

POLICY TITLE: PCMH: Qualified Health Care Professionals

POLICY NUMBER: 10/0052/R0

POLICY STATEMENT: As part of the Patient-Centered Medical Home initiative, non-physician qualified health care professionals working in a participating primary care provider practice will be able to provide specific services to our members for the telephone codes.

IMPLEMENTATION DATE: April 1, 2009

REVIEW/REVISION

HISTORY:

STATUS: Original

APPROVAL BODY: PCMH Steering Committee

APPROVAL DATE: 1/7/09

AUTHOR(S): Sr. Administrator, Patient-Centered Medical Home

BACKGROUND:

DEFINITIONS:

Patient-Centered Medical Home (PCMH) is an approach to providing comprehensive primary care for children, youth and adults. The PCMH is a health care setting that is comprehensive, compassionate, culturally sensitive and facilitates partnerships between individual patients, and their personal physicians, and when appropriate, the patient's family.

Qualified Health Care Professionals: Priority Health defines QHPs as RNs, Certified Nurse Practitioners, Physician's Assistants, Licensed Masters-level Social Workers (LMSW), Psychologists (LLP and PhD), Certified Diabetes Educators, Registered Dieticians or Master of Science-Trained Nutritionists, Clinical Pharmacists and Respiratory Therapists.

POLICY DESCRIPTION:

Telephone assessment and management services performed by non-physician, qualified health care professionals contracted under our fully funded lines of business only, will be reimbursable. Priority Health recognizes the CPT handbook as the foundation for the payment criteria but will only recognize and reimburse for these services if provided by a QHP.

CPT codes: Telephone assessment and management services codes applicable to this policy are 98966, 98967 and 98968.

Payment: No deductibles or copays will be applied when performed in a participating primary care physician office for patients covered by fully funded products. All office-based services need to be billed under the supervising, participating primary care physician. The PCMH initiative is to pay primary care providers on West and North fee schedules or East Region providers who are on standard Priority Health contracts (unless part of a contractual agreement).

SUPPORTING DOCUMENTATION:

Reference Documentation: CPT standard edition 2008

Policies and Procedures: Mid-Level Provider Payment Policy 10/5049/R2

MONITORING AND COMPLIANCE VERIFICATION: Practices may be required to provide proof of licensure for the qualified health care professional.

OPERATIONAL AREAS IMPACTED: Provider Network Services, Finance, Contracting, Provider Configuration, Product Development, Customer Service, and Sales

SPECIAL NOTES (I.E., PRODUCTS AFFECTED): Self-Funded, Shared Funding, Medicare and Medicaid excluded.

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