

Child and Teen Checkups Metro Action Group

Improving the health of children and teens ages birth to 21 who are eligible for the Minnesota Child and Teen Checkups program.

2014 Clinic Newsletter

Primary & Secondary Insurance

Billing for MHCP Recipients

When one of your patients has Medicaid or MinnesotaCare <u>and</u> other health coverage, the health plan providing the MHCP coverage will serve as the last payer of services (secondary carrier).

First, bill the C&TC screening visit to the other insurance company (primary carrier) as you would bill the health plan providing the MHCP coverage . . . even codes you know the primary carrier will deny. If the primary carrier does not pay on a particular code, the secondary carrier providing MHCP coverage may provide reimbursement.

Even if the primary carrier pays in full, when you also submit the claim to the health plan providing the MHCP coverage, accurate reporting of the C&TC screening and blood lead testing to the Minnesota Department of Human Services (DHS) is ensured. It also enables proper data sharing and follow-up between the health plans, the DHS and counties.

Please remember It is important for the provider to bill BOTH the primary and the secondary carrier for C&TC screenings and blood lead tests ... even if the primary carrier pays in full.

Failure to bill the secondary carrier could result in less clinic revenue.

- Bill the S0302 code when a complete C&TC screening was performed. Some health plans provide an additional reimbursement for this code.
- Some health plans have pay-for-performance programs that include C&TC screenings and/or blood lead testing measurements. When you do not bill the health plan, you do not receive credit for performing the C&TC screening and/or blood lead test.

Verifying Coverage for Patients with MHCP Coverage

DHS Electronic Verification System (EVS) 651-431-4399 or 1-800-657-3613

MN-ITS http://mn-its.dhs.state.mn.us

When you know which health plan is providing the MHCP coverage, you may also contact the health plan directly to find the patient eligibility information and health plan member ID number.

Blue Plus 651-662-5200

HealthPartners 952-967-7998

Medica 1-800-458-5512

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