish as one of Four Underused Clinical Preventive Services in Early Childhood.

<http://www.thedoctorschannel.com/view/cdc-mmwr-underused-pediatric-clinical-preventive-services-early-childhood/>

**For more resources:**

<http://www.cdc.gov/childpreventiveservices/tools.html>

### **ADD THIS IMPORTANT PREVENTIVE SERVICE TO YOUR PRACTICE**

**—Get Trained—**

CHDP offers a training on the application of Fluoride Varnish as well as additional support in relation to work flow, documentation protocols and billing and reimbursement details of this procedure.

Please contact our Oral Health Consultant Margaret Fisher, RDHAP at 415-575-5719 or [margaret.fisher@sfdph.org](mailto:margaret.fisher@sfdph.org) to schedule your training.



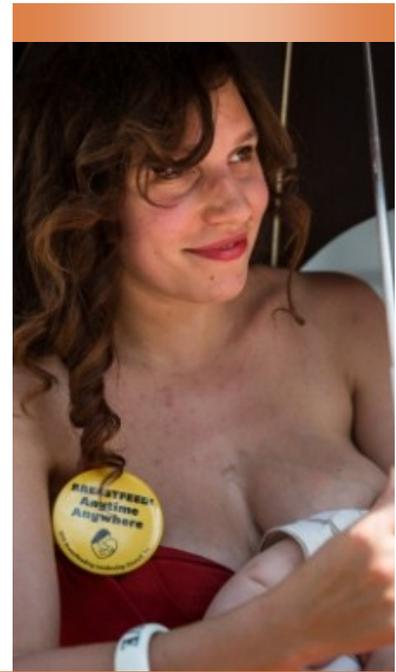
# Regional Breastfeeding Liaison Project

The California WIC Regional Breastfeeding Liaison (RBL) Project was created by the California WIC Program to improve breastfeeding rates of families enrolled in the WIC program by linking Regional Breastfeeding Liaisons (RBLs) with healthcare providers. Liaisons provide:

- Breastfeeding In-services to providers and staff
- Educational materials for providers and clients
- Offer ongoing breastfeeding support and resources

Laura Kinsella, MS, RD, CLE is the current liaison for San Francisco. She is available to join forces with your clinic to improve breastfeeding rates. Please contact her directly to be a part of this important project: [lkinsella@smcgov.org](mailto:lkinsella@smcgov.org)

WIC Regional Breastfeeding Liaison (RBL) Pilot: <http://www.calwic.org/storage/documents/conference/2011/CommunityCatalystsRBLHandout.pdf>



*“Shortened or absent breastfeeding has enormous public health implications for all segments of society: children and adults, male and female.”*

*California WIC Regional Breastfeeding Liaison (RBL) Pilot*

## WIC Referral Reminder

For all patients under 6 years of age, please remember to check if they are in the Women, Infants & Children (WIC) program. The WIC program provides nutrition education, breastfeeding support and education, supplemental foods, and referrals to health care and community services. If the patient is not enrolled, please refer them to the San Francisco WIC Program at 415-575-5788.

TOTAL FEES	3. Counseled About/Referred For		Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Tobacco Use Prevention/Cessation.			
PLACE OF SERVICE	<input checked="" type="checkbox"/> 1 Enrolled in WIC	<input checked="" type="checkbox"/> 2 Referred to WIC		
	NOTE: WIC requires Ht., Wt. and Hemoglobin/Hematocrit			
	<input type="checkbox"/> 1 PARTIAL SCREEN	<input type="checkbox"/> 2 SCREENING PROCEDURE RECHECK		
	ACCOMPANIES PRIOR PM 160 DATED			
	PATIENT	COUNTY	AID	IDENTIFICATION NUMBER
	ELIGIBILITY			

WIC status is assessed and recorded at every well child visit for children under 6 years of age. WIC status should be documented in the medical note as well as on the PM 160



## CHDP Gateway News

A CHDP Provider can temporarily pre-enroll CHDP- eligible infants, children, and youth in **full-scope, fee-for-service Medi-Cal** at the time of the scheduled CHDP health assessment visit through the CHDP Gateway process. Guidelines for Gateway (pre-enrollment) Eligibility:

### For Medi-Cal Eligible Children and Youth

- Must be residents of California
- Younger than 19 years of age
- Members of a family whose household income is at or below 266 percent of the federal poverty guidelines
- Limited-Scope Medi-Cal eligibility
- A share of cost (SOC), regardless of SOC obligated for the month of service

Completion of a CHDP Pre-Enrollment Application (DHCS 4073) and Gateway transaction submission will allow eligible clients to receive full-scope, no-cost Medi-Cal benefits for up to two months which starts on the day of the well child exam till the end of the following month. Gateway frequency corresponds to the CHDP periodicity schedule. Pre-enrollment may occur earlier than the next scheduled CHDP health assessment if there is a reason for a Medically Necessary Interperiodic Health Assessment (MNIHA). Providers must indicate a reason for the MNIHA at the time of the Gateway electronic submission.

As of late July 2015, there is now a limit to the Gateway frequency: Children under 19 years old are limited to TWO Pre-Enrollments (PE) within the past 12 months. Service will be denied through Gateway if the child has exceeded the allowable PE limits and the family should be referred to the social service agency.

After the pre-enrollment eligibility expires, the patient or family may re-enroll through Gateway if the child or youth was determined ineligible for Medi-Cal, and has not submitted a “No Single Streamlined Application”, or has not maintained Medi-Cal eligibility. Please contact your local CHDP Provider Relations Nurse for details.

Medi-Cal NewsFlash: New Response Message for CHDP Program:

[http://files.medical.ca.gov/pubsdoco/newsroom/newsroom\\_23703Rev1.asp](http://files.medical.ca.gov/pubsdoco/newsroom/newsroom_23703Rev1.asp)  
[utm\\_source=iContact&utm\\_medium=email&utm\\_campaign=Medi-Cal%20NewsFlash&utm\\_content=23703rev1](http://files.medical.ca.gov/pubsdoco/newsroom/newsroom_23703Rev1.asp?utm_source=iContact&utm_medium=email&utm_campaign=Medi-Cal%20NewsFlash&utm_content=23703rev1)

CHDP Income Eligibility Guidelines:

<http://files.medi-cal.ca.gov/pubsdoco/bulletins/artfull/chdp201505.asp>

# CHDP Provider Information Notices

<http://www.dhcs.ca.gov/services/chdp/Pages/CHDPPLPIN.aspx>

**PIN # 15-2** 07-22-15. Revised CHDP Eligibility Determination Table Effective April 1, 2015 through March 31, 2016.

## CHDP Newsflash highlights only:

For details go to <http://www.medi-cal.ca.gov/>, go under the Newsflash tab and you will find the following:

### Denied CHDP Claims for Influenza Codes 53 and 71 to be Reprocessed - released June 19, 2015

**CA-MMIS Health Enterprise (HE): Specialty Programs Beneficiary Enrollment Update – released June 22, 2015**—The target date of July 1, 2015 for beneficiary enrollment in CHDP program has been rescheduled to a later date in order to make sure there is sufficient time to allow for full and robust testing of the system. A full analysis will take place by the end of June. A new implementation date will be announced following the analysis.

**CA-MMIS Health Enterprise: Revised Implementation Date – released August 4, 2015**—Effective September 21, 2015, DHCS will implement the new CA-MMIS HE Portal for qualified providers in the CHDP program to assist applicants in applying for presumptive eligibility (PE). There will be a transition period for existing providers to move to the new HE Portal and DHCS will provide training and support to assist providers in this process.

**CA-MMIS Health Enterprise: Web Registration for CHDP Providers – released August 5, 2015**—Beginning September 21, 2015, Medi-Cal providers who enroll new applicants into the CHDP program will be required to register for an account in the CA-MMIS HE Portal. Eventually HE Portal will become the single point of entry for ALL Transaction Services. On initial registration in the HE Portal, provider organizations should identify and consider designating an appropriate Organization Administrator (Org Admin) as this Org Admin has ‘super user’ type privileges in the provider organization and can create new users, deactivate existing users, change user roles and reset passwords, including the ability to assign an Administrator role to other users. The first user created for the provider organization will be assigned the Org Admin role by default. Contact the help desk at 1-800-541-5555 to change the Org Admin.

**CHDP Bulletin highlights:** <http://www.medi-cal.ca.gov/>, click on Provider Bulletins, scroll to bottom. Click on CHDP Gateway to Health Coverage under Specialty Programs

**Bulletin # 130 – August 2015**—Upcoming CHDP Provider Manual Section Updates for ICD-10. Effective October 1, 2015, CHDP program provider manual sections will be updated with the ICD-10 codes and policy. The manual will be updated to comply with the HIPAA ICD-10 transition. Providers will no longer be able to use ICD-9-CM diagnosis and procedure codes for health care services provided on or after October 1, 2015. A link to provider manual sections containing ICD-9 billing policy – for reference purposes only – will be included in a future Medi-Cal Update. For general ICD-10 information, go to ICD-10 FAQs at [http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa\\_icd10\\_faqs.asp](http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa_icd10_faqs.asp)

**Bulletin # 129 – July 2015**—VFC-Provided Hib-MenCY-TT Added to CHDP. Hib-MenCY-TT details are as follow:

Medi-Cal Code	CHDP Code	CHDP Description	Age Group	Vaccine Source	Rate
90644	92	Hib-MenCY-TT/ MenHibrix	6 weeks through 18 months	VFC	\$9.00

**Bulletin # 128 – June 2015**—Updated Eligibility Age Range for Meningococcal Conjugate Vaccines. Effective retroactively for dates of service on or after August 30, 2013, the CHDP code 69 age range for administration of meningococcal conjugate vaccines (Menactra and Menveo) has been updated to 2 months through 18 years, 11 months of age. The vaccine source for CHDP code 69 has been updated to include Vaccines For Children or State. CHDP code 69 allows four doses with a series interval of eight weeks between the first and second dose.

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### Child Health & Disability Prevention Program

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PLEASE  
PLACE  
STAMP  
HERE