Introduction

CSHCN Services Program Provider Manual

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TEXAS
Health and Human
Services

INTRODUCTION

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1.1 Program History

The Children with Special Health Care Needs (CSHCN) Services Program is the oldest governmentally-administered continuous medical assistance program in Texas for low-income children with special health-care needs and people of any age with cystic fibrosis. In 1933, state legislative action initiated funding two years in advance of the first federal initiative, Title V of the *Social Security Act*.

The program currently receives part of its funding from Title V, and aligns its services with Title V objectives, such as:

- Promoting partnerships between families and providers.
- Ensuring that all children get services in the context of the medical home.
- Organizing services so that they are easy for families to access.
- Promoting the provision of services that help youth transition to adulthood.

1.2 About the Provider Manual

The *CSHCN Services Program Provider Manual* contains policy information about the program. This edition of the *CSHCN Services Program Provider Manual* supersedes all previous editions. Read this manual carefully.

The *CSHCN Services Program Provider Manual* is intended primarily for those providers who submit claims to the Texas Medicaid & Healthcare Partnership (TMHP); however, information is also provided for services reimbursed by the Vendor Drug Program and the Medical Transportation Program.

The *CSHCN Services Program Provider Manual* contains information to help providers submit and correct first-time claims in the Computerized Medicaid Claims Processing Assessment System, COMPASS21. This will help providers minimize resubmissions and appeals and help conserve their own and the Program's resources.

The TMHP website at www.tmhp.com supplements the information in this manual. The website contains:

- Enrollment information.
- Complete instructions for setting up a Provider Administrator account.
- Publications (e.g., manuals and bulletins).
- Directory of regional provider relations representatives.
- TexMedConnect.
- Provider education information (e.g., computer-based training, live workshops, webinars).

Advanced features are available for those who create a provider administrator account. All enrolled providers are eligible for this free account. Once an account is activated, providers will have access to:

- Online provider enrollment.
- Online Fee Lookup (OFL).
- Claim status inquiries (CSIs).
- Eligibility verification.
- Electronic Remittance and Status Reports.
- Claim and appeal submissions.
- Payment amounts search, view, and print capabilities.
- Notification of an invalid address on file for any provider's National Provider Identifier (NPI).

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- Notification of pending payments because of inaccurate or incomplete provider information.

Important: *Natural disasters, such as floods or hurricanes, can impact the delivery of health care to CSHCN Services Program clients. When disaster strikes, providers should monitor the TMHP website for special instructions.*

New provider services continue to be added to the website. Visit the TMHP website at www.tmhp.com or call the Electronic Data Interchange (EDI) Help Desk at 1-888-863-3638 for the latest information about online services.

The CSHCN Services Program Provider Manual is the providers' principal source of information about the CSHCN Services Program. The manual is regularly updated to reflect the most recent policy and procedure changes. Updates are generally available the month following the effective date of the change. For advanced notification of upcoming changes, providers should monitor banner messages, which appear at the beginning of their Remittance and Status (R&S) reports, and the corresponding website articles published on the TMHP website at www.tmhp.com.

According to the CSHCN Services Program Agreement, providers must be thoroughly familiar with the contents of the *CSHCN Services Program Provider Manual,* the provider bulletins, and the messages contained in the R&S Reports as they apply to the CSHCN Services Program.

Providers must also comply with the following:

- CSHCN Services Program policies
- Policy notification letters
- Provider manuals
- Statutes
- Rules
- Regulations

This manual includes information about correct coding for claims. The CSHCN Services Program regrets that, due to copyright limitations, *Current Procedural Terminology* (CPT), *Current Dental Terminology* (CDT), International Classification of Disease (ICD) code descriptions, and Healthcare Common Procedure Coding System (HCPCS) code descriptions cannot be published in CSHCN Services Program publications. Consult reference manuals published or authorized by the American Medical Association (AMA), the American Dental Association (ADA), World Health Organization (WHO), and the Centers for Medicare & Medicaid Services (CMS) for code descriptions.

Specific procedure or diagnosis codes related to program benefits and coverage are included in the manual to provide helpful information, but should not be considered all-inclusive. From time to time, codes are added, deleted, or revised.

1.3 Feedback

The CSHCN Services Program and TMHP welcome provider comments and suggestions concerning this publication. Providers can mail them to:

Texas Medicaid & Healthcare Partnership
Attn: Publications
PO Box 204270
Austin, TX 78720–4270

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1.4 TMHP-CSHCN Services Program Contact Center

The TMHP-CSHCN Services Program Contact Center at 1-800-568-2413 is available Monday through Friday, from 7 a.m. to 7 p.m., Central Time, and is the main point of contact for the CSHCN Services Program provider community.

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