



**April 2021**



## What's Inside

- [Message from the Medical Directors' Corner](#)
- [Risk Adjustment: "History of" Is Not Always in the Past](#)
- [Update on Health Professional Shortage Area \(HPSA\)](#)
- [Billing with BH code 90837](#)
- [Provider Survey Coming Soon!](#)
- [Freespira Available to CCHP Members](#)
- [Referrals to Case Management Reminder](#)
- [Important Reminders](#)
  - [View up-to-date COVID-19 information](#)
  - [CCHP Contact Reminders](#)
  - [Subscribe to our Provider Newsletter](#)

---

## Message from the Medical Directors' Corner

CCHP has focused much of our efforts these past few months on ensuring our members have information about and access to the COVID-19 vaccine. We have navigated various hurdles since the vaccine roll-out late last year. Our first focus was on vaccine eligibility and which of our members met Wisconsin Department of Health Services requirements for the vaccine based on age, employment or health conditions.

On April 5, 2021, everyone age 16 and older became categorically eligible for the vaccine, so our focus shifted to vaccine availability; communicating to members where they could receive a vaccine and how they could secure an appointment. Over the last few weeks the vaccine availability challenge has shifted, as there are now many vaccine sites in communities with options of scheduled appointments or walk-in, business or extended hours. Pharmacies, health systems, health departments and community organizations have opened vaccine administration to all. Barriers remain with transportation and ease of accessing available clinics, and we continue to assist members who desire a vaccine to overcome these obstacles.

Since December, Wisconsin has made great strides in vaccine distribution with now over 40% of residents having received at least one dose. However, there is still a long way to go. Younger people, those living in poorer neighborhoods, and racial and ethnic minorities have been vaccinated at a far lower rate.

CCHP recognizes a major barrier to higher vaccination rates is that many of our members remain hesitant about obtaining a vaccine. This hesitancy may stem from a variety of factors such as the newness of the vaccine, the expedited FDA approval and historical mistrust of the healthcare system stemming from past unethical practices.

The recent concerns about side effects with the Johnson and Johnson vaccine may further reinforce these hesitancies. Our goal at CCHP is to arm our members with the information they need to make informed decisions about the safety and efficacy of the COVID-19 vaccine. Our website has up-to-date information with links to CDC, DHS and other reputable sources for members to learn more. We are conducting personalized outreach to those who have not been vaccinated to answer questions -- but that may not be enough. Our members -- your patients, look to you for advice on vaccination.

We encourage you to discuss COVID vaccination with each of your patients and help address their concerns during your encounters. Together we can help dispel myths

and raise comfort levels with obtaining a vaccine.

Please feel free to direct your patients to our [website](#) or our **Member Advocates phone line** at **(877) 900-2247**, as we are eager to help them find a vaccination site that will work for them, including arranging needed transportation.

As always we remain grateful for your partnership in this process, and in all of our collective efforts to optimize the health and well-being of our community.

Sincerely,

**Jim Slawson, MD**

Chief Medical Officer

Children's Community Health Plan

**Kelly Hodges, MD**

Medical Director

Children's Community Health Plan

[Back to Top](#)

---

## Risk Adjustment: "History of" is not always in the past

The phrase "history of" is used loosely among many practitioners. "History of" should only be used if the condition has resolved and no longer exists. Two documentation errors can occur if the phrase "history of" is not used properly:

1. If the phrase is used inappropriately for an active condition, the illness will not be captured as part of the patient's current health profile.
2. If the phrase is omitted for a condition that has resolved and is no longer being treated, there may be significant confusion surrounding the condition's validity as there might not be evidence to support the diagnosis.

All too often we see the following documentation for an active malignancy on a non-oncologic encounter: "Patient presents with chest tightness and SOB. She has a history of left breast cancer." Instead of documenting "history of" for an active condition, quantify it in terms of time. For best practice, also specify the site, and link the current treatment and frequency, if known. This will ensure your documentation is as complete as possible.

Now consider the following documentation: "Patient presents with chest tightness and SOB in the setting of upper-outer quadrant left breast cancer, which was diagnosed in December of 2020. Current treatment includes [drug name] administered [frequency]." Wow, what an improvement! Coders cannot assume, so clear cut statements are needed to ensure the proper diagnosis codes are assigned. While this type of documentation may seem cumbersome, documenting using specifics not only assists coders, but also allows for smoother continuity of care among providers.

In terms of risk adjustment, the phrase "history of" will lead coders, more often than not, to diagnosis codes from the categories Z85-Z87, which are used to highlight historical conditions. Unfortunately, these codes do not risk-adjust for personal history of breast cancer as they would for an active breast malignancy, which is why specific documentation supporting the condition is so important. Risk-adjustable conditions indicate the member is more prone to incur high dollar services. Centers for Medicare and Medicaid (CMS) recognizes these condition codes and provides additional funding to health plans to offset the costs of insuring these high-risk members. Although personal history "Z" codes do not risk-adjust, it is still critical to identify past medical conditions as they may affect current medical decision making.

### **Want more information?**

CCHP will be educating providers about risk adjustment on a continual basis. Please be on the lookout for more information. If you have any questions contact **Cortney Murray** by email at [CAMurray@chw.org](mailto:CAMurray@chw.org).

[Back to Top](#)

---

## **Update on Health Professional Shortage Area (HPSA)**

Providers can bill using a modifier for physicians or member that are located in a HPSA zip code. As a reminder, the billing location of a provider does not qualify for the use of a HPSA modifier. More information about billing for HPSA modifiers this can be found on [ForwardHealth](#).

[Back to Top](#)

---

## Billing with BH code 90837

When billing with CPT code 90837 for behavioral health services, there is specific criteria that needs to be met to properly use this code. As a reminder, this is not a code that is based solely on time spent with the patient. Documentation that supports the use of billing CPT 90837 should be reflected in the medical record and includes the items below:

- Date of service
- Length of session (start/end time), therapy time with patient and/or family
- Therapeutic maneuvers utilized
- Diagnosis for each visit related to treatment and therapy for the visit
- Progress or lack of progress to the goals
- Updates to treatment plan if necessary
- Provide signature (Electronic or written)

Please note: These services are **not** included in the “time” for the session:

- Time spent arranging services/appointments
- Time spent in communication with other healthcare providers
- Time spent documenting or providing reports

[Back to Top](#)

---

## Provider Survey Coming Soon!

Children’s Community Health Plan is interested in your feedback regarding our Utilization Management and Prior Authorization processes. We’re also interested in your opinion regarding peer-to-peer reviews and case management services.

Within the next week, we’ll be sending out a short survey in which you may provide us your feedback so we are able to better serve you and your patients.

[Back to Top](#)

## Freespira is Available to Your Patients

CCHP would like to remind you about our partnership with [Freespira, Inc.](#), the only FDA-Cleared digital therapeutic that can eliminate panic attacks and post-traumatic stress disorder (PTSD) symptoms in only 28 days. Freespira is available to all of CCHP's adult and adolescent\* members that are 13 years or older, including Medicaid patients, making it the first health plan to offer this novel digital treatment in Wisconsin.

Freespira is an innovative option for providers to add to their mental health toolkit for patients who suffer from panic attacks and PTSD. It's been proven to be effective at alleviating symptoms as well as proven to reduce overall healthcare costs. It is a win-win as the best way to improve the medical and social well-being of your patients and their communities.



 freespira

**FREE YOUR PATIENTS FROM PANIC ATTACKS AND PTSD SYMPTOMS IN 28 DAYS**

Freespira® is the only FDA-cleared digital therapeutic proven to significantly reduce or eliminate panic attacks and PTSD symptoms in adults and adolescents.\*

[CONTACT US TO LEARN MORE](#)

833.781.5509 | [cs@freespira.com](mailto:cs@freespira.com)

\*Freespira is indicated (FDA-cleared) as an adjunctive treatment of symptoms associated with panic disorder, panic attacks and/or PTSD in patients 18 and older. In younger patients Freespira has been evaluated and is being made available as permitted by FDA's COVID-19 Enforcement Discretion Guidance.

This breakthrough treatment addresses key physiological factors that cause panic attacks and PTSD symptoms, in a new medication-free way. The clinical evidence is compelling—**86%**<sup>1</sup> of Freespira users were panic attack-free **immediately** after treatment and **82%**<sup>2</sup> had significant PTSD symptom reduction at 6 months, which can include flashbacks and avoidance behaviors. To learn more about Freespira clinical outcomes and patient success, please [download](#) the white paper: **It's Not "All in Your Head"** A physiological approach to treating panic attacks and PTSD.

Freespira is extremely efficient: it takes just 4 weeks to complete, each twice-daily session only lasts 17 minutes, and the portable system can be used anywhere—your patient can focus on their breathing. Users receive real-time physiological feedback and guidance that teaches them to normalize respiration rate and exhaled carbon dioxide levels. The daily practice solidifies the necessary self-management skills so patients can benefit long after the treatment is complete.



Freespira is especially important for adolescents: nearly 3 million children have been diagnosed with a serious emotional or behavioral health condition during the pandemic according to the [Centers for Disease Control and Prevention](#) (CDC). Roughly **6%** of children ages 6 through 17 live with serious emotional or behavioral challenges, including severe anxiety, and trauma-related mental health conditions like PTSD, according to the CDC data.

As a CCHP provider, Freespira is immediately available to help you improve the lives of your patients with panic attacks and PTSD in 28 days. To learn more about Freespira for your practice or provider group, please [contact us](#) or call at 833-781-5509.

\* Freespira is indicated (FDA-cleared) as an adjunctive treatment of symptoms associated with panic disorder, panic attacks and/or PTSD in patients 18 and older. In younger patients Freespira has been evaluated and is being made available as permitted by FDA's COVID-19 Enforcement Discretion Guidance.

<sup>1</sup> Tolin DF, et al., Appl Psychophysiology Biofeedback. 2017; 42:51-58.

<sup>2</sup> Ostacher MJ\*, Investigation of the Freespira System in the treatment of PTSD. Submitted for publication. CAPS-5 = Clinician-Administered PTSD Scale for DSM-5; \*Reliable change index.

[Back to Top](#)

---

## Reminder: Referrals to Case Management

Case management services are available to help members navigate the health system and identify gaps in care they may have. Our Case Managers provide education on the member's diagnosis and medications, including helping members work with providers to review and reconcile medications. Case Managers can help identify and obtain needed DME, services and supports for the member, including connections to community resources to address social determinants of health.

To make a **referral for case management** please complete one of our Referral forms below and fax it to 414-266-1715 or call 414-266-3173.

- [BadgerCare Plus](#)
- [Together with CCHP](#)

[Back to Top](#)

---

## Important Reminders

### Review CCHP's Telehealth Policy & COVID-19

#### Updates

CCHP is working hard to stay up-to-date with the latest Telehealth and COVID-19 information for our providers. Remember to review our designated [Telehealth and COVID-](#)



[19 web page](#) for important information and updates. You may also reference our [Telehealth Billing Guide](#).

---

## CCHP Contact Reminders

To better assist our Providers please use the following contact information and resources regarding any questions you may have:

- **Provider Relations:** Please contact customer service first for assistance.
  - CCHP Badger Care Plus (800) 482-8010
  - Together with CCHP (844) 202-0117
  - [CCHPProviderRelations@childrenswi.org](mailto:CCHPProviderRelations@childrenswi.org)
- **Provider Demographic Updates:** Complete the appropriate form and email to the address below
  - [CCHP Badger Care Plus form](#)
  - [Together with CCHP form](#)
  - [CCHP-ProviderUpdates@chw.org](mailto:CCHP-ProviderUpdates@chw.org)
- **Provider Contracting:**
  - New providers: Complete [Letter of Interest form](#) which can also be found on our website
  - [CCHP-Contracting@chw.org](mailto:CCHP-Contracting@chw.org)
- **Provider Credentialing:**
  - [CCHP-Credentialing@chw.org](mailto:CCHP-Credentialing@chw.org)
- **Clinical Services:**
  - [CCHP-ClinicalServices@chw.org](mailto:CCHP-ClinicalServices@chw.org)
- **Provider Portal Registration:**
  - 414-266-4522
- **2020 Provider Claims/Appeal portal questions:**
  - [CCHPProviderRelations@childrenswi.org](mailto:CCHPProviderRelations@childrenswi.org)
- **Member Advocates:**
  - [CCHPAdvocates@chw.org](mailto:CCHPAdvocates@chw.org)

[Back to Top](#)

---

**Subscribe to Our Newsletter**

Children's Community Health Plan (CCHP), owned by Children's Hospital of Wisconsin, is an HMO dedicated to providing access to the highest quality health care and services to BadgerCare Plus and Together with CCHP members.

Want to change how you receive these emails?  
You can [update your preferences](#) or [unsubscribe from this list](#)