CMS: We’re Here to Stay

The Florida Department of Health’s Children’s Medical Services Plan (CMS Plan) and Specialty Programs is proud to serve Florida’s population of children and youth with special health care needs (CYSHCN). Over the decades, CMS Plan has changed, adapted and grown, always with the goal of providing the best possible care for the children we serve.

The national landscape for health care delivery models continues to change. Florida is well positioned to implement a national model for serving CYSHCN within Medicaid and CHIP and through our Title V initiatives. Rumors have circulated that CMS Plan is “going away” or “closing.” Neither of these is true. While CMS Plan is again in a time of transition, we remain working for the health, safety and quality of life of the children and families we serve.

At this time, there are no immediate changes for providers in our network or for the families we serve. Families do not need to do anything differently, and credentialed providers are still able to see CMS Plan member patients. Please continue to visit our website for updates (CMSPPlanFlorida.gov), and rest assured we will contact our members and provider network directly with any changes that will affect them.

Asthma Programs for CMS Plan Members and Providers

Children’s Medical Services Managed Care Plan offers a Chronic Conditions Disease Management Program for asthma to our enrollees. This program is designed to provide enrollees with education and resources regarding the asthma diagnosis and promote medication compliance and reduced emergency department (ED) visits. The success of this program depends on the collaboration of providers like you through your patient referrals.

To make a referral to the Chronic Conditions Disease Management program on behalf of an enrollee, send the following to your local CMS Area Office:

• A referral order
• Recent clinical notes

We want to make it easy for you to participate. An assigned care coordinator will be working directly with each enrollee and your office to coordinate asthma care.
For additional resources that may interest you and your patients, visit the Department of Health’s online asthma toolkit: floridahealth.gov/diseases-and-conditions/asthma/what-is-asthma.html.

**The asthma toolkit includes the following:**
- Asthma education materials addressing asthma causes and triggers
- Asthma Action Plan templates
- Asthma videos showing patients how to use spacers with inhalers
- Asthma updates from the Centers for Disease Control and Prevention
- Resources for the physician, the caregiver, and the child

**We recognize the complexity of an asthma diagnosis:** use these resources to help increase medication compliance and reduce ED visits for CMS Plan members, thereby improving their overall quality of life.

**Bridging the Gap Between Primary Care and Behavioral Health**

**One in five children has a diagnosable behavioral health disorder,** and nearly two-thirds get little help or treatment. In addition, children with chronic medical conditions have more than two times the likelihood of having a mental health disorder (Medicaid Mental Health, January 2017).

According to data from the NPI Registry, there are only 296 child and adolescent psychiatrists in Florida. These numbers suggest there are not enough child psychiatrists available to treat the many children with mental health disorders. To help bridge this gap, primary care physicians, including pediatricians, are playing an increasingly important role in identifying and treating mental health symptoms and diagnoses.

Often, children and youth with mental health symptoms go to their primary care provider for diagnosis and treatment of these disorders. This is because many families are facing the provider gap; families struggle to find covered behavioral health care and services within a reasonable timeframe. Thus, families rely on their general pediatricians and other primary care providers for help with mental and behavioral health symptoms, diagnosis, and treatment.

Many pediatricians and other primary care providers realize they must supplement and/or refresh their training and resources in order to appropriately serve these families. Across the nation and here at CMS Plan, public health entities are looking for ways to support primary care providers who wish to integrate a more complete behavioral health solution into their patient encounters. These providers aim to detect and address a broad spectrum of behavioral health needs in the primary care patient population with the goal of early identification, quick resolution, long-term prevention, and wellness for as many patients as possible.
Implementing proper training and guidelines may encourage other health professionals to appropriately treat these children, such as in the primary care setting, to help eliminate the disparity between demand for and accessibility to mental health care and services.

How can primary care providers make the move to becoming better suited to help children with mental and behavioral health symptoms and disorders?

Check out these resources:
- Call the Florida Pediatric Psychiatry Hotline (more information below).
- Visit the eSolutions article and webinar “Ready, Set, Integrate: Integrated Care Adventures in Community Health Centers” to learn more about integrating behavioral health in primary care.
- Keep an eye out for future CMS materials focusing on solutions and resources for primary care providers of children and youth with behavioral health symptoms and diagnoses as a part of or in addition to other special health care needs.

Florida Pediatric Psychiatry Hotline: 1-866-487-9507

Key information about the Florida Pediatric Consultation Hotline

The goals of the program:
- To provide timely telephonic psychiatric and clinical guidance to primary care clinicians treating children with psychosocial and behavioral health conditions.
- To facilitate a referral to a child psychiatrist or psychiatric ARNP when possible.
- To promote a collaborative relationship between primary care and child psychiatrists.

The service is:
- Free.
- Related to consultation about medication management.
- Limited to a maximum of 20 minutes per telephone consultation.
- Scheduled with a child psychiatrist by a trained administrative professional for appointment times to connect with the primary care clinician. Most calls will be returned within 1 to 4 hours.
- HIPAA compliant. Information shared is limited to the patient’s age, gender, weight, and other information relevant to a discussion of medications. No patient names or other uniquely identifying information will be shared during the consultation.
- Available on non-holiday weekdays between 8:30 am and 4:30 pm.

The Florida Pediatric Psychiatry Hotline is funded by the Florida Medicaid Drug Therapy Management Program for Behavioral Health through a contract with the Florida Agency for Healthcare Administration.
Provider E-InfoSource Updates for CMS Plan Title XXI Eligibility

We are aware that active CMS Plan Title XXI (KidCare) enrollments are not always displaying as such for providers; however, there have been recent upgrades to E-InfoSource in an effort to improve navigation.

Here are the steps to determine Title XXI eligibility in the Provider Portal:

Search by name. Both Title XIX (Medicaid) and Title XXI (KidCare) results should appear.

Look at the Group ID column. Title XXI results will have the Group ID “4-XXI00001.” Title XIX results will have the Group ID “3-XIX00001.”

Select the Title XXI result.

In the next screen, providers will be able to see the eligibility status for the Title XXI result, their plan name, benefit type, and other information.

Keep in mind that families sometimes change eligibility. They may switch from Medicaid to KidCare, or the reverse. Changing between Title XIX and Title XXI may change a child’s identification number. Performing a search using only the Medicaid ID may result in showing the child’s enrollment is inactive or ineligible though the child may, in fact, be active and/or eligible in KidCare. Follow the steps above to ensure you have located the correct file for Title XXI enrollees.

Well-Child Checkups: The Importance of the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Benefit

As fall and back-to-school activities approach, please educate and remind your patients of the importance of the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit, which provides comprehensive and preventive health care services for children under the age of 21 who are enrolled in Medicaid. EPSDT is the key to ensuring children and adolescents receive appropriate preventive, dental, and mental health care, along with developmental and specialty services. The goal of EPSDT is to ensure the right care to the right child at the right time in the right setting is available to identify early detection and care so health problems are averted or diagnosed and treated as early as possible. EPSDT is a crucial component of a quality health benefit.
EPSDT provides the tools necessary to offer a comprehensive, high-quality health benefit. In addition, EPSDT covers age-appropriate medical, dental, vision, and hearing screening services at specified times, and when health problems occur or are suspected.

Any qualified provider operating within the scope of their practice, as defined by Florida law, can provide a screening service. In 2012, two new procedure codes were added to facilitate payment for oral health screenings and assessments: CPT 0190 and 0191. Vision and hearing screening services must also be provided. EPSDT covers medically necessary diagnostic services. When a screening examination indicates the need for further evaluation of a child’s health, the child should be referred for diagnosis as soon as possible.

In order to promote access to needed EPSDT services, CMS Plan will cover transportation needs and scheduling assistance if necessary to and from medical appointments.

Coding for Pediatric Preventative Care is a factsheet from the American Academy of Pediatrics. This resource contains comprehensive listings of codes that are relevant in well-child checkups, including a well child visit when an evaluation and management (E/M) service is provided on the same day by the same physician as the preventive medicine service.

Link Library

NPI Lookup Child & Adolescent Psychiatry—Florida
npidb.org/doctors/allopathic_osteopathic_physicians/child-adolescent-psychiatry_2084p0804x/fl/?page=10

eSolutions Article and Webinar—Ready, Set, Integrate: Integrated Care Adventures in Community Health Centers
integration.samhsa.gov/about-us/esolutions-newsletter/jul

integration.samhsa.gov/about-us/CIHS_NACHC_BH_Integration_September_19_2013_FINAL.pdf

Coding for Pediatric Preventive Care

Addresses for Mailing Paper Claims

Title XIX P.O. Box:
CMSN MMA Specialty Plan Title XIX
P. O. Box 981648
El Paso, TX 79998-1648

Title XXI P.O. Box:
MED3000 CMS Title XXI
P. O. Box 981733
El Paso, TX 79998-1733

Pharmacy Contacts

Magellan, Medicaid
Title XIX pharmacy benefits manager
Phone: 800-603-1714

MedImpact, KidCare
Title XXI pharmacy benefits manager
Phone: 800-788-2949