



**For additional information,
contact the DSCC Call Center:**

**(877) 791-5170 Toll Free
(217) 785-4728 TTY**

**Visit our Web Page at:
www.uic.edu/hsc/dsc**

UIC **DIVISION OF SPECIALIZED
CARE FOR CHILDREN**

UNIVERSITY
OF ILLINOIS
AT CHICAGO

REIMBURSEMENT GUIDELINES



MEDICAL HOME SERVICES

Effective January 2008

MEDICAL HOME SERVICES

DSCC will reimburse Primary Care Providers (PCP) for care coordination activities not otherwise covered by third party payers that involve the management and development of care plans for children with special health care needs. Documentation of activities is required to justify reimbursement. The information in this brochure outlines the CPT codes supported by DSCC for medical home care coordination activities.

Care Coordination activities include:

- Telephone consultations with parents, the child's pediatric specialist, or physicians from DSCC's Illinois Pediatric Consultant List.
- Time spent with the family and child to develop or monitor management care plans for specialty care.
- Monitoring visits as directed by the child's pediatric specialist.

The following billing guidance must be observed:

- DSCC will not reimburse for routine, preventive or acute health care visits.
- The PCP must be an approved DSCC provider and the patient must be both medically and financially eligible for DSCC support.
- DSCC will supplement reimbursement from private insurance up to the DSCC allowable rate. DSCC will not supplement medicaid reimbursement.
- DSCC requires an Explanation of Benefits from the private payer in order to coordinate payments.
- DSCC is always the payer of last resort.
- Acceptance of DSCC's prior approval for services precludes the PCP from balance charging the patient in excess of DSCC's allowable rate.
- Medicaid will reimburse for office visit codes 99214 and 99215. All other medical home codes should be billed to DSCC.
- DSCC medical home fees are based on a geographic region and a Relative Based Resource Value Schedule (RBRVS). For the allowable rates contact the DSCC Call Center at (877) 791-5170.

REGIONAL OFFICE INFORMATION

Champaign

(217) 333-6528 (Voice)
(800) 779-0889 (Toll Free)
(217) 244-8390 (TTY)

Chicago North

(312) 433-4114 (Voice)
(800) 425-1068 (Toll Free)
(312) 433-4122 (TTY)

Chicago South

(312) 433-4100 (Voice)
(800) 905-9995 (Toll Free)
(312) 433-4108 (TTY)

DuPage

(630) 964-9887 (Voice)
(800) 455-2639 (Toll Free)
(630) 964-9603 (TTY)

Marion

(618) 997-4396 (Voice)
(800) 451-0464 (Toll Free)
(618) 993-2481 (TTY)

North Cook County

(773) 444-0043 (Voice)
(800) 924-0623 (Toll Free)
(773) 444-0178 (TTY)

Olney

(618) 395-8461 (Voice)
(888) 841-3232 (Toll Free)
(618) 392-3869 (TTY)

Peoria

(309) 693-5350 (Voice)
(800) 382-8569 (Toll Free)
(309) 693-5345 (TTY)

Rockford

(815) 987-7571 (Voice)
(800) 651-9319 (Toll Free)
(815) 987-7995 (TTY)

Rock Island

(309) 788-4300 (Voice)
(800) 651-9526 (Toll Free)
(309) 788-6443 (TTY)

St. Clair

(618) 624-0508 (Voice)
(800) 842-7204 (Toll Free)
(618) 624-0544 (TTY)

South Cook County

(708) 482-0633 (Voice)
(800) 425-5454 (Toll Free)
(708) 482-1103 (TTY)

Springfield

(217) 524-2000 (Voice)
(800) 946-8468 (Toll Free)
(217) 524-2011 (TTY)

For reimbursement rates for medical home services, providers may contact the DSCC Call Center:

(877) 791-5170 (Toll Free)
(217) 785-4728 (TTY)
(217) 558-0773 (Fax)
(217) 558-2001 (Springfield)

Preventive Medicine Services (cont.)

In the case of a 5-year-old child, the code would be 99393 and 99214-25. The 99393 code states the physician did a health supervising visit (a 5-year-old child checkup). The 99214 code is typically used to state this was a problem-focused visit, but the modifier “25” allows the physician to use it with 99393. This combination of 99393 and 99214-25 states the physician saw the child for the health supervision visit and also identifies an additional problem that needed to be addressed during the visit.

Office or Other Outpatient Services - Established Patient

Visit that includes medical decision-making based on problem-focused history and a problem-focused examination. Counseling and/or coordination of care are provided consistent with the nature of the problem(s) and the patient’s/family’s needs.

Code	Description - Complexity/Time
99214	Moderate to High Severity/25 minutes
99215	High Severity/40 minutes

Preventive Medicine Services - Established Patient

Use the following CPT codes to bill for preventive medicine services:

Re-evaluation and management of an individual including comprehensive history/examination, anticipatory guidance/counseling, ordering of lab/diagnostic.

Code	Description - Age
99391	Infant/Age 0-1
99392	Early Childhood/Age 1-4
99393	Late Childhood/Age 5-11
99394	Adolescent/Age 12-17
99395	Adult/Age 18-39

Care Coordination Services

Office or Other Outpatient Services - Established Patient

Use the following CPT codes to bill for care coordination activities when the visit is intended to develop a management care plan that addresses a focused problem on an established patient:

Visit that includes medical decision-making based on problem-focused history and a problem-focused examination. Counseling and/or coordination of care are provided consistent with the nature of the problem(s) and the patient’s/family’s needs.

Code	Description - Complexity/Time
99214	Moderate to High Severity/25 minutes
99215	High Severity/40 minutes

Care Plan Oversight Services - Established Patient

Use the following CPT codes to bill for care plan oversight activities for physician supervision of an established patient:

Individual physician supervision of a patient (patient not present) in home, domiciliary or rest home (e.g., assisted living facility) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (e.g., legal guardian) and/or key caregiver(s) involved in patient’s care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month.

Code	Description - Complexity/Time
99339	Monthly Supervision 15-29 minutes
99340	Monthly Supervision 30 minutes or more

Care Coordination Services (cont.)

Use the following CPT codes to bill for care coordination activities when the visit is intended to address a comprehensive management care plan:

Prolonged Physician Services - No Direct Patient Contact

Evaluation/management before and/or after patient care; (review of record/test, communication with professionals, and/or the patient/family).

Code	Description - Time
99358	First 60 minutes
99359	Each additional 30 minutes - List separately in addition to code 99358 for prolonged physician services

Case Management - Interdisciplinary Team

Medical conference with interdisciplinary team of health professionals or community agency to coordinate patient care for medical management.

Code	Description - Time
99366	Team Conference (patient/family present) 30+ minutes
99367	Physician Team Conference (patient/family not present) 30+ minutes
99368 *	Non-physician Team Conference (patient/family not present) 30+ minutes

Case Management - Telephone Consultation

Telephone call by a physician or other qualified health care professional to the parents or for consultation or medical management with other health care professionals. To coordinate a management care plan, to discuss test results in detail, to discuss and evaluate new information and details, or to initiate a new plan of care.

Code	Description - Time
99441	Physician Phone Consult, Brief 5-10 minutes
99442	Physician Phone Consult, Intermediate 11-20 minutes
99443	Physician Phone Consult, Complex 21-30 minutes
98966 *	Non-Physician Phone Consult, Brief 5-10 minutes
98967 *	Non-Physician Phone Consult, Intermediate 11-20 minutes
98968 *	Non-Physician Phone Consult, Complex 21-30 minutes

*NOTE: Non-physician services must be provided by a qualified health care professional.

Preventive Medicine Services

Use the following CPT codes with a modifier of "25" when there is a significant amount of work beyond preventive care for a child with special health care needs:

In situations where the physician is providing preventive medicine services for a DSCC medically/financially eligible child, **DSCC will reimburse for the preventive medicine services based on the following table plus the rate for CPT codes 99214-99215 using the modifier "25"**. This applies only in situations where the modifier is referring to a DSCC medically eligible condition.

The modifier "25" should be used when symptoms requiring significant amounts of physician work beyond preventive care are encountered during a preventive medicine visit of a child with special health care needs. For example, if a significant amount of additional work is required in order to perform the key components of a problem-oriented E/M visit, both the preventive medicine visit and the appropriate office/outpatient visit, with the modifier "25" added, are coded.