



## A Note of Thanks to Our Providers and Their Staff

We at AmeriHealth Caritas Pennsylvania would like to thank you for the care you have provided and continue to provide to our members throughout the past year. Your dedication to and support of your patients is unmatched during these difficult times. We would like to assure you of our continued commitment to providing your office with the service, support, and partnership you have come to rely on from our Plan now and beyond the COVID-19 pandemic.

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## The Pennsylvania Department of Human Services (DHS) has released a Medical Assistance Bulletin (MAB) addressing additional CPT codes for the administration of SARS-CoV-2 vaccines and reimbursement changes

DHS made the decision to increase the Medical Assistance (MA) program fee schedule rate to that of Medicare for the administration of the SARS-CoV-2 vaccines. We are following that guidance and updating our systems. This rate increase became effective on December 1, 2020. Providers do not need to resubmit claims; the Plan will reprocess and adjust payment.

The complete MAB outlining the procedure code, national code description, provider type, provider specialty, place of service, pricing, informational modifiers, etc., can be found on the Coronavirus page in the Providers section of [www.amerihealthcaritaspa.com](http://www.amerihealthcaritaspa.com).

The following CPT codes have been added to the AmeriHealth Caritas Pennsylvania fee schedule:

Vaccine manufacturer	Code	Code description
Pfizer Inc.	0001A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus diseases [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; first dose
	0002A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus diseases [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; second dose
Moderna Inc.	0011A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus diseases [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; first dose
	0012A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus diseases [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; second dose
AstraZeneca	0021A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus diseases [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10 <sup>10</sup> viral particles/0.5 mL dosage; first dose
	0022A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus diseases [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10 <sup>10</sup> viral particles/0.5 mL dosage; second dose
Janssen Biotech Inc. (a division of Johnson & Johnson)	0031A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10 <sup>10</sup> viral particles/0.5 mL dosage; single dose

Please continue to visit the dedicated Coronavirus page in the Providers section of our website for the most up-to-date information and for links to updates from DHS and the Pennsylvania Department of Health (DOH).

## Do you know your Account Executive?

All participating providers are assigned a dedicated Account Executive. Your Account Executive is your liaison with the AmeriHealth Caritas Pennsylvania. They are responsible for orientation, continuing education, and problem resolution for our network providers.

To find a list of Account Executives, please visit [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Communications > Account Executives.**

Call your Account Executive:

- To arrange for orientation for a new practice, or on new specific quality programs.
- To resolve an issue that could not be resolved through our standard processes.
- To report any change in your status, such as a phone number, address, Taxpayer Identification Number, or additions/deletions of physicians at your practice.



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## Recent provider notices

Visit our website for our most up-to-date notices that may affect you at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Resources > Communications > Provider Notifications.** Recent notices include:

- CPT II code reimbursement guidelines.
- Updated CPT codes for the administration of SARS-CoV-2 vaccines.
- Alfred I. duPont Hospital for Children reminder.

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## Member rights and responsibilities

AmeriHealth Caritas Pennsylvania is committed to treating our member with dignity and respect. AmeriHealth Caritas Pennsylvania, its network providers, and other providers of service may not discriminate against members based on race, sex, religion, national origin, disability, age, sexual orientation, or any other basis prohibited by law. Our members also have specific rights and responsibilities. The complete list is available on our website at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Resources > Member rights and responsibilities.**

## Member copayment

The most current member copayment schedule is available at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Billing**.

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## Credentialing reminders

Please remember that AmeriHealth Caritas Pennsylvania offers and encourages all practitioners to use the free Universal Provider DataSource through the Council for Affordable Quality Healthcare (CAQH)\* for simplified and streamlined data collection for credentialing and recredentialing. Through the CAQH, credentialing information is provided to a single repository, via a secure internet site, to fulfill the credentialing requirements of all health plans that participate in the CAQH. The complete list of AmeriHealth Caritas Pennsylvania credentialing guidelines and related forms, as well as practitioners' credentialing and recredentialing rights, is available at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Join our network**.

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## Provider credentialing rights

After the submission of the application, health care providers have the following rights:

- To review information submitted to support their credentialing application, with the exception of references, recommendations, and peer-protected information obtained by the Plan.
- To correct erroneous information. When information obtained by the Credentialing department varies substantially from information provided by the provider, the Credentialing department will notify the provider to correct the discrepancy.
- To be informed, upon request, of the status of their credentialing or recredentialing applications.
- To be notified within 60 calendar days of the Credentialing Committee/Medical Director review decision.
- To appeal any credentialing/recredentialing denial within 30 calendar days of receiving written notification of the decision.
- To know that all documentation and other information received for the purpose of credentialing and recredentialing is considered confidential and is stored in a secure location that is only accessed by authorized plan associates.
- To receive notification of these rights.

To request any of the above, the provider should contact our Credentialing department at:

AmeriHealth Caritas Pennsylvania  
Attn: Credentialing Department  
200 Stevens Drive  
Philadelphia, PA 19113

## Teach-back: A simple way to improve patient and physician communication

Health literacy is defined as the ability to communicate with patients in a way that is easy for them to understand and act upon.

Patient understanding is key to better health. Research shows that patients remember and understand less than half of what clinicians explain to them. It is estimated that only 11% of the entire population is proficient in health literacy. Patients may try to hide their lack of understanding of health information due to fear of being embarrassed, misunderstood, or disrespected.

The teach-back method is used to ensure that patients understand health information, as well as the risk and benefits trade-offs associated with treatments, procedures, and tests. Here are some tips for using the teach-back method:

- Use a caring tone of voice and attitude.
- Display comfortable body language and make eye contact.
- Use plain language. Avoid using medical jargon and vague directions.
- Ask the patients to use their own words.
- Ask open-ended questions that start with “what” or “how.”
- Avoid questions that result in “yes” or “no” answers.
- Ask your patients to show you how to do something, such as using their inhaler.
- Say, “To make sure I covered everything, can you tell me how you will explain (new medicine, next appointment, lab tests, etc.) to your spouse or caretaker?” The goal is to check how well you explained the health information — not to test the patient. At times, teach-back may reveal that patients do not understand what they need to know or need to do. When that happens, say, “I must not have done a good job explaining. Let me try again.”

These methods can help you:

- Improve patient understanding and adherence.
- Decrease callbacks and canceled appointments.
- Improve patient satisfaction and outcomes.

If you need help, go to [www.cdc.gov/healthliteracy](http://www.cdc.gov/healthliteracy) or [www.ahrq.gov/health-literacy](http://www.ahrq.gov/health-literacy) for resources.





## Translation services

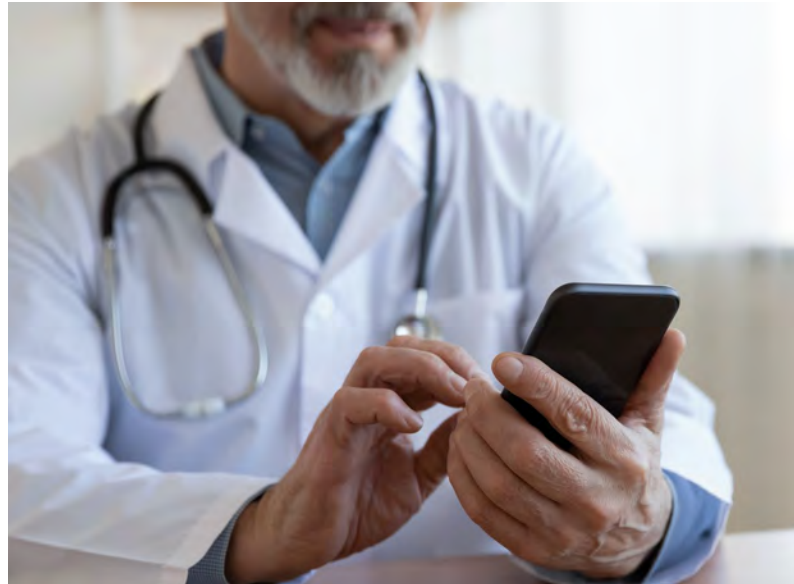
To help ensure our members continue to have access to the best possible health care and services in their preferred language, we are extending to our network providers the opportunity to contract with Language Services Associates (LSA) at our low, corporate telephonic rates.

Visit [www.amerihealthcaritaspa.com](http://www.amerihealthcaritaspa.com) > **Providers** > **Initiatives** > **Cultural competency** to review a description of services and a letter of commitment for complete details and contact information. You may address any questions you have directly to LSA, since this relationship will be between your office and LSA. Feel free to call them at **1-800-305-9673, ext. 55321**.

## Fraud Tip Hotline

If you or any entity with which you contract to provide health care services on behalf of AmeriHealth Caritas Pennsylvania become concerned about or identify potential fraud or abuse, please contact us by:

- Calling the toll-free Fraud, Waste, and Abuse hotline at **1-866-833-9718**.
- Emailing **fraudtip@amerihealthcaritas.com**
- Mailing a written statement to:  
Special Investigations Unit  
AmeriHealth Caritas Pennsylvania  
200 Stevens Drive  
Philadelphia, PA 19113



For more information about Medical Assistance fraud and abuse, please visit the DHS website at <https://www.dhs.pa.gov/about/Fraud-And-Abuse/Pages/MA-Fraud-and-Abuse---General-Information.aspx>.

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## Explore our fraud, waste, and abuse webpage

AmeriHealth Caritas Pennsylvania is committed to detecting and preventing acts of fraud, waste, and abuse and we have a webpage dedicated to addressing these issues and mandatory screening information. Visit [www.amerihealthcaritaspa.com](http://www.amerihealthcaritaspa.com) > **Providers > Resources > Fraud, Waste, and Abuse**.

Topics include:

- Information on screening employees for federal exclusion.
- How to report fraud to us.
- How to return improper payments or overpayments to us.
- Information on provider mandatory fraud, waste, and abuse training.

Providers must take our mandatory fraud, waste, and abuse provider training online at [www.amerihealthcaritaspa.com](http://www.amerihealthcaritaspa.com) > **Providers > Resources > Fraud, Waste, and Abuse**.



# Improving HEDIS® measures: Pharmacotherapy Management of Chronic Obstructive Pulmonary Disease (COPD) Exacerbation (PCE)

AmeriHealth Caritas Pennsylvania wants to help you improve your quality ratings. The information below discusses key aspects of this specific HEDIS measure, provides useful administrative aid, and offers guidance.

HEDIS definition of Pharmacotherapy Management of COPD Exacerbation (PCE): Members 40 years of age and older who had an acute inpatient discharge or ED visit on or between January 1 and November 30 of the measurement year and who have evidence of and active prescription for COPD or were dispensed the appropriate medications:

- A systemic corticosteroid within 14 days of the event. (No longer includes betamethasone.)
- A bronchodilator within 30 days of the event. (No longer includes methylxanthines.)

Use spirometry testing (SPR) in the assessment and diagnosis of COPD. If COPD is present, check for evidence of PCE.

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## How to improve your HEDIS score

Evidence shows that most patients with COPD who have had a recent inpatient hospitalization or ER visit can benefit from taking both a systemic corticosteroid and a bronchodilator.

Discuss with your patients the importance of filling their prescriptions and taking these medications, and how they can prevent further exacerbations of their disease.

Ask your patients if they are filling their prescriptions and taking their COPD medications as prescribed, and address barriers to taking their medication if patients are not compliant.

We understand this is based on your clinical expertise and the circumstances of the patient. This measure uses administrative claims information to identify adults age 40 and older who were seen in the ER or hospitalized with COPD as their primary diagnosis. It then checks pharmacy claims to look for evidence of current fills of a systemic corticosteroid and a bronchodilator. You will receive the highest scores if your patient has an active prescription for a systemic corticosteroid within 14 days after discharge and a bronchodilator within 30 days of the event.







## Preferred drug list (PDL) updates for 2021

**DHS implemented changes to the statewide PDL that went into effect on January 5, 2021.**

As a reminder, DHS required all Medical Assistance managed care organizations (MCOs) in the physical health HealthChoices and Community HealthChoices plans to move to the mandated statewide PDL in 2020 and to adhere to any subsequent statewide PDL updates.

- AmeriHealth Caritas Pennsylvania continues to adhere to all updates to the preferred and nonpreferred status and list of drugs included in the statewide PDL.
- AmeriHealth Caritas Pennsylvania continues to use the prior authorization guidelines as required by DHS for drugs included in the statewide PDL.
- The process for obtaining prior authorization process remains the same. For more information about prior authorization, please visit [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > Pharmacy.

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Prior authorization  
request by:

Phone: **1-866-610-2774**

Fax: **1-888-981-5202**

**[www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) >  
Pharmacy**

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### Where can I see the changes?

The 2021 PDL is available on DHS' Pharmacy website and at <https://papdl.com/>. Additional resources, including our supplemental formularies, are available on the Formulary page at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > Pharmacy.





## Formulary updates

Additions	Update
Cyclopentolate 1% eye drops	October 15, 2020
Tivicay PD tablet	January 5, 2021
Prazosin	January 5, 2021
Estrogens (various; see PDL for full listing)	January 5, 2021
Virt-Gard	January 5, 2021
Droxia	January 5, 2021
Hydroxyurea	January 5, 2021
Benzoyl peroxide 6% cleanser (OTC)	January 5, 2021
Nayzilam spray	January 5, 2021
Valtoco spray	January 5, 2021
Compro suppository	January 5, 2021
Calcipotriene ointment	January 5, 2021
Taclonex ointment, Taclonex suspension	January 5, 2021
Betaxolol	January 5, 2021
Nadolol	January 5, 2021
Oral contraceptives (various; see PDL for full listing)	January 5, 2021
Insulins (Humulin R vial U-100, Novolin R vial, Humulin N vial, Novolin N vial)	January 5, 2021
Rapamune tablet	January 5, 2021
Gatifloxacin	January 5, 2021
Polycin ointment	January 5, 2021
Alphagan P	January 5, 2021
Pretab	January 5, 2021
Fluphenazine elixir <sup>AR</sup>	January 5, 2021
Fluphenazine oral concentrate solution <sup>AR</sup>	January 5, 2021
Lorazepam vial <sup>AR</sup>	January 5, 2021
Pregabalin solution <sup>QL</sup>	January 5, 2021
Sertraline concentrate solution <sup>QL</sup>	January 5, 2021
Bonjesta tablet <sup>QL</sup>	January 5, 2021
Fyavolv tablet <sup>QL</sup>	January 5, 2021
Jinteli tablet <sup>QL</sup>	January 5, 2021
Ozempic <sup>QL</sup>	January 5, 2021
Nurtec ODT <sup>QL</sup>	January 5, 2021
Glatopa <sup>QL</sup>	January 5, 2021
Naproxen sodium 275 mg tablet (generic Anaprox tablet) <sup>QL</sup>	January 5, 2021
Naproxen sodium DS 550 mg tablet (generic Anaprox DS tablet) <sup>QL</sup>	January 5, 2021
Calcium acetate tablet <sup>QL</sup>	January 5, 2021



Additions (continued)	Update
Benzhydrocodone-acetaminophen <sup>QL</sup>	January 5, 2021
Lorcet HD <sup>QL</sup>	January 5, 2021
Tramadol-acetaminophen tablet <sup>QL, AR</sup>	January 5, 2021
Promethazine suppository <sup>QL, AR</sup>	January 5, 2021
Removals	Update
Propantheline 15 mg oral tablet	December 12, 2020
Dicyclomine 10 mg/5 mL oral solution	December 12, 2020
Chlorpheniramine 2 mg/5 mL syrup	December 12, 2020
Zostavax	December 12, 2020
Pretomanid	December 12, 2020
Updates	Update
Triamcinolone (Nasacort allergy 24-hour spray OTC): QL 16.9 mL per 30 days	October 5, 2020
Hydroxychloroquine: QL and durations of therapy have been removed	October 7, 2020
Glucagon emergency kits: QL two kits per 30 days	December 12, 2020
Methergine (methylergonavine tablet): QL 28 tablets per seven days	December 12, 2020

AR = age restriction. QL = quantity limit.

## Pharmacy prior authorization: no phoning or faxing — just a click away!

Use our online prior authorization request form to submit pharmacy prior authorization requests instantly. To get started, go to [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers** > **Resources** > **Pharmacy services** > **Online Prior Authorization Request Form**.

Please note the following are available on our website:

- A list of pharmaceuticals, including restrictions and preferences.
- How to use the pharmaceutical management procedures.
- An explanation of limits or quotas.
- Drug recalls.
- How to use pharmaceutical management procedures.
- Prior authorization criteria and procedures for submitting prior authorization requests.
- Changes approved by the Pharmacy and Therapeutics (P&T) Committee.



## Did you know your patients are eligible for dentures?

Did you know your patients are eligible for dentures?

AmeriHealth Caritas Pennsylvania dental benefits include complete dentures, partial dentures, relines, repairs, and adjustments. There are different authorization requirements, benefit limit exception (BLE) criteria, and limitations based on the member's age and specific plan.

- The full benefit of dentures is realized in a full, happy smile and healthy gums. Dentures can help improve speech, mastication, self-confidence, and appearance. Unfortunately, three to seven appointments later, the outcome may not necessarily be a happy one.
- To achieve successful treatment, it is vital to consider a number of issues throughout the denture process. Before treatment even begins, the patient's motivation for denture treatment and emotional attitude toward dentures must be evaluated. Setting realistic expectations of what can and cannot be achieved is key, so the dentist can understand what the patient really wants. The patient should be informed and reminded that there will be a period of time required for adapting to the new prosthesis. Afterward, the dentist must work with the patient to help achieve success in difficult areas such as neuromuscular control, mastication, and speech. Even the best dentures will require some getting used to.



### Notes:

- One denture (full or partial upper/lower) per lifetime.
- Prior-authorization required.
- Clinical criteria must be met to receive an approval.

### BLE rules:

- Benefit limit exception.
- Provider can submit a request for an exception if the member received a denture after April 27, 2015.
- Appropriate documentation must be included to support the exception request.
- BLE criteria must be met before clinical criteria is reviewed

Please refer to the provider supplement for additional information including clinical guidelines.

Our members are encouraged to return to the dental office, share their concerns, and continue to work collaboratively toward a favorable, realistic outcome.

For our providers, we suggest submitting the Dental Let Us Know form to advise us when a member has not returned to your office for follow-up care and adjustments or to pick up their dentures. Your dental Account Executive can answer any questions about the completion and submission of the Let Us Know form, which is available at [www.amerihhealthcaritaspa.com](http://www.amerihhealthcaritaspa.com) > **Providers** > **Resources** > **Dental program**.

## Update: Teledentistry billing for dental providers during COVID-19 emergency

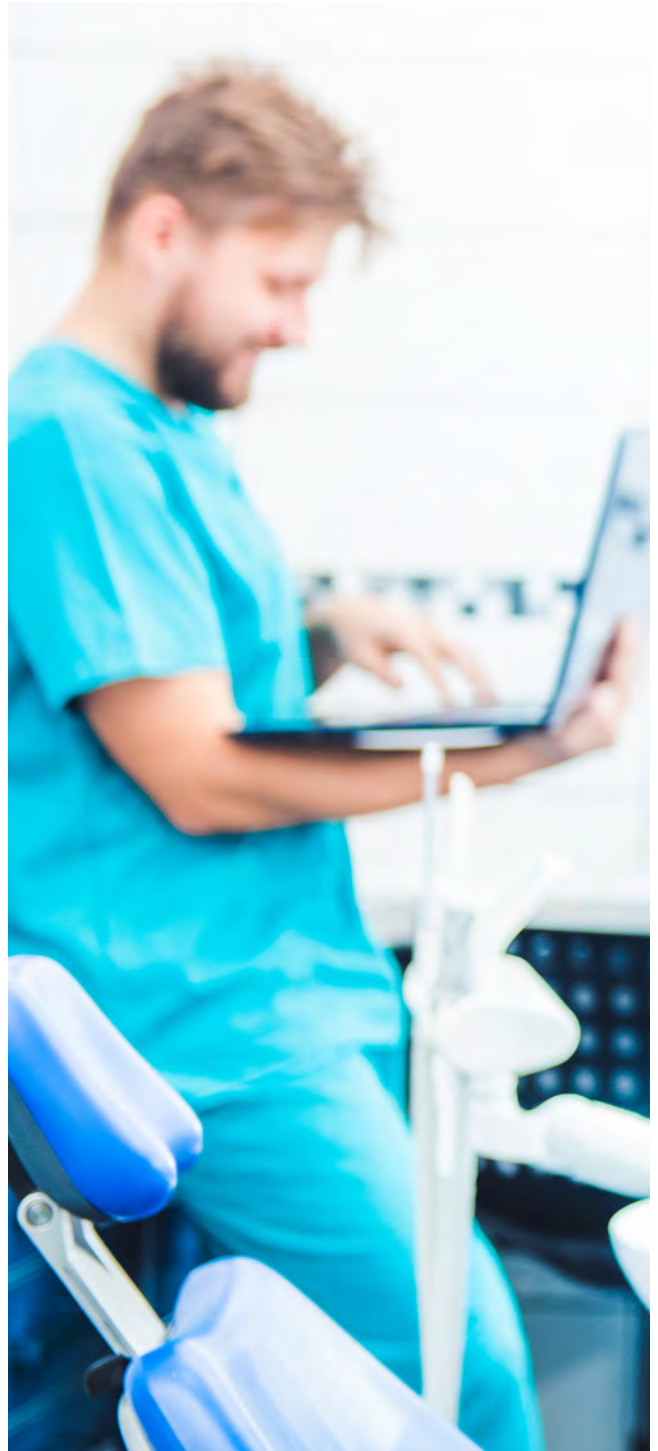
As you know, in March 2020, Governor Wolf issued an emergency disaster declaration in response to the presence of the COVID-19 in Pennsylvania. The guidance encouraged the use of teledentistry when available. AmeriHealth Caritas Pennsylvania would like to provide you with a billing update as well as reminders of the current guidelines.

## New: Place of Service (POS) 02 – Telehealth can now be used for teledentistry encounters

The following guidelines still remain in effect:

- Procedure code D9995, defined as "Teledentistry - synchronous" has been added to the Plan's dental fee schedule payable at \$5. One per member per 14 days per provider.
- Procedure code D0140, defined as "Limited oral evaluation - problem focused" has been added to the Plan's dental fee schedule payable at \$30 or your currently contracted rate. One per member per 14 days per provider.
- Place of Service (POS) 02 is to be used in conjunction with the codes above and it should be documented in the patient's record that the service was rendered via teledentistry.
- Federally qualified health centers (FQHCs) and rural health clinics (RHCs) will be paid their prospective payment system (PPS) rate and are to bill procedure code T1015 to indicate dental visits/encounters rendered via teledentistry.

The codes listed above are applicable to patients who are experiencing true emergencies related to pain, infection, excessive bleeding, and trauma. Additionally, the codes are applicable to inbound calls only generated by a member or a return call to evaluate for urgent or emergent status. Outreach calls are not eligible for reimbursement. If you have any questions, please contact your dental Account Executive.



## A note from our Market Chief Medical Officer: Appropriate antibiotic utilization affects every patient and provider

As the cold and flu season progresses, you may be pressured by your patients to prescribe antibiotics. As clinicians, we must ensure the continued effectiveness of antibiotics that save lives from bacterial infections through appropriate prescribing. We have a dedicated site addressing appropriate antibiotic use that has a wealth of physician resources, materials to use with patients, and links to the CDC's Get Smart: Know When Antibiotics Work site.

Please visit the Appropriate Antibiotic Use page at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Initiatives > Appropriate Antibiotic Use.**

Consider the following when treating these common afflictions:

### Pharyngitis in children (2 – 18 years old)

- The vast majority of pharyngitis is viral.
- Clinical signs and symptoms do not always point to a viral or bacterial cause.
- Quick strep tests are billable in addition to E&M coding.
- Wait to see if a strep culture or quick strep test is positive before treating.
- Penicillin is still the drug of choice in Group A strep or erythromycin if penicillin allergic.

### Upper respiratory infection (URI) in children (3 months to 18 years old)

- Clinicians know URIs are viral, but patients often pressure for a prescription.
- Antibiotics need to be reserved for bacterial infections to reduce emerging bacterial antibiotic resistance.
- Pediatric antibiotic tips from the CDC are available on our Appropriate Antibiotic Use page at [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Initiatives > Appropriate Antibiotic Use.**

### Acute bronchitis in adults (18 – 64 years old)

- Just like pharyngitis and URIs, acute bronchitis is mostly caused by viruses.
- Patients can have respiratory symptoms including cough with or without sputum usually for three weeks.
- Consider chest X-ray if pulse is >100, respiratory rate >24, temperature >100.4 degrees, or suggestive lung exam.
- Antibiotics are not needed if there is no evidence of pneumonia.
- Purulent sputum is not always predictive of bacterial infection.
- Avoid antibiotics, but treat symptomatically.

A free archived CME presentation from the November 2013 CDC Grand Rounds on Combating Resistance: Getting Smart is available at <https://www.cdc.gov/grand-rounds/pp/2013/20131119-antibiotic-resistance.html>.

Lily Higgins, MS., M.D., M.B.A.  
Market Chief Medical Officer  
AmeriHealth Caritas Pennsylvania



For our members with elevated blood lead levels, health care practitioners can make direct referrals to our Care Management team by calling our Special Needs Unit at **1-800-684-5503**. You can also “let us know” by faxing the Let Us Know referral form to our Care Management team at **1-866-208-8145**. For more information on the Let Us Know program, go to [www.amerhealthcaritaspa.com](http://www.amerhealthcaritaspa.com) > **Providers > Initiatives > Let Us Know.**

## Pennsylvania's Telephonic Psychiatric Consultation Service Program (TiPS)

TiPS is the Pennsylvania HealthChoices program designed to increase the availability of child psychiatry consultation teams regionally and telephonically to primary care practitioners (PCPs) and other prescribers of psychotropic medications, for children insured by Pennsylvania's Medical Assistance (Medicaid) program. The program provides real-time peer-to-peer resources to the PCP who desires immediate consultative advice for children (up to age 21) with behavioral health concerns. TiPS core services include:

- **Telephonic and face-to-face consultation.**
- **Care coordination.**
- **Training and education.**

To get started, call the TiPS team in your designated HealthChoices zone listed on the right. There is no fee to enroll. Once your practice enrolls in TiPS, your regional team will come to your office or provide education over the phone for you and your staff.

They will explain the program, instruct on how to access services, answer your questions, and discuss your expectations.

- **Lehigh/Capital — 1-800-233-4082, option 4**  
(Penn State Children's Hospital).
- **Northeast — 1-800-233-4082, option 4**  
(Penn State Children's Hospital).
- **Southeast — 1-267-426-1776**  
(Children's Hospital of Philadelphia).
- **Northwest — 1-844-972-8477**  
(Children's Community Pediatrics).
- **Southwest — 1-844-972-8477**  
(Children's Community Pediatrics).

Find more information at

**[www.amerihhealthcaritaspa.com](http://www.amerihhealthcaritaspa.com) > Providers > Initiatives > Telephonic Psychiatric Consultation Service Program (TiPS).**



## Provide critical blood lead level screenings in your office today

### Did you know?

- All Medicaid members are required to be tested for lead levels.
- All Medicaid-eligible children are considered at risk for lead toxicity and must receive blood lead level screening tests for lead poisoning starting at 9 months old, as well as other ages based on history and risk assessment.
- PCPs are required (regardless of responses to the lead screening questions) to ensure that children be screened for lead toxicity from 9 months to 18 months old and again from 2 years to 6 years old. Risk questions should be asked at every visit thereafter.
- AmeriHealth Caritas Pennsylvania members with a venous lead draw showing an elevated blood level of  $\geq 5$   $\mu\text{g}/\text{dL}$  are eligible for an environmental lead investigation (ELI).



**To help you comply with these standards, we will reimburse you for blood level screening services if they are performed in your office. PCPs are reimbursed a \$10 fee after submitting a claim with the CPT code 83655 and modifier 90.**

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## Environmental lead investigation (ELI)

As stated above, AmeriHealth Caritas Pennsylvania members with a venous lead draw showing an elevated blood level of  $\geq 5$   $\mu\text{g}/\text{dL}$  are eligible for an ELI. **Note:** This service is only covered when the CMS/DHS guidelines are followed. If you have questions about this issue, its screening details, its diagnosis, or its follow-up, call our EPSDT Outreach program at **1-855-300-8334**.

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## ELI process

We have contracted with Accredited Environmental Technologies (AET) and UPMC Pinnacle to provide ELI services to our members. For more information, contact Eric Sutherland at Accredited Environmental Technologies (AET) at **1-800-9696-AET**. To refer a member for an ELI through UPMC Pinnacle (Dauphin and Lancaster counties only):

- Call **1-717-782-6443** or **1-717-782-4608**.
- Fax **1-717-782-2709**.
- Email **lead@pinnaclehealth.org**.

For our members with elevated blood lead levels, health care practitioners can make direct referrals to our Care Management team by calling our Special Needs Unit at **1-800-684-5503**. You can also “let us know” by faxing the Let Us Know referral form to our Care Management team at **1-866-208-8145**. For more information on the Let Us Know program, go to **www.amerihealthcaritaspa.com > Providers > Initiatives > Let Us Know..**





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