



PROGRESS NOTES

November 1, 2013

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Stay Connected with YOUR Chapter



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UPCOMING EVENTS *(See page 9-10 for details on all events)*

ADF Distinguished Speaker Series– Developmental Disabilities in the Early Learning Landscape | 11/14/13 | Baton Rouge, La

Tulane Saturday Pediatric Series | 12/14/13 | New Orleans, La



Bayou Health/ Medicaid

Open Enrollment– Coming Soon to a Region Near You

On the noon provider calls, DHH staff has indicated that open enrollment for Bayou Health recipients will happen by GSA regions. DHH anticipates mailing letters to recipients in GSA-A late November. Recipients will have 60 days (December and January) to make any changes they desire. They will be locked in to the plan they choose beginning on February 1, 2014. The other GSA regions will follow the same structure with letters going out a week or two before the 60 days of open enrollment period. GSA-B open enrollment dates will be February and March and GSA-C open enrollment dates will be April and May.

As open enrollment for recipients in Bayou Health begins, this is an opportunity to evaluate the relationships you do and don't have with the Bayou Health plans as well as consider if there are any changes you feel you should make.

Informational Bulletins

ACA Updates relative to Payments:

Q13: When will enhanced reimbursement be paid?

Answer: No payment for enhanced reimbursement could be made prior to the SPA approval. Pending SPA approval, DHH continued to reimburse designated physicians for eligible services at the Medicaid rate. Following SPA approval, Molina completed necessary systems changes to adjust paid Legacy Medicaid and Bayou Health Shared Savings claims to reimburse the difference between the Medicaid rate and the enhanced rate and to pay the enhanced rate going forward. Molina began paying the enhanced rate on original claims on June 25, 2013. On July 17 and 30, 2013, Molina adjusted claims paid through June 24, 2013 to reimburse the difference between the enhanced rate and the Medicaid rate previously paid.

Managed Care Organizations (MCO) are responsible for reimbursing services to designated physicians at the enhanced rate after CMS approves a reimbursement methodology for MCOs. This approval is separate and apart from the SPA already approved by CMS. DHH submitted to CMS on March 29, 2013 an MCO method that would have had Bayou Health Prepaid Plans continue to pay providers the Medicaid rate. Then, on a quarterly basis, DHH would have reimbursed MCOs for the difference between the Medicaid and enhanced rates and the plans would have paid providers the difference.

Subsequently, DHH revised the methodology to include the enhanced payment in the capitation rate paid to the MCOs. This method enables MCOs to pay providers the enhanced rate on the original claim, without subsequent adjustment. DHH submitted the replacement MCO method to CMS in June 2013, CMS approved the MCO method in July 2013, and DHH executed the necessary amendments to Prepaid Plan contracts in September 2013. By mid-November 2013, MCOs will begin paying the enhanced rate on Affordable Care Act Primary Care Services Informational Bulletin 9 new claims, and by mid-December they will adjust previously paid claims similar to what Molina did for Legacy Medicaid and Shared Savings claims in July.

For the full bulletin, go to:

http://lamedicaid.com/provweb1/recent_policy/ACA_PCP_Informational_Bulletin_FINAL_010612_revised-102213.pdf

**** Note–** It is likely that your enhanced payment will be sent to you in mid to late December. With that in mind, those funds may be counted as income for the year on your taxes. You are encouraged to think about what impact this may have on your office and if there are any deductible expenses you might consider using these funds for prior to the end of the calendar and tax year.

All bulletins: <http://new.dhh.louisiana.gov/index.cfm/page/1198/n/311>

Provider Calls

The beginning of each call will begin with announcements from the Department and then will allow for time to address systemic issues with Bayou Health.

The weekly provider call hosted by DHH takes place every Wednesday at noon. Any provider is welcome to call in, and pre-registration is not required.

The call in number is 1-888-278-0296

Access code is 6556479#

NCCI Modifier –25 Important Update

The following was distributed at the Bayou Health Quality Committee meeting on Friday, 10/25/2013

Louisiana Department of Health and Hospitals
Bayou Health Informational Bulletin 13-1
Revised: October 25, 2013

Issue: National Correct Coding Initiative (Preventive Care Codes vs Immunization Administration Codes)

On January 1, 2013, new Procedure-to-Procedure (PTP) edits were implemented in the Centers for Medicare and Medicaid Services (CMS), National Correct Coding Initiative (NCCI) that paired immunization administration codes with preventive care codes. Billing these code combinations on the same date by the same provider could have resulted in the preventive medicine code being denied. CMS has subsequently decided, after receiving comments from the American Academy of Pediatrics and state Medicaid agencies, to permit states to deactivate these edits through the end of 2013, if they choose to do so. CMS stated, "It is understood that immunizations are commonly administered in conjunction with a comprehensive preventive medicine evaluation and that, when this occurs, both services are payable." It would be expected by Louisiana Medicaid that all services provided are medically necessary and appropriately documented in the patient record. Further guidance from CMS for 2014 on the deactivation of these code pairs is expected.*

***Update:** CMS has released updated guidance related to these services that no longer includes the option of deactivation of the code pairs. **Effective January 2014**, Louisiana Medicaid fee for service (legacy) and Bayou Health Shared Savings Plan claims processing must reactivate these edits. **However**, CMS does provide the following guidance that will allow both the immunization administration and the preventive medicine evaluation and management (E/M) service to be reimbursed.

"If a Medicaid beneficiary receives one or more immunizations and a "significant, separately identifiable" preventive-medicine evaluation and management (E/M) service from the same provider on the same date of service, the provider's Medicaid claim(s) should include both the immunization administration code... and the comprehensive preventive-medicine E/M code...with modifier 25 appended...."

"If the provider ...bills a comprehensive preventive-medicine E/M code for the same day and does not append modifier 25, the Medicaid PTP edits will deny payment of the preventive-medicine E/M code."

Legacy Louisiana Medicaid and Bayou Health Shared Savings plan claims processing will reimburse both the immunization administration and the preventive medicine E/M services when modifier -25 is properly appended to the preventive medicine procedure code. Further details will be provided on www.lamedicaid.com and in remittance advice messages closer to the implementation of this change.

All Bayou Health Prepaid Plans have implemented NCCI editing, but each may have a different billing policy related to the mandate. It is understood that the Prepaid Plans will allow appropriate use of modifier-25 if the code pairs in question are activated in their claim processing systems. Please contact the Prepaid Plans directly for information specific to their implementation, policies and any billing instructions.

For questions related to this information as it pertains to legacy Medicaid or Bayou Health Shared Savings Plans, please contact Molina Medicaid Solutions Provider Services at (800) 473-2783 or (225) 924-5040.

AAP 2014-2015 National Committee Chairperson Vacancies

The AAP Board of Directors is soliciting nominations to fill six AAP National Committee Chairperson vacancies for terms beginning July 1, 2014 as follows:

Child Abuse and Neglect (COCAN)
Child Health Financing (COCHF)
Coding and Nomenclature (COCN)
Development (CODE)
Infectious Diseases (COID)
Private Payer Advocacy Advisory Committee (PPAAC)

The detailed information regarding this call for nominations may be found on the AAP Member Center: <http://www2.aap.org/moc/leader/nominations.cfm>. The list of vacancies, committee needs and term rosters, as well as the fact sheet and bio summary templates, are available at this web site. The committee needs are crucial in the committee appointment process as the Board of Directors carefully considers these needs when reviewing nomination materials and making appointments. New to the committee needs this year is a description of the committee and an estimated time commitment. A Frequently Asked Questions (FAQ) sheet has been added to the nominations forms. Please review this vital process for the nominations and call Cyndy Rouse, Manager, Committee Programs, [1-800-433-9016](tel:1-800-433-9016) x7938, if you have any questions. Note that committee chairpersons are appointed and reappointed annually for a maximum of four 1-year terms.

Committee chairperson appointments are made on the basis of knowledge, expertise, and the documented needs of the committee. Within this context, Academy membership demographics such as professional activity, gender, ethnicity, and geographical distribution will be considered, as well as chapter activity.

Nominees must submit a letter of nomination, fact sheet, biographical summary to their Chapter President and Executive Director and the AAP in Elk Grove Village, by e-mail, at nominations@aap.org. Nomination materials may also be submitted via postal mail to 141 Northwest Point Blvd, Elk Grove Village, IL 60007, or by fax at [847/434-8938](tel:847-434-8938), attention Cyndy Rouse. **All nomination materials must be date stamped or postmarked by midnight (CST) on November 20, 2013.** There will be no exceptions to the deadline.

The AAP Board of Directors will meet January 28-February 1, 2014, to review all chairperson nominees and make final appointments. All nominees will be notified, via e-mail, by **Friday, February 7, 2014**. Thank you for taking the time to review and contribute to the nominations process of AAP National Committees for the 2012-2014-2015 term. If you have any questions, please feel free to contact Cyndy Rouse at or [847/434-7938](tel:847-434-7938).

2014-2015 AAP National Committee Member Appointments

The AAP Board of Directors is soliciting nominations to fill 21 AAP national committee member vacancies for terms beginning July 1, 2014, as follows:

Child Abuse and Neglect (2)
Child Health Financing (3)
Coding and Nomenclature
Development (Districts VI and X) (2)
Federal Government Affairs
Fetus and Newborn (3)
Hospital Care
Infectious Diseases (2)
Medical Liability and Risk Management
Pediatric AIDS
Pediatric Research
Practice and Ambulatory Medicine
Residency Scholarship
State Government Affairs

The detailed information regarding this call for nominations may be found on the AAP Member Center: <http://www2.aap.org/moc/leader/nominations.cfm>. The list of vacancies, committee needs and term roster, as well as the fact

sheet and biosummary templates are available on this web site. New this year are a FAQ sheet, the committee member responsibilities, and sample nominations and support letters. Also new, is the attached recruiting algorithm developed by the Board of Directors for use by the AAP leadership!

The committee needs are crucial in the committee appointment process as the Board of Directors carefully considers these needs when reviewing nomination materials and making appointments. Note that committee members are appointed and reappointed biennially for a maximum of three 2-year terms. Committee member appointments are made on the basis of knowledge, expertise, and the documented needs of the committee. Within this context, Academy membership demographics such as professional activity, gender, ethnicity, and geographical distribution will be considered, as well as chapter activity.

The scheduled deadline for nominations is February 24, 2014. Nominees must submit a letter of nomination, fact sheet, completed biosketch, and optional letters of support to their Chapter President and the Central Office in Elk Grove Village, by e-mail, at nominations@aap.org. Nomination materials may also be submitted via postal mail to 141 Northwest Point Blvd, Elk Grove Village, IL 60007, or by fax at [847/434-8000](tel:8474348000), attention Cyndy Rouse. All nomination materials must be date stamped or postmarked by midnight (CST) on February 24, 2014.

The AAP Board of Directors will meet May 13-17, 2014, to review all member nominees and make final appointments. Thank you for taking the time to review and contribute to the nominations process of AAP National Committees for the 2014-2015 term. If you have any questions, please feel free to contact Cyndy Rouse @crouse@aap.org or [847/434-7938](tel:8474347938).

New Process Implemented to Address Member Retro Enrollment and Disenrollment for Managed Care (Bayou Health)

DHH is implementing a monthly post review process of paid and denied claims for Medicaid members who were retroactively enrolled or disenrolled into Bayou Health Plans and/or Legacy Medicaid. Therefore, effective with the Remittance Advice dated November 5, 2013, and monthly thereafter, Molina will review potentially impacted claims where retroactive enrollment or disenrollment of a member was necessary, and take action on claims either paid or denied by an incorrect entity (Plans or Legacy). To ensure payment is made by the correct entity, identified claims will be voided by Molina for Legacy and Shared Plans. Prepaid Plans identify and perform voids of inappropriately paid claims – therefore Molina will not perform voids for Prepaid Plans. Providers will receive notice of voids on the remittance advice and must re-verify eligibility through MEVS based on the date of service and obtain the correct entity's identity for submission of claims. The correct date of service must be entered into the MEVS inquiry as "Plan Date" in order to obtain correct eligibility information for that date.

Prior Authorization of Services

- For services which received prior authorization by a prior entity based on the member's enrollment at the time of service, DHH has directed the 'new' entity to accept and honor the authorization approved by the said entity if appropriate (meaning the original authorization does not violate state or federal regulations).
- Providers must submit a copy of the approved original authorization to the correct entity to verify the approval when submitting a new claim.
- In situations where an authorization request was originally denied, the correct entity will not be expected to approve and pay for services that were not approved.

Timely Filing

- If claims were submitted timely to the entity in which the member was enrolled at the time of service, but is beyond timely filing limits for the correct entity, DHH has directed the new entity to accept and honor previously met timely filing guidelines.
- Providers must furnish a copy of the EOB from the prior entity to support timely filing when appropriate.

Molina will recycle claims following the steps outlined below:

- Claims associated with member enrollment changes that occurred in the months of July, August and September 2013 that were paid by an incorrect entity, and those denied (Legacy and Shared Plan) incorrectly will be recycled.

- All recycled claims will carry new Edit 999 (Administrative Correction) signifying member retro enrollment or disenrollment.
- Claims which denied inappropriately with 313 (submit to FI), 506 (submit to Shared), and 507 (submit to Prepaid), will be reprocessed to either pay or deny with the appropriate denial edit. Providers must re-verify eligibility in MEVS and resubmit the claim to the appropriate entity. If subsequent denials occur based on reprocessing, the appropriate denial edit and edit 999 will appear on the claim(s).
- Molina will adjudicate claims that should have been billed to Legacy. Providers will not have to resubmit these claims.
- Claims that were paid by an incorrect entity (Shared or Legacy) will be voided. These voids will indicate the appropriate edit (506 and 507) in addition to the 999 edit, advising providers to re-verify eligibility in MEVS and resubmit the claim to the appropriate entity.

Where prior authorizations and/or timely filing are concerned, it will be necessary for providers to submit:

- A paper claim;
- A letter requesting the claim be processed per the retro enrollment/disenrollment procedures;
- A copy of the approved authorization from the entity in effect at the time of service where applicable; and
- A copy of the EOB from the entity in effect at the time of service where timely filing is involved.

NOTE: Prepaid Plans should be contacted individually about their procedures for handling claims related to retro enrollment/disenrollment situations.

Claims associated with member retro enrollment and/or disenrollment from the implementation of Bayou Health (February 2012 through June 2013) will be addressed in phases between all Plans and Molina. Further information will be posted on the www.lamedicaid.com site as it becomes available.

Welcome New LA AAP Chapter Officers

During the 2013 Pediatric Potpourri Annual Business Meeting, the new LA AAP Chapter Executive Committee members were inducted.

Przewszdnt- Dr. Bryan Siblzy

Vicz Przewszdnt- Dr. John Vanehizy

Szerztary- Dr. Chris Lzumas

Trzasurzy- Dr. Rachel Dawkins

At-Large members: Dr. Megan Gardner & Dr. Roberta Vicari

Immędiatę Past Przewszdnt- Dr. Jay Collinsworth

PROS Update

As recently featured in AAP News, PROS has published the results of the CEASE (Clinical Effort Against Secondhand Smoke Exposure) which demonstrated that pediatricians can, with brief training, counsel parents about smoking cessation and second and third hand smoke exposure during the pediatric encounter. The results were published in Pediatrics and can be accessed from the AAP.org website.

PROS is also continuing to recruit for the AHIPP study looking at teens and smoking cessation and social media. Doing the AHIPP study will also give MOC quality improvement credit for those in the middle of their ABP recertification. Many practitioners are finding it difficult to find the time to do everything they want and need to do, and the AHIPP study can help meet both needs by studying how to improve health for our teens and get MOC credit at the same time!

And those practitioners starting or just starting to feel comfortable with their EMR, ePROS, is recruiting practices for studies that can be done via the EMR. Studies in ePROS will relieve the burden of data gathering from the practitioner. And studies in ePROS will work toward helping define what is TRULY MEANINGFUL about meaningful use in EMR.

PROS also celebrates new additions to its leadership by the addition of Laurel Leslie, from Tufts University, and Alex Fiks, from Children's Hospital of Philadelphia, who both bring unique expertise and experience to our PROS and ePROS. They will be joining Mort Wasserman who has led PROS from its early beginning to expansion into ePROS.

PROS will be meeting again in Orlando as part of the NCE and will be discussing new studies coming down the pipeline. Any and all of you who will be attending the NCE are very welcome and encouraged to stop by our meeting on Friday and Saturday of the NCE. Check your program listing, or contact me at smartin@brclinic.com for more information, about the meeting or any of our upcoming studies or if you are interested in AHIPP.

Shelley M. Martin, MD FAAP
PROS Chapter Coordinator-Louisiana

Practitioners Needed for Research Study on Teen Tobacco & Social Media Use

The Pediatric Research in Office Settings (PROS) research network is seeking pediatric primary care providers for a new research study: Adolescent Health in Pediatric Practice (AHIPP). **AHIPP aims to improve the quality of preventive services for adolescents, specifically related to tobacco cessation and social media use.**

The AHIPP study:

Offers training in counseling teens on smoking cessation or social media

- Is relevant to daily practice
- Is easy to incorporate into busy offices

Qualifies for MOC Part 4 Credit!

- Pays a small stipend to your practice
- Is ready for you to enroll in today

We need pediatric practitioners that:

- **Work in primary care practices**
- **See at least 1 adolescent per week**
- **Have at least a 10% smoking rate among their adolescent patients**

A few more details about AHIPP:

- Practices will be randomly assigned to either the tobacco cessation or social media arm of the study
 - Participating practices will be asked to enroll 100 adolescents, regardless of smoking status, into the study
- After the teen's initial visit, your study involvement with the teen will end and AHIPP staff will complete all follow-up.

Full study information, including a recruitment video can be found at:

<http://www2.aap.org/pros/smokevideo.htm>

Practitioners interested in participating in the AHIPP study should **contact** Julie Gorzkowski, Project Manager, at AHIPP@aap.org or by phone at (847)434-7126.



We need you to make this study a success! Thank you for your consideration.

Governor Bobby Jindal Announces the Appointment of Cristina Zeretzke to the Louisiana Emergency Medical Services Certification Commission

BATON ROUGE – Today, Governor Bobby Jindal announced the appointment of Cristina Zeretzke to the Louisiana Emergency Medical Services Certification Commission.

The Louisiana Emergency Medical Services (EMS) Certification Commission serves to identify, define, and implement the appropriate functions and authorize pre-certification and post-certification training programs for emergency medical personnel.

According to the statute, the commission is comprised of nine voting members and one non-voting member, all appointed by the governor. The non-voting member must be a registered nurse and state-certified paramedic and is appointed from nominations submitted by the Louisiana State Nurses Association on recommendation from the Louisiana Emergency Nurses Association. The remaining nine voting members, selected from nominations from the EMS task force, which is comprised of individuals appointed by the assistant secretary of the Office of Public Health, include the following:

- One emergency medical services administrator representing the private sector;
- One emergency medical services administrator representing the public sector;
- Two certified emergency medical technician-paramedics and one emergency medical technician-basic (all must be certified as EMS instructors and at least one must be a full-time employee of a fire department);
- One physician from The American College of Emergency Physicians;
- One physician from The American College of Surgeons;
- One physician from Louisiana State Medical Society; and
- One Physician from the American Academy of Pediatrics.

Cristina Zeretzke, MD, of Baton Rouge, is a pediatrician at Our Lady of the Lake Physician Group. Dr. Zeretzke will be appointed to serve as a representative of the American Academy of Pediatrics, as required by statute.

Happy November Birthdays!

11/1	Rakhee Kalelkar, MD Bruce John Pistorius, MD, FAAP Neva Ducote Seago, MD, FAAP	11/14	Staci Marie Olistter, MD, FAAP Ashli Elizabeth West, MD, FAAP
11/3	Alison A Smith	11/15	Teresa Backes, MD Matthew Andres Calzetta, MD Phuong Dinh, MD Eleanor Gradidge, MD William W. Pinsky, MD, FAAP
11/5	Sheila G. Pitre, MD, FAAP Arun Kumar Pramanik, MD, FAAP Alexandra Wells, MD	11/16	Jennifer Almacen Bisquera, MD, FAAP
11/6	Robert D. Jackson, MD, FAAP Richard Paul Le Boeuf, MD, FAAP	11/17	Chih Hao Lin, MD, FAAP Joshua Earl Mizell, MD, FAAP
11/7	Jeffery Franklin, MD Arturo S Gastanaduy, MD, FAAP Nicole Lee Kerley-McGuire, MD, FAAP Alice Williamson, MD	11/18	Cherie Giroir Oertling, MD, FAAP Rose Paccione, MD Melinda Willis, MD, FAAP
11/8	Hitesh Chheda, MD Elizabeth B Lindsay, MD, FAAP Kristin D Lynch, DO	11/19	Toni Bowie Grant, MD, FAAP
11/9	Tara Ashley Andrews, MD John Andrew Love, MD, FAAP Moustafa Sirajedin Am Nachabe, MD, FAAP		
11/10	Amanda Garnett, MD Amy Zeringue, MD, FAAP		

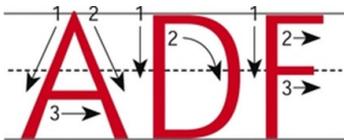


Birthdays continued

11/20	Emily Claire Davis Juan Jorge Gershanik, MD, FAAP	11/24	Wesley Lane Davis, MD, FAAP Bonita Havard Dyess, MD, FAAP Megan Murphy, MD
11/21	Anna Seal Guidry Tammy Mendoza Senentz, MD, FAAP Stephen Malcolm Weimer, MD, FAAP	11/25	Gretchen Gillyard Petterway, MD, FAAP
11/22	Meagan Teal Blanchard, MD Christina Holmes, MD Mark Joseph Waggenpack, MD, FAAP	11/26	Jennifer Alane Boustany, MD, FAAP Michelle Korah-Sedgwick, MD Jordan LeJeune, MD
11/23	Michael K Judice, MD, FAAP Lauren Adela Teverbaugh, MD	11/28	John Wesley Smith
		11/29	James Toliver Bennett, MD, FAAP Amy Marie Creel, MD, FAAP

Upcoming Events

ADF Distinguished Speaker Series– Developmental Disabilities in the Early Learning Landscape 11/14/13 | Baton Rouge, La



Academic Distinction Fund

**DISTINGUISHED
SPEAKER SERIES**



Jarrett Barnhill

MD, DLFAPA, FAACAP, NADD-CC

*Professor of Psychiatry, UNC School of Medicine
Autism and Developmental Disabilities Committee
American Academy of Child and Adolescent Psychiatry*

Thursday, November 14, 2013

Registration

4:00 - 4:30pm

Program

4:30 - 6:00pm

Crowne Plaza Hotel

4728 Constitution Avenue

Baton Rouge, LA 70808

Some of the questions to be addressed by Dr. Barnhill include:

- What are the early warning signs for recognizing severe developmental disorders in children?
- Are all developmental disorders treated the same way?
- What is the best age to start treatment interventions to maximize their benefits and chances of success? Do behavior problems sometimes mask developmental disorders and delay recognition and intervention?
- What practical advice can you offer to kindergarten teachers who are challenged in working with pre-school children who appear to have significant behavioral or psychiatric disorders?
- Are there any miracle drugs or magic bullets in treating children with developmental disabilities? Are medications overused in treatment interventions?
- What is the latest, most promising research being done in the field of Autism Spectrum Disorder (ASD)?

Professional Credits will be offered.

EBRPSS CLU's | Child Care Provider clock hours | Social Work CEU's | Counselor contact hours

More information coming soon.

Tulane Saturday Pediatric Series | 12/14/13 | New Orleans, La

**Tulane Saturday Pediatric Series
Update on Pediatric Nutritional and Infectious Disease Topics
December 14, 2013**

Registration 9:00 am – 10:00 am
Conference 10:00 am - 1:30 pm

Presented by

**Tulane University School of Medicine Department of Pediatrics
and the Center for Continuing Education
Tulane University Health Sciences Center**

Location

**Ralph's on the Park
900 City Park Avenue
New Orleans, LA**

Topics will include:

Update on Food Allergies
Diagnosis and Treatment of Otitis Media & Sinusitis
Update on Obesity / Metabolic Syndrome
Managing Parental Immunization Refusal

This activity has been approved for *AMA PRA Category 1 Credit™*.

Registration Fee is \$35
Online registration is open at <http://tulane.edu/cce/>