



The Update is a bi-weekly web newsletter published by the Iowa Department of Public Health's Bureau of Family Health. It is posted the second and fourth week of every month, and provides useful job resource information for departmental health care professionals, information on training opportunities, intradepartmental reports and meetings, and additional information pertinent to health care professionals.

In this issue...

1 Promising Practices in MCH

2 Family Planning Update - Save the Date

3-4 Spotlight on Section 500 of the MCH Administrative Manual

5 IME Informational Letter #1151

6 Calendar of Events

7 Directory

8 Additional Information

Promising Practices in MCH

The National Institute for Health Care Management recently published two new fact sheets in the *Promising Practices in Maternal and Child Health* series, which emphasizes collaborative partnerships between health plans and others in the MCH community.

"Preventing Bullying in Schools Through Partnerships," available at http://nihcm.org/images/stories/Bullying_Fact_Sheet_FINAL.pdf, highlighted the Highmark Foundation's efforts to create a coalition of experts to implement the largest statewide bullying prevention initiative in the country. NIHCM also hosted a webinar on this topic highlighting new data on the cost effectiveness of bullying prevention.

"Leveraging Human Capital to Promote Youth Empowerment: the Blue Cross Blue Shield of Massachusetts-Crossroads for Kids Partnership," available at http://nihcm.org/images/stories/MA_Crossroads_060512.pdf, discussed the Blue Cross Blue Shield of Massachusetts corporate volunteer programs and the health plan's unique partnership with a local non-profit, Crossroads for Kids.

NICHM continues to update the *Promising Practices in Maternal & Child Health*, searchable database (<http://nihcm.org/maternal-child-and-adolescent-health/promising-practices?>), a collection of emerging and promising health plan programs and collaborations. This database allows you to learn more about the MCH activities and priorities of health plans and foundations from across the country with a goal of facilitating program replication and fostering new collaborations between health plans and other MCH stakeholders, especially those working in communities and in the public sector. You are invited to submit your public-private partnership success stories for inclusion in the Promising Practices in MCH database. To submit a story, go to <http://nihcm.org/component/content/article/135-mch-promising-practices/384-promising-practices?>.

If you have questions about the database, or feedback on NICHM fact sheets, go to nichm@nihcm.org.



Iowa

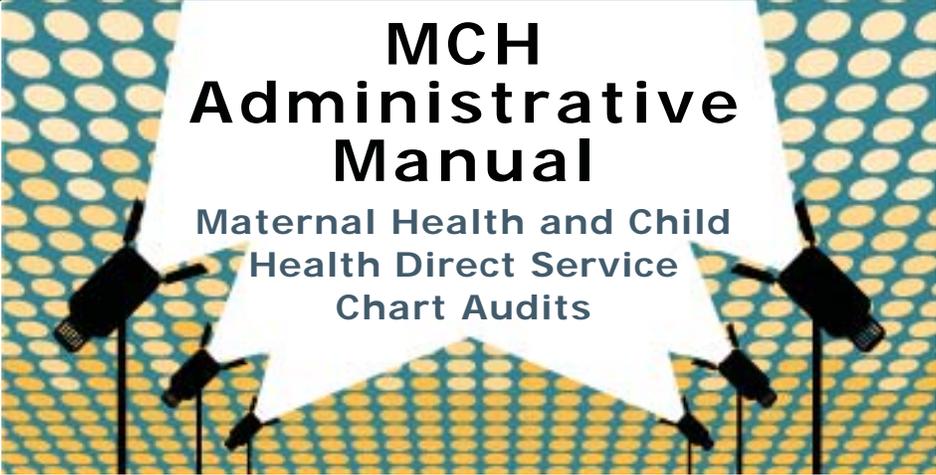
FAMILY PLANNING UPDATE

Prisms of Possibilities

SEPTEMBER 18-19, 2012

RAMADA TROPICS RESORT & CONFERENCE CENTER

URBANDALE, IA

The graphic features a white banner with a scalloped bottom edge, centered on a background of a blue and yellow polka-dot pattern. Several black microphones on stands are positioned around the banner, pointing towards the text. The text on the banner is in a bold, black, sans-serif font.

MCH Administrative Manual

Maternal Health and Child Health Direct Service Chart Audits

Maternal Health and Child Health Direct Service Chart Audits

Section 500 of the new 4th Edition of the MCH Administrative Manual features Performance Management and includes an overview of the Maternal Health (MH) and Child Health (CH) Chart Audit process. (See Quality Assurance in Section 501.6 (Part B).) (See the Quality Assurance in Section 501.6 (Part B).)

Why complete chart audits?

Completing chart audits is a quality assurance review of documentation practices. Reasons for sound documentation practices are many and varied. Documentation can be used to demonstrate that services are medically necessary, consistently provided, justify billings, and support a standard of care. Documentation can also be used to defend against a legal action if needed.

Chart audits also provide opportunities for quality improvement. They allow for evaluation of current practices within your agency and help to identify areas to further advance quality service delivery. Review of documentation to plan care and provide needed follow-up. It is the main source of communication and information-sharing among nurses, social workers, dental hygienists, dietitians and other care givers as they coordinate client care.

What services are reviewed in a chart audit?

MH and CH chart audits are required each year for direct care health services billed to Iowa Medicaid over the previous 12 months. Maternal Health Center services include Medicaid prenatal risk assessments, health education, psychosocial services, nursing and social work home visits, nutrition counseling, nursing assessments, interpreter services, local transportation, oral health screens, fluoride varnish, sealants, prophylaxis, nutritional counseling for the control and prevention of oral disease, tobacco counseling for the control and prevention of oral disease, radiographs, and oral hygiene instruction.

Child Health Screening Center services include the full well child screen, immunization administration and related counseling, blood lead testing and analysis, vision and hearing screening, nursing and social work home visits, therapeutic nutrition counseling, nursing assessments, developmental tests, evaluation

continued on next page

Maternal Health and Child Health Direct Service Chart Audits *continued*

and management, interpreter services, local transportation, oral health screens, fluoride varnish, sealants, prophylaxis, nutritional counseling for the control and prevention of oral disease, oral evaluation and counseling with primary caregiver- - for patient under 3 years of age, radiographs, and oral hygiene instruction.

Internal or joint chart audit?

For MH and CH contractors, at least one self-conducted chart audit is required each year. The review is conducted by a multidisciplinary team that represents the disciplines providing the direct care clinical services. If the audit is conducted by staff within the MH and/or CH agency, it is considered an *internal audit*. In the alternate year, a *joint audit* is required. The review team for a joint audit consists of staff from the MH and CH agency in addition to staff from the Bureau of Family Health and Oral Health Center. Involving subcontractors in the audit process is encouraged.

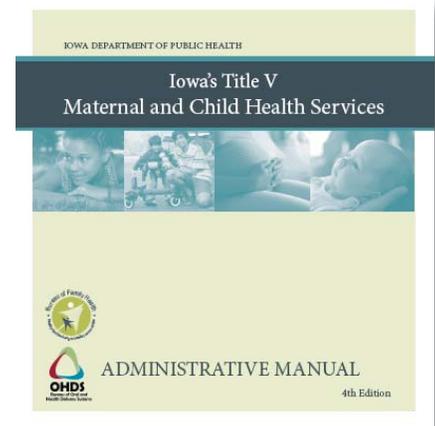
Where do we find MH and CH Chart audit guidelines and forms?

MH and CH Chart Audit Guidelines, Tools, and Summary Forms are found on the Maternal and Child Health Project Management website at www.idph.state.ia.us/hpcdp/mch_costing.asp. Use password Hp3!Yt5m. Criteria within the chart audit tools are based upon requirements for documenting services established by the Iowa Department of Human Services. (See IAC 441-79.3 also found on this website.) Tools for FFY 2013 Chart Audits will be posted early in 2013.

When are MH and CH Chart Audit reports due to IDPH?

Chart Audit results are due to the Bureau of Family Health by April 15, 2013. The completed MH and CH Chart Audit Summaries are to be posted on SharePoint under 'Completed Reports'.

We appreciate the time and effort that Title V agencies invested in the FFY 2012 MH and CH Chart Audit process. Many agencies have been working hard on creating and revising forms for direct care documentation. If you have other questions regarding chart audits, please contact your lead MCH or Oral Health consultant!



Administration/Program Management

IME Informational Letter #1151: Use of the 'U8' Modifier - State Supplied Vaccines

The Iowa Medicaid Enterprise has released Informational Letter #1151, which establishes a policy for billing Medicaid for vaccines in situations where there is a statewide shortage of vaccine in the Vaccine for Children program. See Informational Letter #1151 on page 8 of **The UPDATE**.

All providers are required to participate in the VFC program in order to bill vaccine administration for covered vaccines. Occasionally, there are situations when there is a statewide shortage of an individual vaccine. In those situations, the IME now has the authority to reimburse providers who are enrolled in the VFC program for vaccines administered when the Iowa Department of Public Health stock is depleted ***without an exception to policy***. IDPH will notify the IME when this situation occurs, and the IME will notify providers via an informational letter. Reimbursement will be made at the currently published fee schedule rate. The current fee schedule rates are available at www.ime.state.ia.us/Reports_Publications/FeeSchedule.html.

Billing

In the situation outlined above, providers will be instructed to append with the 'U8' modifier when billing children's vaccine codes, only after the date provided by IDPH that the statewide stock is depleted. The 'U8' modifier is to be appended only to indicate that the vaccine administered is from the provider's private stock after the IDPH stock is depleted and is not to be used for any other purpose.

When billing with the 'U8' modifier, the claim must be:

1. Submitted with the 'U8' modifier appended to the appropriate CPT/HCPCS code(s).
2. Include sub-charges for each line item / vaccine code billed.

Reimbursement at the fee schedule rate will only occur when line item sub-charges are equal to or greater than the IME fee-schedule rate. Claims submitted after the IDPH stock is depleted without the 'U8' modifier appended will result in non-payment of the vaccine codes billed.

If you have questions, please contact the IME Provider Services Unit at 1-800-338-7909 Option 5 (or 515-256-4609 in the Des Moines area) or by email at imeproviderservices@dhs.state.ia.us.

Calendar

October 16-17, 2012

***Bureau of Family Health Fall Seminar**

Gateway Hotel and Conference Center, Ames

* Required meeting

JULY

Contract Required Due Dates

1- Changes CARES Password

12 - FP Client Visit Records

15 - Electronic Expenditure
Workbooks

15 MCH/FP Activity
Worksheet Revision

30 Export WHIS Records to
IDPH

30 Dental Data Report

30 *hawk-i* Outreach
Quarterly Progress Report



THE UPdate



Bureau of Family Health: 1-800-383-3826
Teen Line: 1-800-443-8336
Healthy Families Line: 1-800-369-2229
FAX: 515-242-6013

NAME	PHONE	E-MAIL
Beaman, Janet	281-3052	janet.beaman@idph.iowa.gov
Boltz, Rhonda	281-4926	rhonda.boltz@idph.iowa.gov
Brown, Kim	281-3126	kim.brown@idph.iowa.gov
Connet, Andrew	281-7184	andrew.connet@idph.iowa.gov
Couch, Roger	281-4653	roger.couch@idph.iowa.gov
Cox, Jinifer	281-7085	jinifer.cox@idph.iowa.gov
Dhooge, Lucia	281-7613	lucia.dhooge@idph.iowa.gov
Ellis, Melissa	242-5980	melissa.ellis@idph.iowa.gov
Goebel, Patrick	281-3826	patrick.goebel@idph.iowa.gov
Greene, Mary	725-0047	mary.greene@idph.iowa.gov
Hageman, Gretchen – <i>Bureau Chief</i>	745-3663	gretchen.hageman@idph.iowa.gov
Hobert Hoch, Heather	281-6880	heather.hobert@idph.iowa.gov
Horak, Shelley	281-7721	shelley.horak@idph.iowa.gov
Horras, Janet	954-0647	janet.horras@idph.iowa.gov
Hummel, Brad	281-5401	brad.hummel@idph.iowa.gov
Johnson, Marcus	242-6284	marcus.johnson-miller@idph.iowa.gov
Kappelman, Andrea	281-7044	andrea.kappelman@idph.iowa.gov
Mauch, Sarah	725-2289	sarah.mauch@idph.iowa.gov
Montgomery, Juli	242-6382	juliann.montgomery@idph.iowa.gov
O'Hollearn, Tammy	242-5639	tammy.ohollearn@idph.iowa.gov
Pearson, Analisa	281-7519	analisa.pearson@idph.iowa.gov
Piper, Kim	720-4925	kimberly.piper@idph.iowa.gov
Rasmusson, Addie	281-6071	addie.rasmusson@idph.iowa.gov
Steffen, Esha	725-2160	esha.steffen@idph.iowa.gov
Suginaka, Caitlin	725-2829	caitlin.suginaka@idph.iowa.gov
Trusty, Stephanie	281-4731	stephanie.trusty@idph.iowa.gov
Vierling, Sonni	281-8284	sonni.vierling@idph.iowa.gov
West, PJ	229-9976	pj.west@idph.iowa.gov
Wheeler, Denise	281-4907	denise.wheeler@idph.iowa.gov
Wolfe, Meghan	242-6167	meghan.wolfe@idph.iowa.gov

Area code is 515



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1151

DATE: July 10, 2012

TO: Iowa Medicaid Hospital, Physician, Pharmacy, Nurse Practitioners, Screening Centers, Family Planning Clinics, Maternal Health Centers or other Providers Billing on the Professional Claim Form (CMS1500)

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

SUBJECT: Use of the "U8" Modifier – State Supplied Vaccines

EFFECTIVE: June 1, 2012

All providers are required to participate in the Vaccines for Children (VFC) program in order to bill vaccine administration for covered vaccines. There are situations when there is a state wide shortage of an individual vaccine. In those situations the IME now has the authority to reimburse providers who are enrolled in the VFC program for vaccines administered when the Iowa Department of Public Health (IDPH) stock is depleted without an exception to policy. The IDPH will notify the IME when this situation occurs and the IME will notify providers via an Informational Letter. Reimbursement will be made at the currently published fee schedule rate. The current fee schedule rates are available at:

http://www.ime.state.ia.us/Reports_Publications/FeeSchedule.html .

BILLING:

In the situation outlined above providers will be instructed to append the "U8" modifier when billing children's vaccine codes, only **after** the date provided by IDPH that the statewide stock is depleted. The "U8" modifier is to be appended **only** to indicate that the vaccine administered is from the provider's private stock after the IDPH stock is depleted and is not to be used for any other purpose. When billing with the "U8" modifier, the claim must be:

1. Submitted with the "U8" modifier appended to the appropriate CPT/HCPCS code(s).
2. Include sub-charges for each line item / vaccine code billed. Reimbursement at the fee schedule rate will only occur when line item sub-charges are equal to or greater than the IME fee-schedule rate.

Claims submitted after the IDPH stock is depleted without the "U8" modifier appended will result in non-payment of the vaccine codes billed.

If you have any questions please contact the IME Provider Services Unit at 1-800-338-7909, or locally in Des Moines at 515-256-4609 or email at imeproviderservices@dhs.state.ia.us.