# **Reimbursement Guidelines**



## DEVELOPMENTAL SCREENINGS

This guideline is in reference to Samaritan Health Plan Operations' products for services performed by contracted providers. Payment for covered services rendered by contracted providers will be reimbursed at the contracted rate. This reimbursement guideline does not apply to inpatient per diem, DRG, or case rates. Samaritan Health Plan Operations reserves the right to amend a payment guideline at its discretion. CPT and HCPS codes are updated annually. Always use the most recent CPT and HCPCS coding guidelines.

#### **RELATED REIMBURSEMENT DOCUMENTS:**

Preventive Benefits Table; Modifier Pricing Table; CMS NCCI Edits; Prior Authorization List, PRC-11 Contracted Provider Types Policy

## DEFINITIONS

**Developmental screening**: The administration of a brief, validated, and standardized tool that aids the identification of children at risk for a developmental, behavioral or social delay. Developmental screening is an explicit part of the Bright Futures recommendations and is seen as a critical element of well-child care. Developmental screening should occur at standardized intervals following the Bright Futures Periodicity Schedule and as otherwise clinically indicated.

**Development screening tool:** A screening tool that addresses developmental domains including fine and gross motor skills, language and communication, problem solving/adaptive behavior, and personal-social skills. SHPO supports the use of the ASQ-3 as the standard tools providers should use. (See reference section)

**Bright Futures: Guidelines for Health Supervision of Infants, Children and Adolescents** is a compilation of well-child care guidelines produced in collaboration by the AAP, Health Resources and Services Administration (HRSA), Maternal, Child and Health Bureau (MCHB) and other child health experts. (See reference section)

## **GUIDELINE**

#### **SHPO reimburses:**

- Physicians, Nurse Practitioners (NPs) or Physicians Assistants (PAs). The reimbursement for the code is based on the provider's time reviewing the results and interpreting the findings with the family; it requires documentation that the screen was completed, the tool used, results achieved, and the action taken.
- Developmental screening services are reimbursed at 100% of the allowable amount in accordance with payment methodology systems defined in the provider contract, and in accordance with the member benefits.
- Appropriate modifier use will be reimbursed according to SHPO's modifier pricing.

#### SHPO does not reimburse:

- Early childhood professionals (e.g. home visitors, head start providers, and child care providers).
- Developmental Screen Services provided in a non-credentialed place of service.

## PREREQUISITES

Payment is based on member benefits, place of service where service was provided, provider type delivering the service (credentialed vs. ancillary provider type), member eligibility, and SHPO provider contractual agreements.

Developmental screenings do not require a prior authorization. However, any treatment as a result of, and outside of the developmental screening may require a prior authorization in accordance with plan benefits. Refer to the Prior Authorization List for each line of business.

## MEMBER COST SHARING

Developmental Screenings are considered preventive services and are provided to the members at a \$0.00 cost share for all lines of business when provided by an in-network provider, based on the CPT/HCPCS code billed.

Separate and distinct E/M services rendered during the same visit, and any treatment as a result of the developmental screening may include member cost share. Refer to the Summary of Benefits for each line of business to determine member cost share for these services.

## **PROVIDER BILLING GUIDELINES AND DOCUMENTATION**

#### **Developmental Screening:**

CPT Code	Description	Comments
96110	Developmental screening (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument. Cannot be billed with an E/M code unless it was a distinct service separate from the E/M service identified by a modifier 25.	May be initiated by childhood service providers, public health nurses, etc. Must be reviewed, interpreted, and discussed with a CCO network physician, NP or PA who completes the required steps to bill 96110.

#### **Developmental Screening Tools:**

The Health Services Commission's (HSC) Prioritized List of Health Services Guidelines requires that developmental screening tools be standardized, validated, and reliable.

SHPO recommends using:

• Ages and Stages Questionnaire (ASQ-3)

Other available tools for use which are reimbursable by SHPO are:

- Battelle Developmental Inventory Screening Tool (BDI-ST)
- Bayley Infant Neuro Developmental Screening (BINS)
- Brigance Screens-II
- Child Developmental Inventory (CDI)
- Parents Evaluation of Developmental Status (PEDS), with or without the Developmental Milestones (DM).
- Infant Development Inventory

However, SHPO encourages the use of the Ages and Stages Questionnaire (ASQ-3).

The ASQ-SE and M-CHAT are specific screens and should NOT be considered for general development screening.

#### **Eligible Provider Types:**

- Physicians
- Nurse Practitioners (NP)
- Physicians Assistants (PA)
  - Another Health Care Provider (Public Health Nurse, etc.) or early learning and development provider (ELDP, Head Start provider, etc.) may initiate a developmental screen with family as long as the screening tool and full set of answers are shared with the primary care provider who then completes the required steps of interpretation, documentation, and discussion with the family.

#### QUALIFICATIONS

- Retain documentation confirming that staff providing screening services meet the training, education, and supervision requirements.
  - Review the results of a standardized, validated general development screening tool (ASQ-3) in the context of a clinic visit,
    - Validate general development screening tool in the context of a clinic visit
      - o Interpret the findings with family
      - o Include the appropriate documentation in the chart (the tool used, results, actions taken)

## RESOURCES

Bright Futures website: <u>https://brightfutures.aap.org/states-and-communities/Pages/Oregon.aspx</u>

Periodicity Chart: http://brightfutures.org/pocket/pdf/appendices.pdf

ASQ Oregon: <a href="http://www.asqoregon.com/">http://www.asqoregon.com/</a>

Ages and Stages Questionnaires: http://www.brookespublishing.com/resource-center/screening-and-assessment/asq/

OHA Metric Guidance: <u>http://www.oregon.gov/oha/analytics/CCOData/Developmental%20Screening%20Guidance%20Document%20--%20revised%20Dec%202014.pdf</u>

## **PUBLICATION HISTORY**

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