



UNIVERSAL **Voices**

The Universal Health Care Provider Newsletter

July 2009

ERA Available At Universal

Electronic Remittance Advice (ERA) is an electronic communication containing claim payment information that can be easily viewed or printed. It is intended to replace your paper *Explanation of Benefits* (EOB) statement. Since it is available online, the ERA gives you access to the important information it contains, instead of having to wait for a mailed hard copy of the EOB.

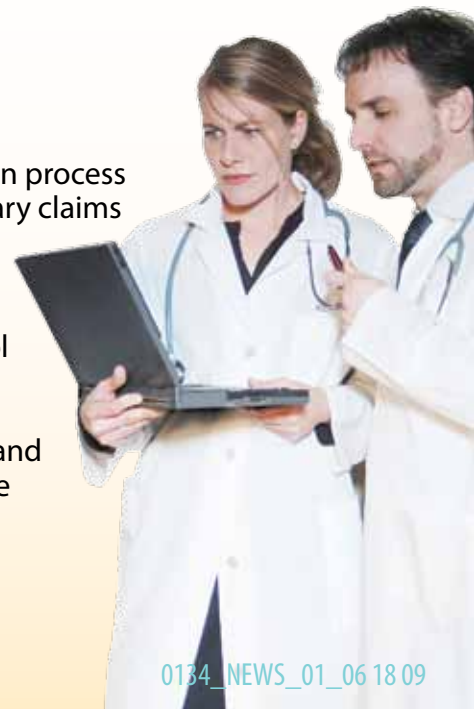
We pay claims using an outside vendor, Emdeon. Emdeon's ERA service can shorten the reimbursement cycle and streamline workflow. ERA can also improve your office productivity by knowing in advance which claims have been paid and in what amount, as well as process your secondary claims much faster and shorten the number of days your receivables are outstanding. ERAs are returned in a consistent and easy-to-understand format and you can quickly search, view, or print each remittance as needed.

To be eligible for this service, the Universal provider must be actively submitting Electronic Data Interchange (EDI) claims to Emdeon.

The Benefits of Using the Emdeon ERA System:

- Streamlines the reconciliation process
- Faster processing of secondary claims
- Increases productivity and efficiency
- Improves cash flow
- Web-based user-friendly tool for viewing payment and remittance information
- Central location for storage and retrieval of remittance advice

To register with Emdeon for this service, please visit their website at www.emdeon.com.



Child Health Check-Up

The Child Health Check-Up (CHCUP) program is Florida's name for the federal Early Periodic Screening, Diagnosis, and Treatment (EPSDT) Program.

A CHCUP provides an excellent opportunity for prevention and/or early intervention of physical, behavioral, and developmental conditions. CHCUP exams are available for children in Florida from birth to 21 years of age.

Lead Screening: The federal standards for a Child Health Check-Up require that all Medicaid children receive a screening blood lead test at 12 months and 24 months of age, and between the ages of 36 months and 72 months of age if they have not been previously screened for lead poisoning. The procedure code for blood lead testing is 83655.

Dental Referrals are required beginning at three years of age and earlier as medically indicated. Providers must refer Medicaid children who are three years old or older for an assessment by a dentist and document this referral in the child's medical record.

Referral Codes: A CHCUP referral code is required on the claim form and must be appropriate for the diagnosis code on



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Scheduling & CPT Coding for Routine Well-Child Check-Ups

Child Health Check-Ups. For example, a diagnosis code of V20.2 (routine infant or child health check) would be appropriate with a referral code “U” or “NU” (complete normal/no referral), but is not appropriate with a referral code of “T” or “ST” (abnormal, patient referred).

Include Well-Child Codes Even if Primary Intent of Visit Was for Sick Care.

According to health plan rules, well-child services may be rendered during visits for acute care, regardless of the primary intent of the visit. Providers should use discretion in evaluating the degree of illness to determine if the well-child services are appropriate.

A diagnosis code is required for reimbursement of a Child Health Check-Up service.

Child Health Check-Up Periodicity Schedule

CHCUP visits should be scheduled at the following intervals:

Child Health Checkup Age		CPT Codes & Modifiers	
		New Patient Initial Evaluation	Established Patient Periodic Evaluation
Infant & Early Childhood Exams	Neonatal exam	99431, 99432, 99435	N/A
	By 1 month		
	2 months		
	4 months	99381	99391
	6 months		
	9 months		
	12 months		
	15 months	99382	99392
Yearly Exams	18 months		
	2 - 4 Years		
	5 - 11 Years	99383	99393
	12 - 17 Years	99384	99394
	18 - 20 Years	99385 EP*	99395 EP*

*Note: The EP modifier must be used with CPT Code 99385 & 99395.

Source: Florida Medicaid Child Health Check-up Coverage and Limitations Handbook, Agency for Health Care Administration.

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Our website is full of
useful health information

www.univhc.com

If you have questions, concerns
or would like more information,
please contact Universal Health
Care's Member Services at


1-866-690-4842

TTY (for the hearing impaired)

1-800-617-0177

Monday - Friday
8:00 AM - 8:00 PM ET

Universal Wants You



Universal Health Care's Credentialing
Department is now accepting new
Credentialing Committee Members.
This multidisciplinary Committee
–composed of both primary care
and specialty care providers – meets
telephonically once a month.

**Membership is free, and
Members are reimbursed for
their participation.**

1. The membership term is for a
period of two years.
2. Members are responsible for
peer review of providers that
apply for participation in the
Universal provider network.

If interested, please contact Lutricia
Foster, Credentialing Manager,
at 727-456-6516 for additional
information.

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Case Management
1-866-616-6398

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