



Connecticut Medical Assistance Program
Policy Transmittal 2014-17

Provider Bulletin 2014-43
 July 2014

Roderick L. Bremby, Commissioner

Effective Date: August 1, 2014

TO: Physicians, Physician Assistants, Advanced Practice Registered Nurses (APRN) and Medical Clinics

RE: Developmental and Behavioral Health Screens in Primary Care – Requirement of Modifiers

The purpose of this policy transmittal is to notify providers of an upcoming change to the billing of developmental and behavioral health screens (BH screen), utilizing CPT Code 96110 (developmental screening, with interpretation and report, per standardized instrument form).

Effective for dates of service August 1, 2014 and forward, one of the modifiers listed below will be required when CPT code 96110 is billed by a physician (excluding psychiatrists), physician group, APRN (excluding psychiatric APRN), APRN group, physician assistant or medical clinic for a HUSKY Health member under the age of eighteen (18).

Modifier	Description	State Definition
U3	Medicaid level of care 3, as defined by each state	Positive developmental / BH screen
U4	Medicaid level of care 4, as defined by each state	Negative developmental / BH screen

Modifier U3 should be used with CPT code 96110 when a developmental or BH screen results in a positive screen. Positive screens are defined based on the scoring criteria for the specific screening tool used.

Modifier U4 should be used with CPT code 96110 when a developmental or BH screen results in a negative screen as defined by the scoring criteria for the specific screening tool used.

Please note Modifier U3 or U4 must be used by physicians (excluding psychiatrists), APRNs (excluding psychiatric APRNs), physician assistants and medical clinics when billing CPT code 96110 otherwise this service will deny. This change applies to services billed under the HUSKY Health program (HUSKY A, B, C and D) for clients under the age of eighteen (18).

Please note while the Department encourages behavioral health clinicians, behavioral health clinics, psychiatrists and psychiatric APRNs to utilize the U3 and U4 modifiers, as applicable, use of the modifiers is not a requirement for claims submission and CPT code 96110 will not deny if U3 or U4 is not submitted.

The Department is implementing the use of modifiers U3 and U4 with CPT code 96110 in an effort to not only track the number of HUSKY Health members under the age of 18 who receive a developmental or BH screen in primary care settings, but to also track the number of positive versus negative screens and, when appropriate, subsequent referral for additional assessment or follow-up care.

It is the Department's goal that all HUSKY Health members under the age of 18 receive a developmental or BH screen on an annual basis. In support of this goal, the Department is encouraging providers to incorporate developmental or BH screens into the annual Early and Periodic, Screening, Diagnostic and Treatment (EPSDT) visit and when screening results in positive findings, to initiate appropriate action. Please refer to the section on Positive Screens for details. Note, however, that a member (or member's parent/guardian) has the right to refuse a developmental or behavioral health screen. For more information regarding EPSDT please refer to Chapter 5 - Claims Submission on the CT Medical Assistance Program Web site at www.ctdssmap.com.

Providers are reminded that CPT code 96110 can be billed on the same date of service as the CPT code for the EPSDT visit (CPT codes 99381-99384; or 99391-99394).

Screening Tools

The Department requires the use of an age appropriate, validated developmental or behavioral health screening tool. The American Academy of Pediatrics (AAP) has posted a list of developmental and mental health screening and assessment tools for primary care on its

website. The lists include several options for screening tools that have been assessed for reliability, validity, sensitivity, and specificity. The list includes psychometric properties, cultural considerations, age groups and cost (if any). Providers must select an appropriate developmental or behavioral health screening tool from the lists below. Failure to use a screening tool to perform a developmental or behavioral health screen or failure to use a screening tool from one of the lists provided below may result in financial adjustments based on post payment reviews.

Developmental Screening Tools

<http://pediatrics.aappublications.org/content/118/1/405.full.pdf+html>

From the home page of www.aap.org: Under the Professional Resources

- Select AAP Policy
- Select AAP Policy Collections
- Scroll to AAP Collections by Authoring Entities
- Select Section on Developmental Behavioral Pediatrics
- Select the article: “Identifying Infants and Young Children With Developmental Disorders in the Medical Home: An Algorithm for Developmental Surveillance and Screening”

Autism Screening Tools

<http://pediatrics.aappublications.org/content/120/5/1183.full.pdf+html>

From the home page of www.aap.org: Under the Professional Resources

- Select AAP Policy
- Select AAP Policy Collections
- Scroll to AAP Collections by Authoring Entities
- Select Council on Children with Disabilities
- Select the article “Identification and Evaluation of Children With Autism Spectrum Disorders”

Mental Health Screening and Assessment Tools for Primary Care

http://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Mental-Health/Documents/MH_ScreeningChart.pdf

From the home page of www.aap.org: Under the Advocacy & Policy link

- Highlight AAP Health Initiatives with your cursor
- Select Clinical Resources
- Select Mental Health to access the Mental Health Initiatives page
- Highlight Key Resources

- Select Primary Care Tools
- Select Mental Health Screening and Assessment Tools for Primary Care

Positive Screens

Providers should utilize the specific scoring instructions provided for the screening tool utilized to assess whether there is a positive result. If a member scores positive on a developmental or behavioral health screen, the provider should perform one or both of the following during the EPSDT visit:

- Provide the age appropriate anticipatory guidance and appropriate developmental and/or behavioral health recommendations; and/or if indicated, refer the member for additional evaluation/assessment by a Medicaid-enrolled behavioral health provider or provider with specialization in developmental pediatrics.

Please note any member who screens positive on a developmental or behavioral health screen must continue to be screened at least annually in order to adequately assess the need for further intervention and/or follow-up care.

If assistance is needed in finding enrolled providers with a specialty in developmental pediatrics please contact Community Health Network (CHNCT) at 1-800-859-9889.

If assistance is needed in finding an enrolled behavioral health provider please contact the Connecticut Behavioral Health Partnership (CTBHP) at 1-877-522-8247.

Documentation:

Please note that the screening tool used, the score obtained and the actions taken as a result of the screen (guidance to parent, discussion with child, referral etc.) should be documented in the HUSKY Health member’s medical record.

Distribution: This policy transmittal is being distributed to holders of the Connecticut Medical Assistance Program Provider Manual by HP Enterprise Services. Managed Care Organizations are requested to send this bulletin to their network providers and subcontractors.

Responsible Unit: DSS, Medical Care Administration, Medical Policy Section; Nina Holmes, Policy Consultant, (860) 424-5486.

Date Issued: July 2014.