

From: State of Florida Agency for Health Care Administration [medicaid_alert@ahca.myflorida.com]

Sent: Wednesday, August 11, 2010 10:43 AM

To: Burch, Carol D

Subject: Community Behavioral Health Documentation Training

Follow Up Flag: Follow up

Flag Status: Red



Better Health Care for All Floridians

FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Health Care Alerts & Provider Alerts Messages August 2010

Provider Type(s): 05

Community Behavioral Health Documentation Training

The following training will be offered in Broward County:

Community Behavioral Health Documentation Training

Date:

August 23, 2010, at 9:00 am and 1:00 pm

Location:

North Broward Regional Service Center
1400 West Commercial Blvd, Suite 195
Fort Lauderdale, FL 33309

The training will include general documentation requirements for Community Behavioral Health services. It will not include documentation requirements for specialty services such as STFC, BHOS, and TGC.

Reservations are required via the following Web site:

<http://ahcaxnet.fdhc.state.fl.us/medres/>.

Note: This training is offered to Broward County providers only. Please contact Medicaid Area Office 10 with any questions: (954) 958-6500.

LINKS

[Florida Medicaid Web Portal](#) | [Florida Medicaid Health Information Network](#) | [Florida Medicaid HIPAA Information](#) | [HIPAA Transactions & Code Sets Standard](#) | [National Identifiers](#)

QUESTIONS ABOUT FLORIDA MEDICAID?

Please direct questions about Medicaid policies to your local Medicaid area office. The Medicaid area offices' addresses and phone numbers are available on the [Area Offices](#) Web page.

ALERTS INFORMATION

The Florida Medicaid program has created an e-mail alert system to supplement the present method of receiving Provider Alerts information and to alert registered subscribers of "late-breaking" health care information. An e-mail will be delivered to your mailbox when Medicaid policy clarifications or other health care information is available that is appropriate for your selected area and provider type.

Visit the [Florida Medicaid's Health Care Alerts](#) page to subscribe now. You may unsubscribe or update your subscription at any time by clicking on the "Manage your subscription" icon in the footer of each e-mail. Other questions regarding the e-mail alert system can be sent to the [Florida Medicaid Alerts Administrator](#).

© 2010 Agency for Health Care Administration

This message was sent from Florida Agency for Health Care Administration to carol_burch@doh.state.fl.us. It was sent from: Florida Agency for Health Care Administration, 2727 Mahan Drive Tallahassee, FL 32308. You can modify/update your subscription via the link below.



 [Manage your subscription](#)

[FORWARD THIS MESSAGE](#)



CHARLIE CRIST
GOVERNOR

Better Health Care for all Floridians

THOMAS W. ARNOLD
SECRETARY

August 10, 2010

Dear Medicaid Early Intervention Services Providers:

The purpose of this letter is to inform providers of a change in the policy regarding eligibility criteria as stated in the Early Intervention Services Coverage and Limitations Handbook, August 2007.

Effective July 1, 2010, the following criteria are now used to establish a developmental delay when an appropriate standardized test is used:

- A score that equals or exceeds 1.5 standard deviations below the mean in two or more developmental domains, or
- 2.0 standard deviations below the mean in one or more developmental domains.

In addition to the above, infant weight less than 1,200 grams at birth is now considered an established condition.

Also effective July 1, 2010, the requirement of a 25 percent delay or greater is to no longer be used when determining eligibility.

Children currently receiving services who do not meet the new criteria will not be terminated for services due to this change.

This new policy will be included in the next issue of the Florida Medicaid Early Intervention Services Coverage and Limitations Handbook.

If you have any questions or concerns, please contact Gail Underwood at 850-412-4224 or Judy Taylor-Fischer at 850-412-4217.

Sincerely,

Beth Kidder, Chief
Bureau of Medicaid Services

BK:gu
cc: Medicaid Field Managers/EIS Liaisons
Lynn Marie Price, Bureau Chief, Department of Health



ELIGIBILITY CHANGES EFFECTIVE JULY 1, 2010

QUESTIONS AND ANSWERS

NUMBER	QUESTION	SUBMITTED BY	DATE SUBMITTED	ESSO RESPONSE
1	When making children eligible using sub domain scores, is a child eligible on numbers or clinical judgment?	Gold Coast	6/29/2010	Sub domain scores should be considered in conjunction with other information gathered about the child. Sub domain scores should not be used in isolation to determine Part C eligibility. Appropriate documentation of the sources and use of informed clinical opinion would be required.
2	If the IFSP team cannot come to a consensus regarding eligibility, can we use the following (for example) an expressive communication score of 4 or 5 and an adaptive developmental quotient score of 78, to equal two developmental domains that are -1.5 standard deviations below the mean?	North Beaches	6/30/2010	Reaching consensus among the evaluation team is imperative when determining a child's eligibility for Part C. Sub domain scores should not be considered in isolation but must be used in conjunction with other information gathered about the child. The example given is a situation when it would be recommended and beneficial to administer a domain specific assessment to gain further insight about a child's communication abilities, with the goal of reaching consensus among the team.
3	The documentation of eligibility through Informed Clinical Opinion (slide 16) goes on IFSP Form D?	Jillian Williams	6/30/2010	Yes, this information would be included under the <i>Eligibility Determination</i> section. This is where you would indicate what information was used in determining a child's eligibility. The IFSP instructions will be updated to outline how informed clinical opinion is to be documented on Form D.
4	What is a medical home?	North Beaches	6/30/2010	A medical home is a trusting partnership between a child, a child's family and the pediatric team who oversees the child's health and well-being within a community-based system that provides uninterrupted care to support and sustain optimal health outcomes.
5	On the Standard Score sheet that was slide 9, I believe, the bolded black line shows 75 Standard Score with a 1.67 SD and a scaled of 5. What happened to the 1.50 standard deviation with a 78 cutoff and a scaled of 6 for eligibility purposes? They only show an 80 standard score 1.33 and a scaled score of 6.	Space Coast	6/30/2010	Although a score of 78 does fall 1.5 SD below the mean, the intention of this chart was to provide a general range of scores and how these scores reflect a child's performance. The chart does not reflect Florida's specific eligibility requirements.
6	If we have a 2.0 SD in receptive and a 2.0 in expressive does = eligible? Or no because they are in the same domain?	Space Coast	6/30/2010	A developmental delay meets or exceeds 1.5 SD below the mean in two or more domains or 2 SD below the mean in at least one domain. Therefore, If a child has a delay of 2.0 SD below the mean in the communication domain, they would be eligible. However, if they do not, you cannot split a domain into 2 scaled scores to meet Florida's eligibility criteria.

7	<p>Slide #21 on the presentation PowerPoint states that if a child fails the secondary ASD screen, the LES should make a referral to the child's medical home and if resources are not available, the LES should proceed with the evaluation process using the ADOS. My question is, does this mean that Early Steps is now taking on the diagnostic evaluation for ASD and Early Steps funds will be used to support the cost of that evaluation? Since we do not have any of our Early Steps Teams currently trained to conduct the ADOS, our LES would most likely be referring their children to the Hospital's new Autism Center for that evaluation and I'm assuming that the Center could be reimbursed for that service as an IPDEF.</p>	Western Panhandle	7/7/2010	<p>For a child who fails the secondary screening for Autism Spectrum Disorder, the LES should make a referral to the child's medical home or other community resource, if available, for a diagnostic evaluation. However, this referral does not mean that Early Steps is responsible for payment of the evaluation. If no other resource is available, the Local Early Steps may evaluate the child for an Autism Spectrum Disorder if an ASD diagnosis is necessary to access appropriate, quality early intervention services designed to meet the developmental needs of the child and the needs of the family related to enhancing the child's development. The Autism Diagnostic Observation Schedule (ADOS) should be considered first.</p>

From: State of Florida Agency for Health Care Administration [medicaid_alert@ahca.myflorida.com]

Sent: Thursday, August 05, 2010 9:32 AM

To: Burch, Carol D

Subject: Florida Medicaid Electronic Health Record Program Survey



Better Health Care for All Floridians

FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Health Care Alerts & Provider Alerts Messages

August 2010

Provider Type(s): All

Florida Medicaid Electronic Health Record Program Survey

Electronic health records (EHR) are increasingly becoming a key factor in helping health care practitioners enhance the coordination and quality of care for their patients. Earlier this year, the Florida Medicaid program received federal funds to plan for the implementation of the EHR incentive program, established by the American Recovery and Reinvestment Act of 2009 (ARRA), to promote the adoption and use of health information technology. Florida received federal funds to develop the State Medicaid Health Information Technology Plan that will include a survey of health care providers who treat Medicaid recipients to assess the current health information technology landscape of the state, and a plan for the implementation of the EHR incentive program.

The *Florida Medicaid Electronic Health Record Incentive Program* will provide monetary incentives for eligible Medicaid providers in Florida to adopt, implement, upgrade and meaningfully use EHR systems in their practices. Beginning this month, select hospitals, Federally Qualified Health Care Centers, Rural Health Care Clinics, non-hospital based physicians, dentists, nurse practitioners and certified nurse midwives will begin receiving surveys regarding their level of health information technology adoption and use, as well as their ability and interest to adopt certified EHR systems.

The results of the survey will provide the Agency for Health Care Administration (Agency) with an analysis of the adoption and use of health information technology in Florida. This information will be used to develop Florida's State Medicaid Health Information Technology Plan and the *Florida Medicaid Electronic Health Record Incentive Program*. We encourage all health care providers who treat Medicaid recipients to complete and return the survey by August 18 to ensure the Agency receives an accurate assessment of Florida Medicaid's current health information technology environment.

To further explain the Medicaid Electronic Health Record Incentive Programs, the Centers for Medicare and Medicaid Services (CMS) are hosting a series of conference calls to give details to providers next week, August 10 – 12. The Agency encourages eligible providers and hospitals to listen in and learn about the program. These calls will answer providers'

questions, such as:

- Who is eligible?
- How much are the incentives and how are they calculated?
- What providers will need to do to get started?
- When the program begins and other major milestones regarding participation and payment?
- How to report on Meaningful Use measures?
- Where to find helpful resources?

Click [here](#) for information on how to register and review training materials.

By helping Florida's Medicaid providers implement certified EHR systems in their practices, the Agency hopes to improve the quality of care for all of Florida's citizens. For more information about the *Florida Medicaid Electronic Health Record Incentive Program* and Florida's State Medicaid Health Information Technology Plan, please visit [FHIN.net](#) or contact the Agency at MedicaidHIT@AHCA.MyFlorida.com.

LINKS

[Florida Medicaid Web Portal](#) | [Florida Medicaid Health Information Network](#) | [Florida Medicaid HIPAA Information](#) | [HIPAA Transactions & Code Sets Standard](#) | [National Identifiers](#)

QUESTIONS ABOUT FLORIDA MEDICAID?

Please direct questions about Medicaid policies to your local Medicaid area office. The Medicaid area offices' addresses and phone numbers are available on the [Area Offices](#) Web page.

ALERTS INFORMATION

The Florida Medicaid program has created an e-mail alert system to supplement the present method of receiving Provider Alerts information and to alert registered subscribers of "late-breaking" health care information. An e-mail will be delivered to your mailbox when Medicaid policy clarifications or other health care information is available that is appropriate for your selected area and provider type.

Visit the [Florida Medicaid's Health Care Alerts](#) page to subscribe now. You may unsubscribe or update your subscription at any time by clicking on the "Manage your subscription" icon in the footer of each e-mail. Other questions regarding the e-mail alert system can be sent to the [Florida Medicaid Alerts Administrator](#).

© 2010 Agency for Health Care Administration

This message was sent from Florida Agency for Health Care Administration to carol_burch@doh.state.fl.us. It was sent from: Florida Agency for Health Care Administration, 2727 Mahan Drive Tallahassee, FL 32308. You can modify/update your subscription via the link below.



 [Manage your subscription](#)

[FORWARD THIS MESSAGE](#)

From: State of Florida Agency for Health Care Administration [medicaid_alert@ahca.myflorida.com]

Sent: Friday, July 30, 2010 3:22 PM

To: Burch, Carol D

Subject: NPI Implementation



Better Health Care for All Floridians

FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Health Care Alerts & Provider Alerts Messages July 2010

Provider Type(s): All

NPI Implementation

The purpose of this alert is to let you know about changes in Florida Medicaid that will impact most providers who submit claims to the Florida Medicaid program. The Health Insurance Portability and Affordability Act (HIPAA) of 1996 mandated the implementation of a National Provider Identifier (NPI). Most health care providers must register with the National Plan and Provider Enumeration System and receive a unique NPI. The intent of the HIPAA regulations was to require all health plans to convert their claims processing systems to use only the NPI for claims processing and reporting for providers required to obtain an NPI. Because of the complexities of this conversion by health care plans and providers, the use of the NPI has not yet been strictly enforced. However, Medicaid claims submitted on and after January 1, 2011, will have new requirements for the use of the NPI.

Starting January 1, 2011

In order to enhance Medicaid efforts to ensure that the program is providing quality, affordable health care for all Americans, the United States Congress included provisions in the Patient Protection and Affordable Care Act of 2009 that mandates changes in Medicaid rules for enrolling providers and submitting claims. Starting January 1, 2011, Medicaid will require that all providers who must obtain an NPI include their NPI on all claims submitted to Medicaid. This will include all claims from these providers, whether submitted on paper or electronically. The Medicaid provider number will be allowed to accompany the NPI on claims; however, claims that do not contain the NPI will be denied. Look for further instructions in the near future for these new requirements.

Starting April 2011

The X12 transactions mandated by HIPAA are being modified with a new version, known as 5010. As Florida prepares to convert electronic transactions to the new version of HIPAA, further changes in the electronic claims are needed for the use of NPI for providers who must obtain an NPI. The 5010 version of the claims transactions will no longer allow providers to include the Medicaid provider number as part of the transaction and will allow only the NPI. This affects only electronic claims. Consequently, in preparation for the 5010

implementation, Florida Medicaid will no longer accept X12 claim transactions that contain the Florida Medicaid provider number starting in April 2011. Electronic claims that contain the Medicaid provider number will be denied. Florida Medicaid will provide further instructions in the near future on the 5010 implementation and associated changes that will be required later in 2011.

Thank you for your continued service to Florida Medicaid recipients.

QUESTIONS ABOUT FLORIDA MEDICAID?

Please direct questions about Medicaid policies to your local Medicaid area office. The Medicaid area offices' addresses and phone numbers are available on the [Area Offices](#) Web page.

ALERTS INFORMATION

The Florida Medicaid program has created an e-mail alert system to supplement the present method of receiving Provider Alerts information and to alert registered subscribers of "late-breaking" health care information. An e-mail will be delivered to your mailbox when Medicaid policy clarifications or other health care information is available that is appropriate for your selected area and provider type.

Visit the [Florida Medicaid's Health Care Alerts](#) page to subscribe now. You may unsubscribe or update your subscription at any time by clicking on the "Manage your subscription" icon in the footer of each e-mail. Other questions regarding the e-mail alert system can be sent to the [Florida Medicaid Alerts Administrator](#).

© 2010 Agency for Health Care Administration

This message was sent from Florida Agency for Health Care Administration to carol_burch@doh.state.fl.us. It was sent from: Florida Agency for Health Care Administration, 2727 Mahan Drive Tallahassee, FL 32308. You can modify/update your subscription via the link below.



 [Manage your subscription](#)

[FORWARD THIS MESSAGE](#)

From: State of Florida Agency for Health Care Administration [medicaid_alert@ahca.myflorida.com]

Sent: Thursday, August 05, 2010 10:31 AM

To: Burch, Carol D

Subject: SAVE THE DATES: CMS Education Series for Providers on the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs



Better Health Care for All Floridians

FLORIDA MEDICAID

A Division of the Agency for Health Care Administration

Health Care Alerts & Provider Alerts Messages August 2010

Provider Type(s): All

SAVE THE DATES: CMS Education Series for Providers on the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs

The Centers for Medicare & Medicaid Services (CMS) invites you to join us for a series of national provider calls addressing the specifics of the Medicare and Medicaid EHR incentive programs for hospitals and individual practitioners. Learn the specifics on what you need to participate in the these incentive programs –

- Who is eligible ([Requirements for EHR Incentive Program](#))
- How much the incentives are, and how they are calculated
- What you need to do to get started
- When the program begins and other major milestones regarding participation and payment
- How to report on Meaningful Use measures
- Where to find helpful resources and more

Hear from the experts who wrote the rules! Ask your questions!

EHR Incentive Programs for Eligible Professionals:

A session just for individual practitioners on the specifics about the Medicare & Medicaid EHR incentive program
Tuesday, August 10, 2010
2:00-3:30 pm EST

EHR Incentive Programs for Hospitals: _

A session just for hospitals on the specifics about the Medicare & Medicaid EHR incentive program
Wednesday, August 11, 2010
2:00-3:30 pm EST

EHR Questions and Answers for Hospitals and Individual Practitioners:
Have questions? Join this session to have an opportunity to ask a question and hear answers
by our panel of experts on the Medicare and Medicaid EHR incentive programs.

Thursday, August 12, 2010
2:00-3:30 pm EST

Save the dates! Information on how to register for these calls is forthcoming.

Materials will be made available prior to each training at the following Web address:
http://www.cms.gov/EHRIncentivePrograms/05_Spotlight_and_Upcoming_Events.asp

Cannot attend? A transcript and MP3 file of the call will be available approximately 3
weeks after the call at
http://www.cms.gov/EHRIncentivePrograms/05_Spotlight_and_Upcoming_Events.asp on
the CMS Web site.

Be sure to visit CMS' Web section on the Medicare & Medicaid EHR Incentive Programs
at: <http://www.cms.gov/EHRIncentivePrograms/> to get the latest information. Visit often!

LINKS

[Florida Medicaid Web Portal](#) | [Florida Medicaid Health Information Network](#) | [Florida
Medicaid HIPAA Information](#) | [HIPAA Transactions & Code Sets Standard](#) | [National
Identifiers](#)

QUESTIONS ABOUT FLORIDA MEDICAID?

Please direct questions about Medicaid policies to your local Medicaid area office. The
Medicaid area offices' addresses and phone numbers are available on the [Area Offices](#) Web
page.

ALERTS INFORMATION

The Florida Medicaid program has created an e-mail alert system to supplement the present
method of receiving Provider Alerts information and to alert registered subscribers of "late-
breaking" health care information. An e-mail will be delivered to your mailbox when
Medicaid policy clarifications or other health care information is available that is appropriate
for your selected area and provider type.

Visit the [Florida Medicaid's Health Care Alerts](#) page to subscribe now. You may
unsubscribe or update your subscription at any time by clicking on the "Manage your
subscription" icon in the footer of each e-mail. Other questions regarding the e-mail alert
system can be sent to the [Florida Medicaid Alerts Administrator](#).

© 2010 Agency for Health Care Administration



can modify/update your subscription via the link below.

 [Manage your subscription](#)

[FORWARD THIS MESSAGE](#)

DRAFT

2010 Early Steps Statewide Meeting

DRAFT

September 29, 2010				
12:00 pm - 1:00 pm	Registration			
1:00 pm - 1:15 pm	WELCOME			
1:15 pm - 2:15 pm	OPENING SESSION Speaker - Myra McPherson			
2:15 pm - 2:30 pm	Break			
2:30 pm - 3:45 pm	Title- Insurance-Affordable Care Act Round Table	Title- Reflective Practice Session	Title- Creative Service Delivery Strategies	Title- FRS Roles and Responsibilities
	Audience- D/C	Audience- General	Audience- SC	Audience- SC
4:00 pm - 5:15 pm	D/C Agenda over but room still available (SIWG)	Title- Insurance-Affordable Care Act	Title- Early Intervention Group Sessions	Title- Troubleshooting Everyday Issues Round Table
		Audience- General	Audience- SC	Audience- SC
September 30, 2010				
8:00 am - 8:30 am	WELCOME			
8:30 am - 9:15 am	OPENING SESSION - Awards and ESSO Updates			
9:15 am - 10:45 am	GENERAL SESSION - Presenter			
	Title- PSP Approach/ Philosophy (to include Judy's model with working with groups and how they work within the PSP model)			
10:45 am - 11:00 am	Break			
11:00 am - 12:15 pm	Title- Initial Screening Round Table	Title- More PSP Approach Round Table	Title- Performance Improvement Round Table	Title- Assistive Technology
	Audience- D/C	Audience- General	Audience- SC	Audience- SC
12:15 pm - 1:45 pm	Lunch			

1:45 pm - 3:00 pm	Title-Autism Round Table Audience- D/C	Title- PHOG Scavenger Hunt Audience- General	Title- Unveiling of the New and Improved Service Coordinator Apprenticeship Modules Audience- SC	Title- Reflective Practice Session Audience- General
3:00 pm - 3:15	BREAK			
3:15 pm - 4:45 pm	Title- PSP Model Approach and the Fiscal Aspects Round Table (in-house staff, initial scheduling system to meet 45 day timeline and utilization of all teams) Audience- D/C	Title- CAPTA Referrals Round Table Audience- General	Title-PHOG Scavenger Hunt Audience- SC	Title- Troubleshooting Everyday Issues Round Table Audience- SC
October 1, 2010				
8:30 am - 9:45 am	Title- CAPTA Round Table Audience- D/C	Title- FRS Roles and Responsibilities Audience-General	Title-North Central Pilot Project Audience- SC	Title- Performance Improvement Round Table Audience- SC
9:45 am - 10:00 am	BREAK			
10:00 am - 11:15 am	Title- North Central Pilot Project Round Table Audience- D/C	Title- Unveiling of the New and Improved Service Coordinator Apprenticeship Modules Audience- General	Title-Initial Screening Audience- SC	Title- Assistive Technology Audience- SC
11:15 am - 11:45 am	Break			
11:45 am - 1:00 pm	CLOSING SESSION Speaker- Paula LaLinde			

***BOLD** indicates a session is repeated