



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.

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January is Cervical Cancer Awareness Month

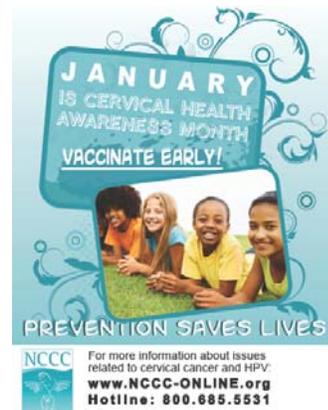
Cervical Health Awareness Month 2012

Each January is recognized as Cervical Health Awareness Month. Each year in the U.S. approximately 12,000 women are diagnosed with cervical cancer, and more than 4,000 lives are lost as a result. This

doesn't take into account the many thousands of women who have cervical abnormalities and abnormal Pap tests for reasons other than cancer, but who still undergo expensive and inconvenient follow-up exams and treatments.

What is Cervical Health Awareness Month?

The United States Congress designated January as Cervical Health Awareness Month. During January, you may wish to highlight issues related to cervical cancer, HPV disease and the importance of early detection. Some of the issues you may wish to are personal stories of women and family members/caregivers battling issues related to their persistent HPV/precancer and/or cervical cancer. You may wish to bring to light recent advances and research in the prevention, detection and treatment of cervical cancer or HPV. You can emphasize the success of your local/regional early detection cervical cancer screening and treatment programs and human-interest stories on the importance of early detection, education and the emotional issues related to battling cervical cancer and HPV.



For more information about Cervical Cancer Awareness Month, go to www.nccc-online.org/awareness.html. Downloadable posters are also available.

CDC 2012 Childhood Immunization Champion Awards

The CDC Childhood Immunization Champion Award is a new annual award that recognizes individuals who make a significant contribution toward improving public health through their work in childhood immunization.

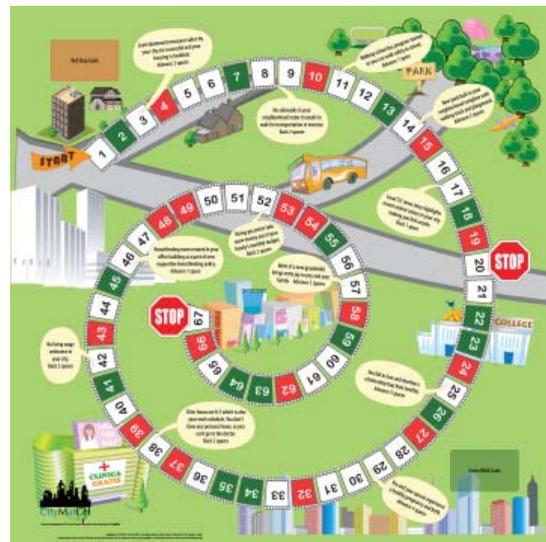
Each year, up to one CDC Immunization Champion from each of the 50 states and the District of Columbia will be honored.

Champions can include health care professionals (e.g., physicians, nurses, physicians' assistants, nurse practitioners, medical assistants, etc.), coalition members, parents, and other immunization leaders who meet the award criteria. State immunization program managers, state and federal government employees (including contractors), and individuals affiliated with and/or employed by pharmaceutical companies are not eligible to apply.

For more information, or to nominate an individual, go to <http://go.usa.gov/RjT>.

Life Course Game

Reminder! The Bureau of Family Health has extra copies of the "Life Course Game" that was used at the Bureau of Family Health Fall Seminar. If your agency is holding a meeting or workshop on life course perspective and needs to borrow extra copies, please contact Marcus Johnson-Miller (marcus.johnson-miller@idph.iowa.gov) or Juli Montgomery (juliann.montgomery@idph.iowa.gov).



Women's Health Website - www.womenshealthiowa.info

This website and toll-free call center was created to provide FREE objective, medically accurate health information for women in Iowa. Browse our database for great resources or take a look at the Health A to Z section for topics such as breast and cervical cancer, osteoporosis, pregnancy and heart disease.

The site includes links to the following information:

- Healthy Living - what you can do
- Healthy Living Over 50
- Child & Adolescent Health
- Family Planning
- Parenting
- Pregnancy
- Mental Health
- Violence
- Multicultural Health

For more information, go to
[www.womenshealthiowa.info!](http://www.womenshealthiowa.info)

Administration/Program Management

Informational Letter #1091: Important HIPAA Transition Information For all Medicaid Members Billing Electronically!

The Iowa Medicaid Enterprise has issued Informational Letter #1091 reminding Medicaid providers that the compliance date for transition to the HIPAA Version 5010 format was **January 1, 2012**. All covered entities submitting electronic transactions were to upgrade from Version 4010/4010A to Version 5010 by this date.

As of January 10, 2012 the IME's electronic claim volume is normal, and 85 percent of electronic claims are being submitted and processed in version 5010. The IME thanks all providers who have met the compliance timeline!

The IME acknowledges that the Centers for Medicare & Medicaid Services' Office of E-Health Standards and Services announced that it would not initiate enforcement action until March 31, 2012, with respect to any HIPAA covered entity that is not in compliance with the 5010 requirement. **However, the IME emphasizes that the compliance date itself has not actually changed, and IME urges all covered entities that are not compliant with 5010 take steps to become compliant immediately.**

How to transition to the 5010 format

Guidelines for transition to the 5010 format in the form of a checklist are found on the EDISS website at www.edissweb.com/docs/shared/5010_checklist.pdf. The checklist is organized into three sections:

- Direct providers not using PC-ACE Pro32
- Direct providers using PC-ACE Pro32
- Providers sending files through a clearinghouse or billing service

To begin preparation for the transition, follow the section of the guidelines that is applicable to your agency.

Providers may submit in the 4010 format after the January 1, 2012 deadline, but must initiate the 5010 transition with Iowa Medicaid's Electronic Data Interchange Support Services. They should also prepare an action plan for compliance and submit the plan to the IME via email to imeproviderservices@dhs.state.ia.us. The plan should include the primary point of contact for follow up (name, title, phone number and email address).

EDISS is experiencing extremely high call volumes. If you have attempted to reach them and are having difficulty getting through, please take a moment to review their website for additional resources (user guides, tutorials and presentations) that can assist you in the recertification process. The EDISS website is www.edissweb.com.

See Informational Letter #1091 on pages 7-9 of **The Update** for further detail. Information is also available at www.cms.gov/ICD10, which provides the latest news and resources to help you prepare for the transition to both the 5010 format and ICD-10 codes. If you have questions, please contact IME Provider Services at 1-800-338-7909 (in the Des Moines area at 515-256-4609) or by email at imeproviderservices@dhs.state.ia.us.

Administration/Program Management

Informational Letter #1092: Developmental Services Procedure Codes 96110 and G0451

The Iowa Medicaid Enterprise has issued Informational Letter #1092 which addresses changes in coding and definition for developmental services. (See page 10 of **The UPDATE.**) This is a topic that was discussed at the Grantee GoToWebinar held on January 19, 2012.

As described in the letter, two key changes have occurred **effective January 2012**.

- CMS added a new HCPC code **G0451** defined as **developmental testing with interpretation and report using a standardized instrument**. This is the service that Child Health Screening Centers provide when they administer tools such as the ASQ/ASQ-SE. (Note that these services were formerly billed as CPT code 96110.)
 - If you administer such tools and record appropriate documentation (including interpretation and report), services provided as of January 1, 2012 **should now be billed as G0451**.
 - Medicaid's maximum reimbursement for G0451 for Screening Centers will be the same as rate formerly used for 96110 = \$56.51.
 - A revision of your FFY 2012 Cost Analysis will **not** be required since the cost of this service was already determined under the former 96110 code.
- The CPT 96110 code has been redefined as **developmental screening with interpretation and report using a standardized instrument**. An example would be a 3-4 question **validated** tool. (Note that this code would not apply to the developmental section of the Iowa Child Health and Development Record (CHDR) because this is not a validated tool.)

The Informational Letter also addressed CPT code 96111 – developmental testing involving assessment of motor, language, social, adaptive, and/or cognitive functioning by a standardized developmental instrument. Note that this is a higher level **assessment**. This code is not open to Child Health Screening Centers. (This code does not pertain to the administration of the DAYC under Early ACCESS.)

To summarize:

- Developmental tests such as the ASQ/ASQ-SE (with appropriate documentation) should be billed as G0451 for services provided January 1, 2012 and thereafter.
- The DAYC completed for Early ACCESS does not fit any codes referenced in the Informational Letter. The provision of the DAYC is billable as a care coordination service for our CH agencies. (See the Early ACCESS Matrix on the MCH Project Management Tools website.)
- The developmental section of the Iowa Child Health and Development Record (CHDR) does not fit any codes referenced in the Informational Letter. Addressing the developmental section of the Iowa CHDR is billable as a care coordination service for our CH agencies.

If you have questions, feel free to contact Janet Beaman at janet.beaman@idph.iowa.gov or (515) 281-3052. You can also contact IME Provider Services at 1-800-338-7909 (in the Des Moines area at 515-256-4609) or by email at imeproviderservices@dhs.state.ia.us.

Calendar

February 8-9, 2012

18th Early Childhood Iowa Congress

Wednesday, February 8

ECI Stakeholders Meeting: Airport Holiday Inn, Des Moines, IA

Day on the Hill: Capitol, Visit Legislators

Dinner/Speaker: Airport Holiday Inn, Des Moines, IA
Nancy Amidei, Child Advocate, Seattle, WA

Thursday, February 9

ECI Congress: Airport Holiday Inn, Des Moines, IA

Keynote Speakers: Karen Brandi & Marsha Guthrie,
Children Services Council of Palm Beach, FL

Sari Gupta, PhD, PEW Charitable Trust, Washington, DC

April 17-18, 2012

2012 Iowa Governor's Conference on Public Health

Scheman Conference Center, Ames

* Required meeting

FEBRUARY Contract Required Due Dates

1 - I-Smile™ Needs
Assessment

13 - FP Client Visit Records

28 Export WHIS Records to
IDPH



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

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Area code is 515



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1091

DATE: January 17, 2012

TO: All Iowa Medicaid Providers Billing Electronically

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

RE: Important 5010 HIPAA Transition Information

EFFECTIVE: January 1, 2012

The technical compliance date for transition to the HIPAA Version 5010 for all covered entities and transactions was January 1, 2012. To be compliant, covered entities were to upgrade from version 4010/4010A (4010) to version 5010 (5010) effective January 1, 2012.

The IME acknowledges that the Centers for Medicare & Medicaid Services' Office of E-Health Standards and Services (OESS) had announced that it would not initiate enforcement action until March 31, 2012, with respect to any HIPAA covered entity that is not in compliance with the 5010 requirement. However, the IME emphasizes that the compliance date itself has not actually changed, and urges all covered entities that are not compliant with 5010 to take steps to become compliant immediately.

Overall, as of January 10, 2012, **the IME electronic claim volume is "normal" and 85% of all electronic claim transactions are being submitted by providers and processed by the IME in version 5010.** We would like to thank all those providers and trading partners who helped meet this compliance timeline!

Providers and trading partners, who are still not compliant, need to do so immediately by enrolling for 5010 through the Iowa Medicaid Electronic Data Interchange Support Services (EDISS) Total OnBoarding (TOB) process. To assist with the 5010 transition, follow the guidelines on the checklist on the EDISS website at: http://www.edissweb.com/docs/shared/5010_checklist.pdf. The checklist is separated into three sections: Direct Providers (not using PC-ACE Pro32), Direct Providers (using PC-ACE Pro32), and Providers sending files through a clearinghouse or billing service. Please select the most appropriate section and follow the guidelines on the checklist to begin preparing for the transition.

Providers may submit in 4010 after the deadline of January 1, 2012, but must begin the 5010 TOB process with EDISS and should prepare an action plan for compliance and submit the plan to the IME via email to imeproviderservices@dhs.state.ia.us. The plan should include the projected compliance date, primary point of contact for follow up (name, title, phone number, and email address).

The HIPAA 835 remittance advice transaction will only be available in 5010 beginning with the January 1, 2012 compliance date. Providers still submitting claims in 4010 will generate a 5010 version of the 835 that they can access after completing TOB.

All electronic transaction user's access in 4010 (i.e., 835, 270/271, 276/277) will need to be re-registered for the 5010 format through TOB. Upon production approval and setup by EDISS, 5010 login credentials will be issued via fax. The credentials will include a new login and password to access the 5010 Web Portal or Bulletin Board System (BBS). Please insure the fax number associated with your facilities TOB profile is accurate and current. This includes a substantial change around replacement of the Noridian Claim Confirmation Report (CCR). The CCR is also known as the Gen Report. Across all lines of business for 5010, the CCR will be replaced by the 277CA. The 277CAs will be returned to the Trading Partner 5010 mailboxes, the same way that CCRs were in 4010. However, 277CAs will be delivered in ANSI X12 format. Trading Partners will need to either view the 277CAs in text format, or they can use their billing software to translate the 277CA into a readable document similar to the CCR. EDISS recommends that all trading partners check with their in-house billing software, external software vendor, billing service, or clearinghouse to ensure the 277CA will be able to be translated. If your vendor cannot translate the 277CA, PC-ACE Pro32 has that functionality and could be used by your facility.

Due to the 5010 transition, EDISS is experiencing extremely high call volumes. If you are attempting to reach them and are having difficulty getting through, please take a moment to review their website for additional resources (user guides, tutorials, and presentations) that can assist you in the recertification process. Their website is www.edissweb.com.

Please visit www.cms.gov/ICD10 for the latest news and resources to help you prepare for the transition to both 5010 as well as ICD-10.

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



Iowa Department of Human Services

Terry E. Branstad
Governor

Kim Reynolds
Lt. Governor

Charles M. Palmer
Director

INFORMATIONAL LETTER NO.1092

DATE: January 20, 2012

TO: Iowa Medicaid Physicians, Advanced Registered Nurse Practitioners, Federally Qualified Health Centers (FQHC), Rural Health Clinics, Indian Health Clinics, Hospitals, Clinics, Mental Health Clinics, Behavioral Health Services, Psychologists, Screening Centers, Infant & Toddler Providers and Local Education Agencies

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

RE: Developmental Services Procedure Codes 96110 and G0451

EFFECTIVE: January 1, 2012

There has been a significant national discussion related to the changes in the 2012 Current Procedural Terminology (CPT) procedure codes. The CPT procedure code 96110 definition has been revised from "Developmental testing; limited" to a screening procedure "Developmental screening, with interpretation and report, per standardized instrument form". A new Healthcare Common Procedure Coding (HCPS) code G0451 "Developmental testing, with interpretation and report, per standardized instrument form," has been established.

The IME is committed to supporting the provision of developmental screening and testing. One of the Medicaid pediatric health care quality measures that Iowa Medicaid reports to the Centers for Medicare and Medicaid (CMS) annually is the number of children that received a multi-domain developmental test. The IME has implemented these definitions in the procedure codes. Please review and modify your billing practices with the new definitions. Testing services should be billed as G0451 or 96111. Screening services should be billed as 96110. An example of a screening tool is a 3-4 question validated tool.

The definition of CPT procedure code 96111, Developmental testing, (includes assessment of motor, language, social, adaptive, and/or cognitive functioning by standardized developmental instruments) with interpretation and report has not changed. If your service meets this definition please use this code.

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