

PROVIDER NEWS FLASH

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INFORMED CONSENT FOR PSYCHOTHERAPY



In accordance with s. 409.912(51) F.S., effective September 1, 2011, prescriptions for psychotropic medication prescribed for a child under the age of thirteen (13) must be accompanied by the express written and informed consent of the enrollee's parent or legal guardian.

Psychotropic (Psychotherapeutic) medications include antipsychotics, antidepressants, anti-anxiety medications, and mood stabilizers. Anticonvulsants and ADHD medications (stimulants and non-stimulants) are not included at this time. For the list of medications subject to the informed consent, please go to: http://www.sfccn.org/documents/InformedConsent_PsychotherapeuticMedication.pdf

The prescriber must document the consent in the child's medical record and provide the pharmacy or the enrollee's parent or legal guardian with a signed attestation of this documentation with the prescription. The prescriber must ensure completion of the Medicaid "Informed Consent for Psychotherapeutic Medication" attestation form, the Department of Children and Families CF1630 form, provide the court order for the medication, or an attestation form that includes all elements on the Medicaid attestation form. Every **new** prescription will require a **new** informed consent form.

The Medicaid attestation form can be accessed at:

http://ahca.myflorida.com/Medicaid/Prescribed_Drug/med_resource.shtml

The Department of Children and Families CF1630 form can be accessed at:

<http://www.dcf.state.fl.us/dcfforms/Search/DCFFormSearch.aspx>



FLORIDA MEDICAID TRANSITION TO HIPAA 5010 TRANSACTIONS



All trading partners will be deactivated for HIPAA standard 4010 X12 transactions effective January 1, 2012. Current participants in the electronic data interchange (EDI) process must be aware that the 4010 version of HIPAA standard transactions expires on December 31, 2011. Failure to prepare for this deadline will result in delayed Medicaid payments. This change applies to any provider and vendor submitting or receiving electronic files from the Florida Medicaid Program and its Fiscal Agent. Florida Medicaid is prepared for the

5010 version of the HIPAA standard transactions and is receiving this updated version of electronic transactions from some of our EDI partners who have implemented the solo version.

Health care providers that bill Medicaid electronically should have completed their software and business changes and should be finalizing testing activities. Providers not at this stage of readiness should immediately contact their software/practice management vendor, billing agent, or clearinghouse to check the status of the upgrade to the HIPAA 5010 standard. Providers who do not use a billing agent or clearinghouse may want to contact an EDI vendor for assistance.

For questions regarding Florida Medicaid's 5010 implementation, please contact the Medicaid Fiscal agent at (866) 586-0961. As the implementation deadline approaches, please act now to prepare for the upcoming changes.

For additional information, please contact the SFCCN Subnetwork for which you are contracted:

MHS 954-276-3131 Broward Health 954-767-5600 PHT 877-838-7526

www.sfccn.org

ELECTRONIC FINGERPRINTING FOR PROVIDERS



A newly expanded version of the Enrollment pages on the Florida Medicaid public web portal is now available featuring new pages for Background Screening, Provider Reenrollment, and a reorganized Enrollment Forms page. The most exciting change is that applicants seeking to participate in the Medicaid program or are due to reenroll may now submit fingerprints electronically through a Livescan vendor. This is a major process improvement that provides greater accuracy due to fewer rejections of fingerprints and improved timeliness of the background investigation process.

The new Background Screening page includes:

- * Information about available options for electronic submission
- * Links to Livescan vendor lists
- * A list of all information required for the screening

Take a moment to learn about the new electronic fingerprint information as well as the other tools available to providers by visiting the portal at www.mymedicaid-florida.com. Choose Public Information for Providers and then Enrollment.

NOTE: Medicaid will require all licensed practitioners to submit fingerprints when they apply to enter or renew with the program unless they can supply proof of an acceptable screening within the previous twelve (12) months that is in compliance with Chapter 435, F.S.

PROVIDER CORNER



Effective for dates of service on or after 10/1/2011, CPT code 90378 (Synagis) will no longer be billable through physician services, and will be removed from the fee schedule. Previous instructions to bill for Synagis using J3490 should also be disregarded.

Synagis will only be available upon prior authorization through Medicaid Pharmacy Services. Physician offices wishing to provide Synagis to Medicaid fee-for-service recipients can find the required prior authorization form at the following link:

http://ahca.myflorida.com/Medicaid/prescribed_drug/pharm_thera/paforms.shtml

Physician offices should contact the RSV Connection to arrange for office delivery through a specialty pharmacy. The specialty pharmacy will bill Medicaid and ship Synagis to the office for administration. The physician office may bill only the administration fee to Medicaid. For more information about RSV Connection, please go to <http://www.synagis.com/HCP/sub/rsvconnection.aspx>

FLUORIDE VARNISH



Oral evaluation and fluoride varnish application are preventative services which should be provided within six months of eruption of the first primary tooth, especially to high risk patients. Medicaid covers the application of fluoride varnish when provided to Medicaid-eligible children in a physician's office.

Physicians, physician assistants, and advanced registered nurse practitioners may provide this service and bill Medicaid using CPT procedure code 99499 SC.

Fluoride varnish may be applied to a child's teeth at the time of the CHCUP visit. Medicaid reimbursement for 99499 SC is \$27.00 for both the application of fluoride varnish and the oral evaluation for a child 6 months to 3 1/2 years of age.

REPORTING PERINATAL HEPATITIS B

Effective July 2011, prenatal and postpartum enrollees or infants who test HBsAg-positive should be reported to the Department of Health using the Practitioner Disease Report Form (DH Form 2136). The previous form (Perinatal Hepatitis B Case and Contact Report (DH Form 1876)) has been retired.

The DH Form 2136 can be accessed at:

http://www.doh.state.fl.us/disease_ctrl/epi/surv/FL_Single_Disease_Report_v8a.pdf

