# MO HealthNet and Show Me Healthy Kids

Collaboration Training for Comprehensive Community Support Partners
January 26, 2023

MoHealth Net

# Objectives

Welcome to the MO HealthNet Division (MHD) portion of the this training collaboration with the Show Me Healthy Kids (SMHK) program. Today we will cover the following:

**Show Me Healthy Kids**
Background on SMHK

**Eligibility**
When and how to check eligibility

**SMHK Goals and Services**
Goals and Services of SMHK

**Third Party Liability**
Explanation to TPL and how it works

**MHD Resources**
Resources offered to MHD Providers

**Contact Information**
Contacts for assistance with billing

# Show Me Healthy Kids

The Show Me Healthy Kids (SMHK) Managed Care Health Plan began on July 1, 2022 and provides coordinated medical and behavioral health care services for certain children and youth in Missouri. MHD has moved eligible children into one health care plan – SMHK managed by Home State Health. The SMHK health plan includes the same healthcare coverage as the MO HealthNet fee-for-service (commonly know as straight Medicaid) and other Medicaid managed care plans plus additional benefits specifically designed for the eligible population.

# SMHK Background, Mission and Goals
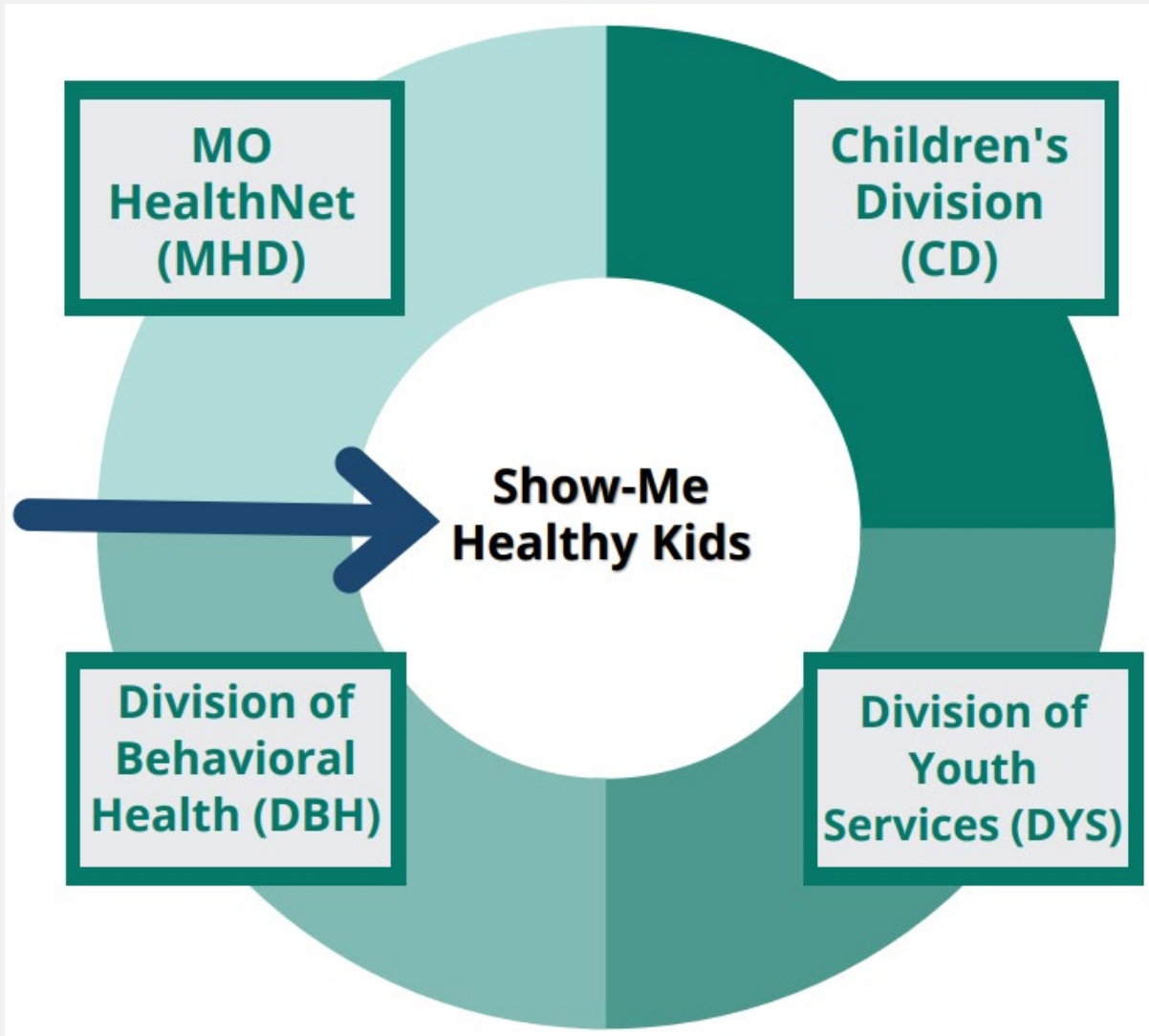


Specialized Managed Care for youth who are in DSS custody, former foster children and individuals receiving adoption and guardianship subsidies.

The initiative was to implement a specialty care plan for these youth and to establish a more integrated approach to meeting the physical and behavioral health needs of the members.

# Show Me Healthy Kids Services

Childhood Immunizations

Inpatient Services

Emergency Services

Asthma Education

In Home Environmental Assessments

Chiropractic Services

Dental Services

Vision Services

Lead Poisoning Prevention Services

Regular Medical Checkups and Office Visits

Behavioral Health Care

Hospital Coverage

Telemedicine

Care Management and Care Coordination

**Medical Health Services** + **Behavioral Health Services** + **Care Management & Coordination**

# MO HealthNet Resources

MO HealthNet offers many resources and trainings to assist providers. Visit the MO HealthNet Provider Page for the resources below and more.

MO HealthNet Provider Bulletins

MO HealthNet SMHK Website

**MHD Resources**

MO HealthNet Provider Hot Tips

MO HealthNet Education Resources

# MO HealthNet News

Stay Informed

- Provider Bulletins
- Provider Hot Tips
- Email Blasts
- Alerts
- Notifications
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Sign Up and Stay Connected
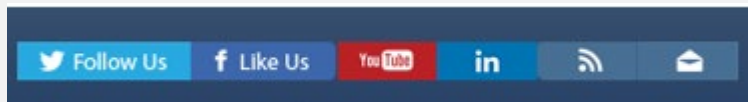
# Provider Bulletin Vol 44, Number 49

**Missouri Department of SOCIAL SERVICES**

**MoHealth Net**

## PROVIDER BULLETIN

| Volume 44 Number 49 | http://dss.mo.gov/mhd/ | June 10, 2022 |
|---|---|---|

### SHOW ME HEALTHY KIDS

### ENROLLMENT AND CREDENTIALING OF RESIDENTIAL FACILITIES AND TREATMENT FOSTER CARE PROVIDERS

**Applies to:**

- **Qualified Residential Treatment Programs (QRTP)**
- **Residential Treatment Agencies for Children and Youth**
- **Child Placing Agencies Delivering Treatment Foster Care Services**

**Effective date: June 19, 2022**

- **CHANGES IN PAYER SOURCE FOR COMPREHENSIVE COMMUNITY SUPPORT REHABILITATION SERVICES**
- **PHASED IMPLEMENTATION**
- **ENROLLMENT INSTRUCTIONS**
- **CREDENTIALING WITH SMHK/HOME STATE HEALTH**
- **APPLICABILITY**

- Notify providers of new or updated policies

- Clarify existing policies

- Advise of important program information, rate changes, and new/changed procedure codes

# Provider Bulletin Vol 45 Number 9

## SHOW ME HEALTHY KIDS

### BILLING PRACTICES FOR RESIDENTIAL FACILITIES AND TREATMENT FOSTER CARE PROVIDERS

**Applies to:**

- **Qualified Residential Treatment Programs (QRTP)**
- **Residential Treatment Agencies for Children and Youth**
- **Child Placing Agencies Delivering Treatment Foster Care Services**

**Effective date: October 1, 2022**

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- **CHANGE IN PAYER SOURCE FOR COMPREHENSIVE COMMUNITY SUPPORT REHABILITATION SERVICES**
- **PARTICIPANT ELIGIBILITY VERIFICATION**
- **PRIOR AUTHORIZATION PROCESS**
- **INTERNET ELECTRONIC CLAIM SUBMISSION**
- **CMS-1500 CLAIM FORM**
- **PROCEDURE CODES, LIMITATIONS, AND RATES**
- **APPLICABILITY**

Effective October 1, 2022, residential and treatment foster care providers began submitting claims for CCS rehab per diem to SMHK, or to MHD fee-for-service (FFS), depending on the individuals coverage.

# Provider Bulletin Vol. 45 Number 33

**PROVIDER BULLETIN**

| Volume 45 Number 33 | http://dss.mo.gov/mhd/ | December 28, 2022 |
|---|---|---|

## SHOW ME HEALTHY KIDS

## RESIDENTIAL BILLING UPDATE – ABOVE LEVEL 4

**Applies to:**

- **Qualified Residential Treatment Programs (QRTP)**
- **Residential Treatment Agencies for Children and Youth**

**Effective date: January 1, 2023**

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- **PROCEDURE CODES, LIMITATIONS, AND RATES**
- **APPLICABILITY**

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### PROCEDURE CODES, LIMITATIONS, AND RATES

The procedure code and modifier combinations below have been updated to include above level IV services. Effective for dates of service on and after January 1, 2023, these codes will be used by Show Me Healthy Kids (SMHK) and MO HealthNet Division (MHD) fee-for-service for comprehensive community support (CCS) rehab services.

All of these procedure codes have a limit of one (1) unit per day and a maximum quantity of 31 units per claim line. Providers may bill for a date range of up to 31 days on one claim line. The table below provides the MHD fee-for-service maximum allowable rates for each procedure code and modifier combination.

All of these procedure codes have a limit of one (1) unit per day and a maximum quantity of 31 units per claim line. Providers may bill for a date range of up to 31 days on one claim line. The table below provides the MHD fee-for-service maximum allowable rates for each procedure code and modifier combination.

Any updates to the fee-for-service rates will be published in the "Other Medical" category of the MHD fee schedule at https://dss.mo.gov/mhd/providers/pages/cptagree.htm. The services below are covered only for participants with the following medical eligibility codes: (Children's Division: 07, 08, 37, 38, 66, 0F; Adoption/Guardianship Subsidy: 36, 56, 57 5A).

| Facility Type | Level 2 | | Level 3 | | Level 4 | | Above Level 4 | |
|---|---|---|---|---|---|---|---|---|
| | Code | Rate | Code | Rate | Code | Rate | Code | Rate |
| QRTP | H0019 HK | $89.87 | H0019 TF HK | $90.06 | H0019 TG HK | $118.38 | H0019 TJ HK | $258.38 |
| Non-QRTP | H0019 HA | $78.35 | H0019 TF HA | $78.52 | H0019 TG HA | $103.21 | H0019 TJ HA | $243.21 |

| Procedure Code | Standard Description |
|---|---|
| H0019 | Behavioral health; long-term residential (non-medical, non-acute care in a residential treatment program where stay is typically longer than 30 days), without room and board, per diem |

# Provider Hot Tips



## 2022 MO HealthNet Provider Hot Tips

home » mo healthnet division » providers » pages » provtips

The MO HealthNet Division publishes Hot Tips to supply information to clarify and assist in receiving timely reimbursement for services provided and claims disposition.

MO HealthNet has developed an index for historical and ongoing Hot Tips and a COVID-19 index for associated Hot Tips. The non-COVID-19 index location has not moved; it is also located below for quick reference.   Please share these Hot Tips with your billing staff.

### Hot Tip Indices

- Hot Tip Index By Topic/Subject

### 2022 Provider Tips Index

- Lost or Destroyed Medical Records
- Applied Behavior Analysis (ABA) Billing
- Launch of the MO HealthNet Division Show Me Healthy Kids (SMHK) Webpage
- The Cuff Kit™ Project Information
- Diabetes Prevention Program Services for Adults
- Telemedicine : Here to stay!
- Reminder for Children's Division Residential and Treatment Foster Care Providers
- New Resources and Training Materials for Providers
- Health Help On-Demand Training Sessions!
- RSV Prophylaxis

- Billing questions

- Clarify existing policies and processes

- Provider Resources

# Provider Hot Tip Posted Oct 12, 2022

## Launch of the MO HealthNet Division Show Me Healthy Kids (SMHK) Webpage

October 12, 2022

The MO HealthNet Division (MHD) launched a dedicated webpage for the Home State Health Show Me Healthy Kids (SMHK) managed care health plan. SMHK is a specialized health plan that provides integrated medical health, behavioral health, and care management services to children and youth in the care of the state, receiving adoption or guardianship subsidy assistance, or persons under age 26 formerly in foster care. The MHD SMHK webpage provides a brief overview of the health plan, covered services, member support services, and external links to the Home State Health member handbook and member resources (e.g., online provider directory).  Please visit **https://mydss.mo.gov/smhk** to learn more about the SMHK managed care health plan.

# Provider Resource Guide

MoHealthNet

The Provider Resource Guide provides an overview of MO HealthNet Programs, provides MO HealthNet contact information, shows limited and comprehensive benefits and descriptions of Medical Eligibility (ME) codes.

## PROVIDER RESOURCE GUIDE

### MO HealthNet: Missouri's Medicaid Program

The MO HealthNet Division (MHD) provides health care access to low income individuals that are elderly, disabled, and members of families with dependent children, children in low-income families, uninsured children, pregnant women, refugees or children in state custody.

Services are received through a Fee-For-Service (FFS) or Managed Care (MC) delivery system.

**Fee-For-Service Providers**

The **MO HealthNet FFS** program serves eligible participants with disabilities, seniors, blind and visually impaired and women with breast or cervical cancer. All MO HealthNet providers may serve MO HealthNet FFS participants. Participants may freely choose which MO HealthNet provider they go to for care under the FFS delivery system.

Serves:
- People with Disabilities
- Seniors
- Blind & Visually Impaired
- Women with Breast or Cervical Cancer

The **MO HealthNet MC** program serves eligible children, pregnant women, newborns, uninsured women and families in every Missouri county. MO HealthNet MC participants may be seen by any MO HealthNet FFS provider until their enrollment is effective in a MO HealthNet MC health plan. MO HealthNet MC participants must select a health plan and a Primary Care Provider (PCP) within the MC health plan. MC providers may refer the participants to other providers based on the care needed.

**Managed Care Providers**

Serves:
- Kids
- Pregnant Women & Newborns
- Families

**MO HealthNet for Kids** refers to the statewide program for children in low-income families, uninsured children through Children's Health Insurance Program (CHIP) and children in the custody of the state. Children receive a full comprehensive package including primary, acute, preventive care, hospital care, dental, prescriptions, and vision. They receive their care through the MC delivery system, unless they have opted out of MC. For information on opting out, refer to the criteria.

The **CHIP Premium Group** is health insurance for uninsured children who must be under age 19, have a family income of 150+ to 300% of the federal poverty level, and have no access to affordable health insurance. Questions about premiums should be directed to the Participant Services Unit at (800) 392-2161.

Providers can **determine eligibility** and which program participants are in online at eMOMED or by calling the Interactive Voice System (IVR) at 573-751-2896, Option 1.

Review the Information for Providers website and Frequently Asked Questions for more information on MHD.

To receive important MO HealthNet updates, subscribe to MO HealthNet News.

## MO HEALTHNET RESOURCES

### Clinical Services
Clinical Services is responsible for clinical policy development for the MHD. For questions about clinical policy providers should contact MHD.ClinicalServices@dss.mo.gov or visit the Pharmacy and Clinical Services site.

### Cost Recovery/Third Party Liability
Contact the Third Party Liability unit at TPL.Database@dss.mo.gov or call (573) 751-2005 to report:

- Injuries sustained by MO HealthNet participants
- Questions about the estate of a deceased MO HealthNet participant
- Problems obtaining a response from an insurance carrier
- Unusual situations concerning third party insurance coverage for MO HealthNet participants, or the Health Insurance Premium Payment Program (HIPP)

For more information, visit the Family MO HealthNet Manual, TPL Information for Providers, or take the MHD Education and Training TPL Course.

### Education and Training
Education and Training instructs providers on navigating provider resources, proper billing methods and procedures for claim filing via eMOMED. Contact Education and Training at MHD.Education@dss.mo.gov or call (573) 751-6683. Visit Education and Training Resources to register for training and to access additional resources.

### FSD Spend Down Unit
Providers may submit incurred medical expenses on behalf of the participant using the MO HealthNet Spend Down Provider form. Providers should email the form, including any receipts or bills, to sesd@ip.sp.mo.gov or fax to (855) 600-3754. For questions, contact Spenddown.Unit@dss.mo.gov or call (855) 600-4412. Visit Spend Down Pay-In FAQs for more information.

### Managed Care Plans

| Health Plan | Contact Information |
| --- | --- |
| Healthy Blue | 1-833-388-1407 www.healthybluemo.com |
| UnitedHealthcare | 1-866-292-0359 www.uhc.com |
| home state health | 1-855-694-4663 www.homestatehealth.com |

### Managed Care Liaison
If providers are unable to resolve a Managed Care issue directly with a health plan, contact a Managed Care Liaison at MHD.MCCommunications@dss.mo.gov. For more information on Managed Care Plan, visit Managed Care Providers.

## MEDICAL ELIGIBILITY (ME) CODES

Adult participants in ME categories for Aid to the Blind or pregnant women programs receive a full comprehensive benefit package which includes: primary, acute and preventive care, hospital care, dental, prescriptions, and vision. All other adult participants receive a limited benefit package of services depending on their ME category.

### Full Comprehensive Package for MO HealthNet Adults

| ME Code | Description | ME Code | Description |
| --- | --- | --- | --- |
| 03 | Aid to the Blind | 45 | Pregnant Woman—Poverty |
| 12 | MO HealthNet Aid to the Blind | 61 | MO HealthNet for Pregnant Women—Health Initiative Fund |
| 15 | Supplemental Nursing Care—Aid to the Blind | 95 | Show-Me Healthy Babies Pregnant Women income above 196% and up to 300% |
| 18 | MO HealthNet for Pregnant Women | 96 | SMHB Unborn Child income 0 to 300% |
| 43 | Pregnant Woman—60 Day Assistance (MO HealthNet for Families criteria) | 98 | SMHB Post-Partum |
| 44 | Pregnant Woman—60 Day Assistance—Poverty | | |

### Limited Benefit Package for MO HealthNet Adults

| ME Code | Description | ME Code | Description |
| --- | --- | --- | --- |
| 01 | Old Age Assistance | 26 | Ethiopian Refugee |
| 02 | Blind Pension | 55 | Qualified Medicare Beneficiary (QMB) |
| 04 | Permanently and Totally Disabled | 58 | Presumptive Eligibility (Subsidized) |
| 05 | MO HealthNet for Families—Adult | 59 | Presumptive Eligibility (Non-Subsidized) |
| E2 | Adult Expansion Group | 80 | Extended Women's Health Services |
| 10 | Refugees other than Cuban, Haitian, Russian Jew, or Ethiopian | 81 | Temporary Assignment Category |
| 11 | MO HealthNet—Old Age Assistance | 82 | Missouri Rx (Medicare Part D wrap-around benefits) |
| 13 | MO HealthNet—Permanently and Totally Disabled | 83 | Breast or Cervical Cancer Control Project—Presumptive |
| 14 | Supplemental Nursing Care—Old Age Assistance | 84 | Breast or Cervical Cancer Control Project—Regular |
| 16 | Supplemental Nursing Care—Permanently and Totally Disabled | 85 | Ticket to Work Health Assurance—Premium |
| 19 | Cuban Refugee | 86 | Ticket to Work Health Assurance—Non-Premium |
| 21 | Haitian Refugee | 89 | Uninsured Women's Health Services |
| 24 | Russian Jew Refugee | 94 | Show-Me Healthy Babies—Presumptive Eligibility income to 300% |

MoHealthNet

# MHD SMHK Website



The MO HealthNet SMHK website offers links to Find a Provider, the SMHK Guide, Benefits, FAQs and more.

# Eligibility

Once the provider determines the participant may have or has MO HealthNet eligibility, it is the provider's responsibility to check the participant's eligibility.

This must be done before every visit. Eligibility is updated daily. The participant must be eligible on the date of service.

# Reasons to Check Eligibility

1 Name on file

2 Eligibility on date of service

3 Medical eligibility/Plan code

4 Medicare

5 Commercial Insurance

6 MO HealthNet Managed Care Enrollment

7 Administrative Lock-in

# Where Can I Check Eligibility?

**01** Online in eMOMED

**02** Contact Provider Communications at (573) 751-2896

# Participant Eligibility

# Eligibility Request



Participant Eligibility: Eligibility is Date of Service (DOS) specific. Request eligibility for current or past dates. Try to refrain from spanning dates. Sometimes it is helpful when trying to determine when/if a participant met their spend down during the month.

# General Eligibility

Verify the DCN, Name, and DOB match the participant.

# Coverage Information



**Eligibility / Benefit Information1 of 3**

| Eligibility / Benefit Code | Service Type | Plan Code | Time Period Qualifier | Monetary Amt | Insurance Type | Medicare Nbr | Date Qualifier | From Date Thru Date |
|---|---|---|---|---|---|---|---|---|
| B - Co-Payment | 30 - Health Benefit Plan Coverage | 13 | 7 - Day | ¤0.00 | MC - MO HealthNet | | 291 | 02/02/2020 02/02/2020 |

**Eligibility / Benefit Information2 of 3**

| Eligibility / Benefit Code | Service Type | Plan Code | Time Period Qualifier | Monetary Amt | Insurance Type | Medicare Nbr | Date Qualifier | From Date Thru Date |
|---|---|---|---|---|---|---|---|---|
| 1 - Active Coverage | 30 - Health Benefit Plan Coverage | 13 | 7 - Day | | MC - MO HealthNet | | 291 | 02/02/2020 02/02/2020 |

1) Eligibility/Benefit Code- 1- Active or 6- Inactive
2) Plan Code- ME Code (See Provider Resource Guide for ME code details)
3) Insurance type- MC- MO HealthNet or HM – indicates the patient is locked into Managed Care (Healthy Blue, Home State, or United Health Care.)
3) From Date Thru Date- Eligibility on specified date.

# Benefit Information

# Third Party Liability

MO HealthNet is the payer of last resort when there is the possibility of a third party resource for the payment of a participant's claims. MO HealthNet is not obligated to pay for a participant's medical expenses until other resources have been considered. This is referred to as a Third Party Liability (TPL). TPL is often referred to as the "other payer."

# Examples of Third Party Liability:

1 Automobile – Medical Insurance

2 Tricare

3 Health Insurance (Group/Private)

4 Homeowner's, Liability & Casualty  Insurance

5 Workers' Compensation

6 Malpractice Insurance

7 Medical Support Obligations

8 Medicare

9 Owner, Landlord & Tenant Insurance

10 Probate

11 Trust Accounts for  Medical Services Covered by MO HealthNet

12 Veterans' Benefits

Insert Subtitle Here

# The Purpose of TPL

## MO HealthNet is the Payer of Last Resort

The purpose of TPL is to offset or recover costs to the State of Missouri. MO HealthNet funds are used after all other potential resources available to pay for the medical service have been exhausted. This ensures that tax dollars are not used when another payer is responsible for all or a portion of the medical charges.

**It is to the provider's benefit to bill the liable TPL before billing MO HealthNet because many resources pay in excess of the maximum MO HealthNet allowable amount.**

# Does My Patient Have TPL?

When checking a participant's eligibility in [eMOMED](#) there is information provided about known possible insurance coverage. **This information does not guarantee the insurance(s) listed are the only resources available, nor does it guarantee the coverage is currently active.** If the participant has not updated the Family Support Division of changes, the information in eMOMED may not be accurate.

# Managed Care Health Plans

In the example above the participant has Show Me Healthy Kids listed as the TPL ("other payer"). In this circumstance, the provider should bill Show Me Healthy Kids instead of billing MO HealthNet.

# Participant with Commercial Insurance and Managed Care

The example above shows the participant has a commercial insurance (Cigna) and a MO HealthNet Managed Care plan. The provider would need to bill the Commercial insurance first (Cigna) then the Managed Care health plan.

# Missing or Incorrect TPL Information

Whether the participant is enrolled in Fee-for-Service or a MO HealthNet Managed Care health plan, providers should report missing or incorrect TPL information to MO HealthNet utilizing the [Insurance Resource Report (TPL-4)](#). Once completed, this form should be emailed to the Third Party Liability Unit at [TPL.Database@dss.mo.gov](mailto:TPL.Database@dss.mo.gov).

Providers may also contact the Third Party Liability Unit by calling (573) 751-2005 for additional information.

# More Information on TPL



- Contact *Provider Communications Management* direct messaging tool on eMOMED or by calling (573) 751-2896 (Option 1).

- Contact MHD Education and Training by emailing MHD.Education@dss.mo.gov or by calling (573) 751-6683.

- Contact the Third Party Liability Unit at TPL.Database@dss.mo.gov or by calling (573) 751-2005.

MoHealth Net

# SMHK Resources

On the MHD Education and Training Resources page, please review these SMHK Resources:

- Care Management Overview
- Division of Youth Services Provider Resources
- Family First Prevention Services Act (FFPSA)
- Fee-For-Service Billing and Technical Assistance
- Member Eligibility and Enrollment
- Provider Enrollment Guide
- Provider Resource Guide for Residential and Treatment Foster Home
- SMHK FAQ Guide
- SMHK Overview and Services
- Trauma Informed Resources

# Contact Information

For questions, contact the Managed Care health plan directly.

| Show Me Healthy Kids |
|:---:|
| Show Me Healthy Kids |
| (877) 236-1020 |
| Find a Doctor |
| Show Me Healthy Kids |

MO HealthNet Managed Care Specialists are available to assist providers with resolving issues that are not able to be resolved directly with a Managed Care health plan.

Contact MHD.MCCommunications@dss.mo.gov for assistance.

# MHD Education & Training
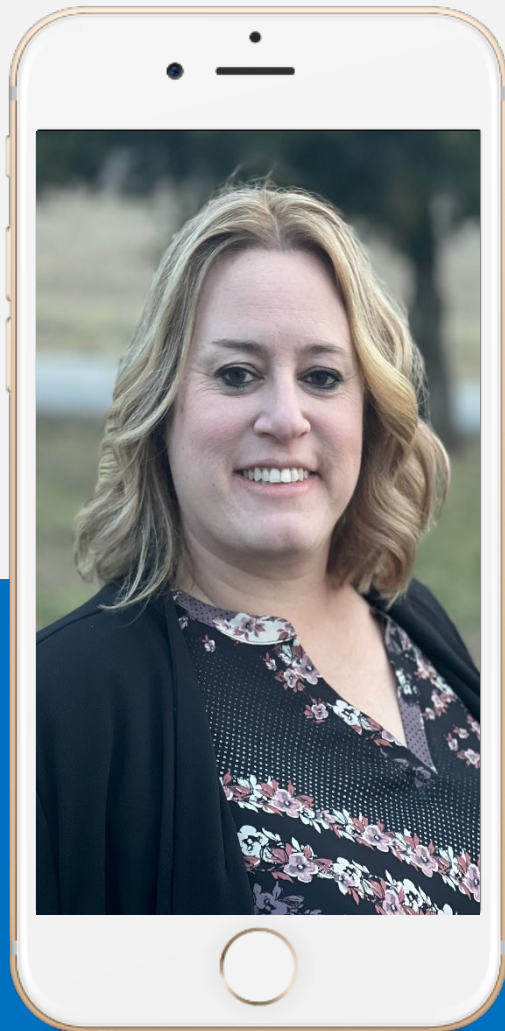
MO HealthNet Education and Training educates providers on navigating provider resources, verifying eligibility, MO HealthNet policy, and filing Fee-For-Service claims through eMOMED . Visit our Provider Training Calendar to sign up for upcoming trainings specific to your program.

Visit our MHD Education and Training Resources for information available to you on all of our resources, 24/7.

MHD.Education@dss.mo.gov

573-751-6683

# Up Next: SMHK Claim & Portal Training

With Home State Health's

Stephanie Hoobing

Jennifer Bennett