



TEXAS  
Health and Human  
Services

# **Texas Health Steps**

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# **Presentation**

# Texas Health Steps – PROVIDER – Resource Directory

Revised 06/22/20

## Department of State Health Services - Public Health Region 07

**DSHS – THSteps Provider Relations Staff**  
[www.dshs.state.tx.us/region7/default.shtm](http://www.dshs.state.tx.us/region7/default.shtm)

**Texas Health Steps Related Program Numbers**  
[www.dshs.texas.gov/thsteps/providers.shtm](http://www.dshs.texas.gov/thsteps/providers.shtm)

THSteps Team Lead    Kimberly Langley    254-760-1176	Texas Health Steps Hotline – <i>find a Medicaid provider</i> 877-847-8377
Deneice.Pryor    Burnet, Llano, Travis- <b>N</b> of 183, Williamson @dshs.texas.gov    512-789-2156	Texas Health Steps <b>Quick Reference Guide</b> : <a href="http://www.tmhp.com/TMHP_File_Library/Provider_Manuals/THSTepsQRG/THSTeps_QRG.pdf">www.tmhp.com/TMHP_File_Library/Provider_Manuals/THSTepsQRG/THSTeps_QRG.pdf</a>
Marjorie.Douglas    Blanco, Caldwell, Hays, Travis- <b>S</b> of 183 @dshs.texas.gov    254-231-9029	Medical Transportation Program <a href="http://www.txmedicaidride.net">www.txmedicaidride.net</a> - <i>client online reservations</i> <a href="http://www.txhealthsteps.com/hhscs-medical-transportation-program">www.txhealthsteps.com/hhscs-medical-transportation-program</a> 877-633-8747
Alex.Flores    Bell, Bosque, Coryell, Falls, Freestone, Hamilton, Hill, Lampasas, Limestone, McLennan, Mills, San Saba @dshs.texas.gov    254-624-7389	THSteps Specimen Logistics    Kelli Connell email: ClinicalChemistry@dshs.texas.gov    Karen Semmelmann    512-776-6236 512-776-6237
Alice.Watkins    Bastrop, Brazos, Burleson, Fayette, Grimes, Lee, Leon, Madison, Milam, Robertson, Washington @dshs.texas.gov    254-771-6792	Laboratory Kit and Supplies    THSteps    512-776-7661 <a href="http://www.dshs.texas.gov/lab/mrs_forms.shtm">www.dshs.texas.gov/lab/mrs_forms.shtm</a> Newborn Screening    776-7111 x2437
THSteps Provider and Customer Service Number: 800-789-2865 THSteps Adm. Staff - LaCrisha Banks: 254-771-6752	
<b>Health &amp; Human Services Commission</b> 512-794-5143 <a href="http://www.hhs.texas.gov/">www.hhs.texas.gov/</a>	
<b>Complaints &amp; Inquires**</b> Managed Care: hpm_complaints@hhsc.state.tx.us Fee For Service: oversight@hhsc.state.tx.us <b>** Copy DSHS PR on emails</b>	Newborn Screening    email: NewbornScreeningLab@dshs.texas.gov    888-963-7111 <a href="http://www.dshs.texas.gov/lab/newbornscreening.shtm">www.dshs.texas.gov/lab/newbornscreening.shtm</a> x 7333
HHSC Services & Programs: <a href="https://hhs.texas.gov/services">https://hhs.texas.gov/services</a>	
Ombudsman <i>Investigates &amp; helps settle complaints</i> Email: contact@hhsc.state.tx.us www.hhs.texas.gov/ombudsman    877-787-8999	ImmTrac Software / Installation    254-771-6773 <a href="http://www.dshs.texas.gov/immunize/immtrac/default.shtm">www.dshs.texas.gov/immunize/immtrac/default.shtm</a>
Medicaid Fraud / Abuse & Waste Reporting    800-436-6184 <a href="https://oig.hhsc.texas.gov/report-fraud">https://oig.hhsc.texas.gov/report-fraud</a>	ImmTrac Help Desk    ImmTrac@dshs.state.tx.us Registry: <a href="http://immtracforeveryone.com/en/welcome">http://immtracforeveryone.com/en/welcome</a> 800-252-9152
Medicaid Managed Care – Regional Partnership Specialist    512-206-5641 @hhsc.texas.gov	Vaccine Coordinator    254-771-6772 <a href="http://www.dshs.texas.gov/region7/ImmunizationProgram.shtm">www.dshs.texas.gov/region7/ImmunizationProgram.shtm</a>
<b>Texas Medicaid Healthcare Partnership - Provider Relations Staff</b> <a href="http://www.tmhp.com">www.tmhp.com</a> 800-925-9126 <a href="mailto:provider.relations@tmhp.com">provider.relations@tmhp.com</a>	
Korey.Reeder    Bell, Bosque, Brazos, Burleson, Burnet, Coryell, Falls, Hamilton, Lampasas, Llano, McLennan, Milam, Mills, San Saba, Williamson- <b>N</b> @tmhp.com	Vision & Hearing Certification    Paul Gonzalez or    254-770-6023 <a href="http://www.dshs.texas.gov/vhs">www.dshs.texas.gov/vhs</a> <b>DSHS THSteps PR Staff</b> 800-789-2865
Joshua.Haley    Bastrop, Blanco, Caldwell, Fayette, Hays, Lee, Travis, Washington, Williamson- <b>S</b> (zips-78634, 78681, 78717, 78727, 78728, 78729, 78750, 78759) @tmhp.com	THSteps <b>Brochures</b> : <a href="http://www.dshs.texas.gov/thsteps/THStepsCatalog.shtm">www.dshs.texas.gov/thsteps/THStepsCatalog.shtm</a> THSteps <b>Periodicity</b> : <a href="http://www.dshs.texas.gov/thsteps/providers.shtm">www.dshs.texas.gov/thsteps/providers.shtm</a>
Christopher.Morales    Grimes, Leon, Madison, Robertson @tmhp.com    Vanessa.Parker    Freestone, Hill, Limestone @tmhp.com	Early Childhood Intervention Program (ECI)    800-628-5115 <a href="http://hhs.texas.gov/services/disability/early-childhood-intervention-services">hhs.texas.gov/services/disability/early-childhood-intervention-services</a>
<b>TMHP PR RECRUITING</b> <a href="http://www.tmhp.com/Pages/Education/Ed_Home.aspx">www.tmhp.com/Pages/Education/Ed_Home.aspx</a> <a href="mailto:provider.enrollment.mailbox@tmhp.com">provider.enrollment.mailbox@tmhp.com</a>	
Victor.DeLosSantos    30 counties in Region 07 SDA @tmhp.com    512-506-7762	Case Management:    Kim Langley    254-760-1176 <a href="http://www.dshs.texas.gov/caseman/">www.dshs.texas.gov/caseman/</a> Alicia Lopez    254-231-5066
<b>TMHP PR RECRUITING</b> <a href="http://www.tmhp.com/Pages/Education/Ed_Home.aspx">www.tmhp.com/Pages/Education/Ed_Home.aspx</a> <a href="mailto:provider.enrollment.mailbox@tmhp.com">provider.enrollment.mailbox@tmhp.com</a>	
Provider Information Change Form (PIC) <a href="http://www.tmhp.com/Provider_Forms/Provider%20Enrollment/Provider-Information-Change-Form.pdf">www.tmhp.com/Provider_Forms/Provider%20Enrollment/Provider-Information-Change-Form.pdf</a>	For client <b>'No Show'</b> – Provider Outreach Referral Form    *512-437-3569 <a href="http://www.dshs.texas.gov/thsteps/POR.shtm">www.dshs.texas.gov/thsteps/POR.shtm</a> Fax#    512-533-3867
www.tmhp.com/Manuals_PDF/TMPPM/TMPPM_Living_Manual_Current/2_Childrens_Services.pdf	Child Health Clinical Records, Medical Forms, Risk Assessments    512-458-7111 <a href="http://www.dshs.texas.gov/thsteps/forms.shtm">www.dshs.texas.gov/thsteps/forms.shtm</a> 888-963-7111
THSteps Medical Inquires    800-757-5691    THSteps Dental Inquires    800-568-2460	<b>FREE</b> - Online Continuing Education Credits    512-776-7745 <a href="http://www.txhealthsteps.com/cms">www.txhealthsteps.com/cms</a>
EDI Help Desk    healthIT@tmhp.com    888-863-3638	Developmental Screening Assessment Tools <a href="http://www2.aap.org/sections/dbpeds/">www2.aap.org/sections/dbpeds/</a> <a href="http://www.agesandstages.com/">www.agesandstages.com/</a> <a href="http://www.pedstest.com/">www.pedstest.com/</a> <a href="http://www.m-chat.org/">www.m-chat.org/</a> Bright Futures: <a href="https://brightfutures.aap.org/materials-and-tools/Pages/default.aspx">https://brightfutures.aap.org/materials-and-tools/Pages/default.aspx</a>
Language Line Services    *211 Referral Services available*    800-752-6096	

Provider Relations Staff – STAR Program HEALTH Plans				Provider Relations Staff – STAR Program DENTAL Plans			
<b>Amerigroup:</b> https://providers.amerigroup.com/pages/home.aspx Grievance Mgr: Dolores.Perez@amerigroup RVP: Roland.Valle@amerigroup dl-txmemberadvocates@anthem.com		<b>800-454-3730</b> 512-800-0779		<b>MCNA:</b> www.mcna.net/en/providers-overview <b>MA:</b> egarcia@mcna.net Mbr Adv: Melissa Velasquez mvelasquez@mcna.net PR: Ernest Garcia		<b>855-776-6262</b> 800-494-6262	
Deborah.Munoz@anthem.com <i>PR Manager</i> 210-563-1221		Yvonne.Rivera@amerigroup.com 210-243-7574		Maria Parmenter mparmenter@mcna.net Bastrop, Bell, Blanco, Brazos, Burleson, Burnet, Caldwell, Coryell, Falls, Hays, Lampasas, Lee, Llano, McLennan, Milam, Robertson, Travis, Williamson		ext. 531	
Stephanie.Short@anthem.com 210-238-2804		Carolina.Cortez@anthem.com 210-383-5813		Tania Alonso talonso@mcna.net Madison	ext. 820	Veronica Garcia vgarcia01@mcna.net Corporate dental offices in Region 07	ext. 884
Bastrop, Bell, Blanco, Bosque, Brazos, Burleson, Coryell, Falls, Freestone, Grimes, Hamilton, Hays, Hill, Lampasas, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Travis, Washington, Williamson				Rosalinda Garcia rgarcia@mcna.net Fayette	ext. 885	Veronica Manriquez vmanriquez@mcna.net Franklin, Freestone, Leon, Limestone	ext. 149
<b>Superior:</b> www.superiorhealthplan.com/providers.html Member Advocate: <b>contact your PR *email:</b> @superiorhealthplan.com		<b>877-391-5921</b> <b>800-218-7453</b>		Regina Giron rgiron@mcna.net Grimes, Washington	ext. 818	Araceli Sepulveda asepulveda@mcna.net Bosque, Hamilton, Hill, Mills, San Saba	ext. 421
Sandra.Salinas	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson <i>*Specialists Only – All Counties</i>	ext. 85939		<b>DentaQuest:</b> www.dentaquest.com/state-plans/regions/texas Member Advocate: VACANT @dentaquest.com 512-231-4154			<b>800-516-0165</b> 800-685-9971
Nakisha.Montgomery	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson <i>*FQHC's &amp; Clinics</i>	ext. 66745		Rebecca.Alderete@dentaquest.com Region 07			512-352-6643
Linda.Stephenson	Brazos, Burleson, Grimes, Leon, Madison, Milam, Robertson, Washington	ext. 65430		Shalenski.Youngblood@greatdentalplans.com FQHC's			409-227-4339
Angela.Taylor	Bell, Bosque, Coryell, Falls, Freestone, Hamilton, Hill, Lampasas, Limestone, McLennan	ext. 48572		<b>UnitedHealthcare Dental:</b> Contracting: Patricia_Logan Provider Services: swproviderservices@uhc.com <b>*email:</b> @uhc.com			800-527-1764
Darian.Terry	Blanco, Llano, Mills, San Saba	ext. 82608		Audrie_A_Sanchez	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson		763-361-2104
<b>Dell Children's:</b> www.dellchildrenshealthplan.com/providers Member Advocate: Esmeralda.Vera@anthem.com Grievance Mgr: Dolores.Perez@amerigroup.com		<b>888-821-1108</b> 512-382-4996 512-382-4987		Tami_Dentley	Bell, Blanco, Bosque, Brazos, Burleson, Coryell, Falls, Freestone, Grimes, Hamilton, Hill, Lampasas, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Washington		763-361-4190
Rene' Manuel Duran rmduran@ascension.org	Bastrop, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Williamson	512-324-3350 ext. 17082		<b>Client Eligibility / Outreach Services</b> www.YourTexasBenefitsCard.com			
Gretchen.Bieber @ascension.org		512-324-3350 ext. 17378		STAR Program Client Enrollment		800-964-2777	
<b>BlueCross/BlueShield:</b> www.bcbstx.com/provider Member Advocate: Chelo_Izquierdo@bcbstx.com PR Manager: Amy_D_Mizell@bcbstx.com <b>*email:</b> @bcbstx.com		<b>888-212-1615</b> 512-349-4887 512-349-4844		STAR Kids – <i>program for Medicaid clients with disabilities</i>		877-782-6440	
				THSteps and STAR Outreach and Informing www.maximus.com www.txmedicaidevents.com/ Mgr: JudySchoenfelder@maximus.com		877-847-8377 512-919-1619	
<b>Additional Numbers / Web Sites</b>							
Brien_McKinzie	Burleson, Caldwell, Coryell, Freestone, Grimes, Hamilton, Lampasas, Lee, Llano, Madison, McLennan, Washington	512-349-4820		First Dental Home - Department of State Health Services www.txhealthsteps.com/cms/ www.dshs.texas.gov/dental		512-776-2110 512-776-7323	
Tammy_Tschirhart	Blanco, Coryell, Falls, Freestone, Grimes, Hamilton, Hill, Lampasas, Leon, Limestone, Llano, McLennan, Milan, Mills, Robertson, San 'Saba, Washington	817-826-8301		Health & Human Services – Foster Enrollment hhs.texas.gov/services/safety/foster-care-and-adoption		866-439-2042 866-708-8795	
Rick Olivas ricardo_olivas	Blanco, Caldwell, Lampasas, Lee, Llano, McLennan, Milam	512-795-5934		CSHCN Program www.dshs.texas.gov/cshcn Reg 07-Martha Calderon Austin Headquarters		512-873-6315 800-252-8023	
Vicki_Charlot	Burleson, Caldwell, Freestone, Grimes, Hill, Lee, Leon, Limestone, Madison, Milam, Robertson, San Saba, Washington	713-354-7456		Texas Health Match – Job site for Careers in Healthcare www.texashealthmatch.com		888-963-7111	
<b>ALL PR's also cover:</b> Bastrop, Bell, Brazos, Burnet, Fayette, Hays, Travis, Williamson				Prescription Assistance: www.rxassist.org www.goodrx.com www.themedicineprogram.com www.rxmedassist.com		877-844-8442 573-996-7300	
<b>RightCare – S &amp; W:</b> http://rightcare.swhp.org Member Advocate: Tamara.Campbell <b>*email:</b> @bswHealth.org		<b>855-897-4448</b> 254-298-6097		Texas Vendor Drug Program: Prior Authorizations www.txvendordrug.com/ https://paxpress.txpa.hidinc.com		877-728-3927	
Ankur.Sharma	Bastrop, Blanco, Brazos, Burleson, Burnet, Caldwell, Hays, Lampasas, Lee, Leon, Llano, Madison, Milam, Robertson, San Saba, Travis, Williamson	254-307-9516		Child Abuse Hotline www.txabusehotline.org/		800-252-5400	
Richard.Hinkley	Bell, Bosque, Coryell, Falls, Fayette, Freestone, Grimes, Hamilton, Hill, Limestone, McLennan, Mills, Washington	512-693-9859		Medicaid/CHIP Benefits: hhs.texas.gov/services/health/medicaid-chip Medicaid: 800-252-8263 CHIP: 877-543-7669		<b>211</b>	

# Overview

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- Background
- Texas Health Steps Medical
  - Scheduling
  - Checkup Components
  - Laboratory
  - Special Circumstances
  - Documentation and Billing
- Texas Health Steps Dental
- Related Programs and Resources



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# Useful WEB Links for THSteps

## ***THSteps USEFUL WEB LINKS FOR PROVIDERS***

07/2020

DEPARTMENT OF STATE HEALTH SERVICES: <http://www.dshs.state.tx.us/>

HEALTH & HUMAN SERVICES: <https://hhs.texas.gov/>

TEXAS MEDICAID HEALTHCARE PARTNERSHIP:

[http://www.tmhp.com/Pages/Medicaid/Medicaid\\_home.aspx](http://www.tmhp.com/Pages/Medicaid/Medicaid_home.aspx)

- Policy Procedures Manual (TMPPM):  
[http://www.tmhp.com/Pages/Medicaid/Medicaid\\_Publications\\_Provider\\_manual.aspx](http://www.tmhp.com/Pages/Medicaid/Medicaid_Publications_Provider_manual.aspx)
- Children's Services Handbook:  
[http://www.tmhp.com/Manuals\\_PDF/TMPPM/TMPPM\\_Living\\_Manual\\_Current/2\\_Childrens\\_Services.pdf](http://www.tmhp.com/Manuals_PDF/TMPPM/TMPPM_Living_Manual_Current/2_Childrens_Services.pdf)
- Provider Change Form:  
[http://www.tmhp.com/Provider\\_Forms/Provider%20Enrollment/F00114\\_Provider\\_Information\\_Change\\_Form.pdf](http://www.tmhp.com/Provider_Forms/Provider%20Enrollment/F00114_Provider_Information_Change_Form.pdf)

THSteps WEB LINKS: <https://hhs.texas.gov/doing-business-hhs/provider-portals/health-services-providers/texas-health-steps/medical-providers>

- <https://www.txhealthsteps.com/texas-health-steps-medicaid-resource-center>

THSteps PERIODICITY SCHEDULE: <http://www.onlineordersff.com/images/pdfs/21965.pdf>

ECI: <https://hhs.texas.gov/doing-business-hhs/provider-portals/assistive-services-providers/early-childhood-intervention-programs/eci-materials-ordering-systems>

HEALTH RECORD FORMS/SCREENING TOOLS: <https://hhs.texas.gov/doing-business-hhs/provider-portals/health-services-providers/texas-health-steps/forms>

- Medical Checkup
  - Developmental and Mental Health Screenings: M-CHAT, Postpartum Depression, Mental Health screening tools  
[https://toolkits.solutions.aap.org/selfserve/ssPage.aspx?SelfServeContentId=screening\\_tools](https://toolkits.solutions.aap.org/selfserve/ssPage.aspx?SelfServeContentId=screening_tools)
- TB Questionnaire
  - <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/health-services-providers/thsteps/thb-tb-questionnaire.pdf>
  - <https://www.dshs.state.tx.us/idcu/disease/tb/>
- Hearing Screening Questionnaire
  - <https://www.dshs.texas.gov/tehdj/Audiology-Services-Hearing-Checklist.aspx>
- Laboratory Tests
  - [https://dshs.texas.gov/lab/MRS\\_forms.shtm](https://dshs.texas.gov/lab/MRS_forms.shtm)
  - Lab Requirements Table <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/health-services-providers/thsteps/thb-med-checkup-lab-reqs.pdf>
  - Newborn Screening <http://www.dshs.state.tx.us/newborn/default.shtm>
  - Forms/Supplies [https://www.dshs.texas.gov/lab/mrs\\_forms.shtm#supplies](https://www.dshs.texas.gov/lab/mrs_forms.shtm#supplies)
  - Lead/Reporting forms <https://www.dshs.state.tx.us/lead/providers.shtm#screening>  
<https://www.dshs.state.tx.us/lead/child.shtm>
  - Specimen Collection [https://dshs.texas.gov/lab/mrs\\_specimens.shtm](https://dshs.texas.gov/lab/mrs_specimens.shtm)
- Referrals
- Growth Charts
  - [https://www.cdc.gov/growthcharts/who\\_charts.htm](https://www.cdc.gov/growthcharts/who_charts.htm)
  - [https://www.cdc.gov/growthcharts/cdc\\_charts.htm](https://www.cdc.gov/growthcharts/cdc_charts.htm)
- Additional Questionnaires, Forms and Tools

BRIGHTFUTURES: <https://brightfutures.aap.org>

- [https://toolkits.solutions.aap.org/DocumentLibrary/BFTK2e\\_Links\\_Screening\\_Tools.pdf](https://toolkits.solutions.aap.org/DocumentLibrary/BFTK2e_Links_Screening_Tools.pdf)

# What is Texas Health Steps?

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## Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)

Federal Law in 1989 - Omnibus Budget Reconciliation Act (OBRA)

Social Security Act (SSA)

Comprehensive Care Program (CCP)



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# Statutory Requirements

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- Communicable Disease Reporting
- Early Childhood Intervention (ECI) referrals
- Parental Accompaniment
- Newborn Blood Screen
- Newborn Hearing Screen
- Critical Congenital Heart Disease (CCHD) Screen
- Blood Lead Level Screen
- Abuse and Neglect Reporting

[Texas Medicaid Provider Procedures Manual](#) (TMPPM)

Children's Services Handbook

5.1.2: THSteps Statutory State Requirements



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# Compliance with Federal Legislation

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- **HHSC complies with Health & Human Services (HHS) regulations that protect against discrimination.**
- **All contractors must agree to comply with the following:**
  - Title VI of the *Civil Rights Act of 1964* (Public Law 88-352)
  - Section 504 of the *Rehabilitation Act of 1973* (Public Law 93-112)
  - *The Americans with Disabilities Act of 1990* (Public Law 101-336)
  - Title 40, Chapter 7 of the TAC *Health and Safety Code 85.113* as described in “Model Workplace Guidelines for Businesses, State Agencies, and State Contractors” on page G-2.



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# Scope of Texas Health Steps Services

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- Periodic Medical Checkups
- Dental Checkups and Treatment Services
- Diagnosis of Medical Conditions
- Medically Necessary Treatment and Services



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# **Texas Health Steps Medical Checkup**

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# Texas Health Steps Checkup Scheduling

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## Selecting a provider

**Checkups** - In fee-for-service (FFS) Medicaid, clients have freedom of choice when choosing a Texas Health Steps checkup provider. In managed care, a client needs to contact their health plan to determine how to access Texas Health Steps checkups.

**Treatment (If non PCP)** - Referral may be required through PCP for evaluation and/or management of conditions identified during a Texas Health Steps medical checkup.



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# Texas Health Steps Checkup Scheduling

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## **New Medicaid Clients:**

For FFS - Should receive a Texas Health Steps checkup within 90 days of receiving their Medicaid eligibility.

For Managed Care - Should receive a Texas Health Steps checkup within 90 days of enrollment in Managed Care Organization (MCO).

Allowance to 90-day requirement can be made if the provider has documentation of a previous checkup and child is current/not due for a checkup.



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# Texas Health Steps Checkup Scheduling

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Checkups should be scheduled based on the ages indicated on the *Texas Health Steps Medical Checkup Periodicity Schedule* (publication E03-13634).

Families should be encouraged to schedule as soon as the child becomes due for a checkup.



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# Texas Health Steps Checkup Scheduling

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## **Children less than 36 months of age**

- Checkups are due at more frequent intervals.

## **Children 3 years and older**

- Should have a yearly checkup as soon as they become due.
- May be completed anytime after their birthday (timely).
- Will not be considered late unless the child does not have the checkup prior to their next birthday.



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# Texas Health Steps Checkup Scheduling



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Age Range Allowed	Number of Checkups
Birth through 11 months <i>(Does not include the newborn or 12 months)</i>	6
1 through 4 years of age	7
5 through 11 years of age	7
12 through 17 years of age	6
18 through 20 years of age	3

# Texas Health Steps Checkup Scheduling

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## **This allows:**

- More flexibility in scheduling Texas Health Steps checkups.
- Scheduling more than one child for a checkup at the same time.
- Avoiding a checkup during flu season.
- Scheduling a checkup prior to or after returning to their home communities for children of migrant workers.



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# Checkup Timeliness for Managed Care

## New Members

- Newborns within 14 days of enrollment.
- All other children, within 90 days of enrollment.

## Existing Members

- For children under age 36 months, a checkup is defined as timely if received within 60 days beyond the periodic due date based on their birth date.
- For children 36 months and older, a checkup is defined as timely if it occurs within 364 calendar days after the child's birthday in a non-leap year or 365 calendar days after the child's birthday in a leap year.
- Checkups received before the periodic due date are not reportable as timely medical checkups.



# Medical Home

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HHSC and Texas Health Steps encourage the provision of the Texas Health Steps medical checkup as part of a medical home. Texas Medicaid defines a medical home as a model of delivering care that is:

- Accessible
- Continuous
- Comprehensive
- Coordinated
- Compassionate
- Culturally Competent
- Family-centered



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# DON'T MISS A BEAT BROCHURE - 22661



## What is Texas Health Steps?

Texas Health Steps is health care for children birth through age 20 who have Medicaid.

### Texas Health Steps gives your child:

- Free medical checkups starting at birth.
- Free dental checkups starting at 6 months of age.

Call 877-847-8377 (877-THSteps) to find out how Texas Health Steps can help your child stay healthy.

### Checkups:

- Find health problems before they get worse and harder to treat.
- Prevent health problems that make it hard for your child to learn and grow.
- Help your child have a healthy smile.

### Call Texas Health Steps if you:

- Need help finding a doctor or dentist.
- Need help setting up a checkup.
- Have questions about checkups or Texas Health Steps.
- Need a case manager to help you find and get other services.

## Checkups and a Whole Lot More!

If your child's doctor or dentist finds a health problem during a checkup, your child can get the care they need:

- Eye exams and glasses.
- Hearing tests and hearing aids.
- Other health and dental care.

### Finding a Ride to the Checkup

If you need a ride to get to your child's checkup, call us toll-free:

- Houston/Beaumont area: 855-687-4786
- Dallas/Ft.Worth area: 855-687-3255
- All other areas: 877-633-8747 (877-MED-TRIP)

For children birth through age 20 who have Medicaid

## Don't miss a beat.

Make sure your children get their regular Texas Health Steps medical checkups.



MyChildrensMedicaid.org | 877-847-8377



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Health and Human  
Services



EPSDT-06 8/18



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# DON'T MISS A BEAT TEEN BROCHURE - 22708



For people age 20 and younger who have Medicaid

## Don't miss a beat.

Get the most from regular Texas Health Steps medical and dental checkups.



EPST-05T 8/18

### What is Texas Health Steps?

It's health care for people age 20 and younger who have Medicaid.

#### Texas Health Steps gives you:

- Free medical checkups once a year.
- Free dental checkups every 6 months.

Call 877-847-8377 (877-THSteps) to find out how Texas Health Steps can help you stay healthy.

#### Checkups:

- Find health problems before they get worse and harder to treat.
- Prevent health problems that make it hard for you to feel your best.
- Help you keep a healthy smile.

#### Call Texas Health Steps if you:

- Need help finding a doctor or dentist.
- Need help setting up a checkup.
- Have questions about checkups or Texas Health Steps.
- Need a case manager to help you find and get other services.



### Checkups and a Whole Lot More!

If your doctor or dentist finds a health problem during a checkup, you can get the care you need:

- Eye exams and glasses.
- Hearing tests and hearing aids.
- Other health and dental care.

#### Finding a Ride to the Checkup

If you need a ride to get to your checkup, call us toll-free:

- Houston/Beaumont area: 855-687-4786
- Dallas/Ft.Worth area: 855-687-3255
- All other areas: 877-633-8747 (877-MED-TRIP)



MyChildrensMedicaid.org | 877-847-8377





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# **Texas Health Steps Checkup Required Components**

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# Medical Checkup Requirements

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## Federally Mandated Components

- Comprehensive Health and Developmental History
- Comprehensive Unclothed Physical Examination
- Immunizations
- Laboratory Screening
- Health Education/Anticipatory Guidance

## State Requirement

- Dental referral every 6 months until a dental home is established.



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# Texas Health Steps Medical Checkup Periodicity Schedule

Texas Health Steps Medical Checkup Periodicity Schedule for Infants, Children, and Adolescents

		COMPREHENSIVE HEALTH SCREENING* BIRTH THROUGH 10 YEARS OF AGE																											
		DEVELOPMENTAL SURVEILLANCE				MENTAL HEALTH		MEASUREMENTS		VISION		HEARING		LABORATORY TESTS															
		Review of Milestones		ASQ, ASQ:SE, or PEDS	M-CHAT or M-CHAT-R/F™	Mental Health, Psychosocial/Behavioral Health Screening	Postpartum Depression Screening	TR Questionnaire with Skin Test if Risk Identified	Unclotted Physical Examination	Critical Congenital Heart Defect Screening	Length	Height	Weight	BMI	Fronto-Occipital Circumference	Blood Pressure	Visual Acuity	Subjective Vision	Newborn Hearing Test (OAE or ABR)	Audiometric Screening	Subjective Hearing	Dental Referral	Screen/Administer Immunizations According to ACIP Guidelines	Newborn Screening Panel	Blood Lead Screening	Anemia	Dyslipidemia	Type 2 Diabetes	Health Education/Anticipatory Guidance
AGE	Newborn D/C to 5 days	Mandatory																											
	2 weeks	Mandatory																											
Months	2	Mandatory																											
	4	Mandatory																											
	6	Mandatory																											
	9	Mandatory																											
	12	Mandatory																											
	15	Mandatory																											
	18	Mandatory																											
	24	Mandatory																											
	30	Mandatory																											
	36	Mandatory																											
Years	3	Mandatory																											
	4	Mandatory																											
	5	Mandatory																											
	6	Mandatory																											
	7	Mandatory																											
	8	Mandatory																											
	9	Mandatory																											
	10	Mandatory																											

LEGEND	
<span style="background-color: #008080; width: 10px; height: 10px; display: inline-block;"></span>	Mandatory
<span style="background-color: #999999; width: 10px; height: 10px; display: inline-block;"></span>	If not completed at the required age, must be completed at the first opportunity if age appropriate.
<span style="background-color: #008080; width: 10px; height: 10px; display: inline-block;"></span>	For developmental, mental health, vision, or hearing screenings: when both colors appear at the same age, perform the most appropriate-level screen.
<span style="background-color: #ffff00; width: 10px; height: 10px; display: inline-block;"></span>	Recommended
<span style="background-color: #ff0000; width: 10px; height: 10px; display: inline-block;"></span>	Risk-based

Note: THSteps components may be performed at other ages if medically necessary. Check regularly for updates to this schedule: <http://www.dshs.texas.gov/thsteps/Texas-Health-Steps-Checkup-Components/>. For free online provider education: [thealthsteps.com](http://thealthsteps.com).



Texas Health Steps Medical Checkup Periodicity Schedule for Infants, Children, and Adolescents

		COMPREHENSIVE HEALTH SCREENING* 11 THROUGH 20 YEARS OF AGE																			
		MENTAL HEALTH		MEASUREMENTS		VISION		HEARING		LABORATORY TESTS											
		Mental Health, Psychosocial/Behavioral Health Screening		PSY-17, PHQ-9, PHQ-15, PHQ-2, PHQ-4, GAD-7, or similar validated instruments	TB Questionnaire with Skin Test if Risk Identified	Unclotted Physical Examination	Height	Weight	BMI	Blood Pressure	Visual Acuity	Subjective Vision	Audiometric Screening	Subjective Hearing	Dental Referral	Screen/Administer Immunizations According to ACIP Guidelines	Dyslipidemia	Type 2 Diabetes	STD/STI Screening	HIV Test	Health Education/Anticipatory Guidance
AGE	11	Mandatory																			
	12	Mandatory																			
	13	Mandatory																			
	14	Mandatory																			
	15	Mandatory																			
	16	Mandatory																			
	17	Mandatory																			
	18	Mandatory																			
	19	Mandatory																			
	20	Mandatory																			

LEGEND	
<span style="background-color: #008080; width: 10px; height: 10px; display: inline-block;"></span>	Mandatory
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Note: THSteps components may be performed at other ages if medically necessary. Check regularly for updates to this schedule: <http://www.dshs.texas.gov/thsteps/Texas-Health-Steps-Checkup-Components/>. For free online provider education: [thealthsteps.com](http://thealthsteps.com).



# Complete Texas Health Steps Checkup

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Complete only if it includes:

All required components, or  
documentation of why a particular  
component could not be completed.

Previous results may be used to meet  
the checkup requirements if completed  
within:

- Preceding 30 days for children who are two years of age and younger.
- Preceding 90 days for children who are three years of age and older.



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# Comprehensive Health History

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- Nutritional Screening
- Developmental Surveillance and Screening
- Mental Health Screening
- Tuberculin Skin Test (TST)



TEXAS  
Health and Human  
Services

# Nutritional Screening

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- Review of Measurements/BMI and Laboratory Screening
- Infants: Feeding Schedules
- Children and Adolescents: Dietary Practices
- Special Diets/Food Allergies
- Restaurant/Fast Food



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# Developmental Surveillance

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## Review of Milestones

- *Subjective* review of milestones by parent report and observation.

## Screening

- *Objective* screening using a standardized screening tool (CPT code 96110).
- Standardized autism screening (CPT code 96110 U6).
- Required at specific checkups.



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# Developmental Screening

## Required Screening Tools

Screening Age	Developmental Tool	Autism Tool
9 months	Ages and Stages Questionnaire (ASQ) or Parent's Evaluation of Developmental Status (PEDS)	
18 months	ASQ or PEDS	Modified Checklist for Autism in Toddlers (M-CHAT™ or M-CHAT-R/F™)
24 months	ASQ or PEDS	Modified Checklist for Autism in Toddlers (M-CHAT™ or M-CHAT-R/F™)
3 years	ASQ or ASQ:SE, or PEDS	
4 years	ASQ or ASQ:SE, or PEDS	



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# Developmental Screening

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The provider must complete a standardized developmental or autism screening:

- If missed at an earlier checkup and still age appropriate.
- For new patients 6 months through 6 years of age if no record of previous age-appropriate screening.
- If there are provider or parental concerns at any visit through 6 years of age.



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# Developmental Screening

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## Referrals - If delay or suspected delay is identified:

- Birth through 35 months: The provider must refer to Early Childhood Intervention (ECI), as soon as possible, but no longer than seven days after identified, even if also referring to an appropriate specialist.
- Ages 3 years and older: The provider is encouraged to refer to the appropriate school district program, even if also referring to an appropriate specialist.



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# ECI HANDOUT

## ECI Eligibility and Referral

Texas Early Childhood Intervention (ECI) serves families with children birth to 36 months with developmental delays or disabilities. ECI is a division of the Department of Assistive and Rehabilitative Services (DARS).

### Eligibility

To be eligible for ECI services, a child must exhibit one of the following:

- A medically diagnosed condition that has a high probability of resulting in a developmental delay. A list of these diagnoses may be found at: [www.dars.state.tx.us/ecis/resources/diagnoses.asp](http://www.dars.state.tx.us/ecis/resources/diagnoses.asp)
- An auditory or visual impairment as defined by the Texas Education Agency (19 TAC §89.1040) <http://ritter.tea.state.tx.us/rules/tac/chapter089/ch089aa.html>
- A qualifying developmental delay of at least 25% in one or more of the following areas:
  - cognitive
  - gross motor
  - fine motor
  - social/emotional
  - adaptive
  - communication (or at least 33% delay when expressive language is the only area of delay)

### Determination of Developmental Delay

Delay is determined by an interdisciplinary team through administration of the Battelle Developmental Inventory-2 (BDI-2), which is a well-known, widely respected standardized test instrument.

In some instances, the interdisciplinary team may recognize a developmental concern that was not identified by the BDI-2. If the child's scores on the BDI-2 are in an age appropriate range but a developmental delay is still suspected, sections of the Hawaii Early Learning Profile (HELP) Strands may be administered to determine if the child has a qualitative developmental delay. The HELP is used to quantify the clinical expertise and observation of the team.

Qualitative determination of delay allows teams to:

- qualify a child for ECI services through means other than the standardized test;
- determine if a child needs to be referred to an appropriate professional for further evaluation due to concerns about autism, FASD, or other issues that may have been identified.

Families are surveyed annually to determine their perspective on how helpful ECI services have been for them.

- 88.52 % of families indicated that ECI services helped them communicate their child's needs
- 87.45% of families indicated that ECI services helped them help their child develop and learn



early childhood intervention  
**eci**

## Telehealth Links ECI Children and Families to Needed Services



The Texas Health and Human Services Early Childhood Intervention (ECI) program works with children from birth to 36 months with developmental delays or disabilities and their families. ECI is now offering services through telehealth.

### What is telehealth?

- Health services provided to families via videoconferencing technology.
- Telehealth allows ECI providers to:
  - Continue coaching parents and caregivers to teach their child new skills.
  - Provide skilled guidance while observing the parents and caregivers practicing the activities.

### What equipment do families need?

- Families need an internet connection and a device, such as a smartphone, tablet or laptop, with video and audio capabilities.
- Additional software might be needed to maintain security.
- If families need assistance getting equipment or software, the ECI program may be able to help with resources and information.



### What are the benefits of telehealth?

- Parents and caregivers gain confidence in their skills because they are able to try different "hands-on" activities with their child, with coaching from a therapist or other ECI provider.
- Telehealth services can be provided when in-person visits pose a health risk, such as when a child has a compromised immune system or travel is difficult.
- Telehealth offers more scheduling flexibility.



### Is telehealth effective?

- Research has shown therapies delivered through telehealth may be as effective as those delivered in person.\*
- The American Physical Therapy Association, American Occupational Therapy Association and American Speech-Language-Hearing Association all support telehealth.
- Many ECI families who receive telehealth services report they are happy with the services and feel more empowered to work with their child to build skills.



### What services are offered through telehealth, and will insurance cover them?

- Each ECI program may offer different services through telehealth.
- Medicaid plans cover some services provided via telehealth. Private insurance may cover some services provided via telehealth as well.
- Check with each insurance provider and your local ECI program to learn more.

How can referral sources contact their local ECI program?

Visit [citysearch.hhsc.state.tx.us](http://citysearch.hhsc.state.tx.us) or [hhs.texas.gov/eci](http://hhs.texas.gov/eci) or call 877-787-8999.

# Mental Health Screening

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Screening for

- Behavioral
- Social
- Emotional Development

Required at each checkup.



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# Mental Health Screening Postpartum Depression

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## **New benefit effective July 1, 2018**

Recommended (optional) screening during infant's checkup.

- Allows maternal screening at infant's Texas Health Steps checkup up to the infant's first birthday
- Requires use of validated screening tool
- Positive screens require referral
- Separate reimbursement in addition to checkup reimbursement



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# Mental Health Screening Postpartum Depression

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Validated screening tools include but are not limited to:

- Edinburgh Postpartum Depression Screen (EPDS)
- Patient Health Questionnaire (PHQ-9)
- Postpartum Depression Screening Scale (PPDS)

Access screening tools on the [Texas Health Steps Forms](#) page.



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# Mental Health Screening Postpartum Depression

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## All positive screens require

- Discussion of screening results
- Referral for further evaluation
- Referral to emergency center for imminent risk of harm

## Additional considerations

- Resources for mother
- Scheduling infant for return visit before next checkup



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# Mental Health Screening Postpartum Depression

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Referral providers for positive screens include:

- Mental health clinicians
- The mother's primary care provider
- Obstetricians and gynecologists
- Family physicians
- Community providers
  - Federally Qualified Health Centers (FQHC)
  - Local Mental Health Authorities and Local Behavioral Health Authorities
  - Healthy Texas Women program



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# Mental Health Screening Postpartum Depression

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## Coding postpartum depression screening

- Use CPT code G8431 for positive screens (screening for depression is documented as being positive and a follow up plan is documented)
- Use CPT code G8510 for negative screens (screening for depression is documented as negative, a follow up plan is not required)
- Only one CPT code may be submitted (G8431 or G8510)



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# Mental Health Screening Adolescents

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## **Benefit change effective July 1, 2018**

Recommended (optional) screening for adolescents 12 through 18 years.

- Allows screening annually
- Separate reimbursement annually in addition to checkup reimbursement
- Required use of one of the validated and standardized mental health screening tools approved by Texas Health steps.



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# Mental Health Screening Adolescents

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Texas Health Steps approved mental health screening tools include

- Pediatric Symptom Checklist (PSC-17)
- Pediatric Symptom Checklist (PSC-35)
- Pediatric Symptom Checklist for Youth (Y-PSC)
- Patient Health Questionnaire (PHQ-9)
- Patient Health Questionnaire (PHQ-A [depression screen])
- Car, Relax, Alone, Friends, Forget, Trouble (CRAFFT)
- Patient Health Questionnaire for Adolescents (PHQ-A [AAP's anxiety, eating problems, mood problems...screen])

*Download forms at [brightfutures.aap.org](http://brightfutures.aap.org).*



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# Mental Health Screening Adolescent Requirement

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## Coding mental health screening in adolescents

- Use CPT code 96160  
Screening tool completed by the adolescent.
- Use CPT code 96161  
Screening tool completed by the parent or caregiver on behalf of the adolescent.
- Only one CPT code may be submitted (96110 or 96161)



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# TB Screening

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- Administer the Texas Health Steps TB Questionnaire annually beginning at 12 months of age.
- The questionnaire is available at: <https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider-portal/health-services-providers/thsteps/thb-tb-questionnaire.pdf>
- Administer a Tuberculin Skin Test (TST) (CPT code 86580) if risk for possible exposure is identified.
- A follow-up visit (CPT code 99211) is required to read all TSTs.



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# TB Screening

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## Positive TST

- Further evaluation is required to diagnose either latent TB infection or active TB disease.
- Report a diagnosis of latent TB infection or suspected TB disease to your local or regional health department.

Contact the TB Services Branch at 512-533-3000 for more information.



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# Physical Examination

- Comprehensive
- Must be unclothed
- Completed by:
  - Physician
  - PA (Physician Assistant)
  - CNS (Clinical Nurse Specialist)
  - NP (Nurse Practitioner)
  - CNM (Certified Nurse-Midwife)
  - RN (Registered Nurse)
    - Under direct supervision of physician
    - [Completion of online education modules](#)
    - May not provide checkups at an FQHC or RHC



# REQUIRED COURSES FOR THSteps NURSES

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## **REQUIRED COURSES FOR TEXAS HEALTH STEPS NURSES**

- Guidelines for Tuberculosis Screening, Testing & Treatment
- Behavioral Health: Screening and Intervention
- Building a Comprehensive and Effective Medical Home
- Case Management Services in Texas
- Critical Congenital Heart Disease
- Culturally Effective Health Care
- Developmental Surveillance and Screening: Birth through 6 Years
- Hearing and Vision Screening
- Immunization
- Management of Overweight and Obesity in Children and Adolescents
- Newborn Hearing Screening
- Newborn Screening
- Nutrition
- Oral Health for Primary Care Providers
- Promoting Adolescent Health
- Recognizing, Reporting, and Preventing Child Abuse
- Texas Health Steps: Overview
- Texas Medicaid Services for Children
- XALD: Newborn Screening, Treatment & Referral

<https://www.txhealthsteps.com/> Click on "Courses"---> In Course Finder box, under 'Topic' arrow down to "Required Courses for Texas Health Steps Nurses"---> Click 'Find' box

\*Some required courses may not be available. Consult [Texas Health Steps Requirements for Registered Nurses Who Complete Texas Health Steps Checkups](#) for more information.

# Physical Examination

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- Height or Length
- Weight
- BMI
- Fronto-occipital circumference
- Blood pressure

Use age-appropriate growth graph to identify significant deviations.



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# Physical Examination

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## Sensory Screening

### Vision

- Visual acuity screening according to the *Texas Health Steps Medical Checkup Periodicity Schedule*.
- Subjective screening at all other checkups.

### Hearing

- Audiometric screening according to the *Texas Health Steps Medical Checkup Periodicity Schedule*.
- Subjective screening at all other checkups.



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# Dental Referral

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An oral health exam and dental referral is a key part of the Texas Health Steps checkup.

A referral depends on the result of the oral exam:

- **Routine dental referral** - Beginning at 6 months of age until a dental home has been established.
- **Referral for dental care** - At any age if the oral exam identifies a possible concern.
- **Emergency dental referral** - If a child has bleeding, infection, excessive pain, or injury, refer directly to the dental provider.



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# STAGES OF TOOTH DECAY BROCHURE - 7715

## STAGES OF TOOTH DECAY

Children Need  
Dental Checkups Every  
6 Months Starting When  
They're 6 Months Old.



**HEALTHY TEETH:** No decay. Protect what you've got. Take your child to the dentist starting at 6 months of age and make this your child's dental home.



**EARLY TOOTH DECAY:** "White spots" on the teeth are a sign of early decay. Take your child to the dentist for a checkup as soon as possible.



**LATE TOOTH DECAY:** "Brown or yellow spots" on the teeth are a sign of more advanced decay. Take your child to the dentist before decay gets worse.



**SEVERE TOOTH DECAY:** Take your child to the dentist quickly. The teeth may need to be removed to prevent more damage.

To learn more about dental decay and the benefits of fluoride varnish application, please visit the Texas Health Steps Online Provider Education website at: [www.txhealthsteps.com](http://www.txhealthsteps.com)

04/2011



EO3-1392



# BRUSH UP ON HEALTHY HABITS 22715/22714-TEEN



## Simple Steps for a Healthy Mouth

### Pregnancy

Did you know that the health of your mouth can affect the health of your baby? It's true. Having a healthy mouth during your pregnancy will help keep your baby healthy.

- See your dentist for dental checkups while you are pregnant.
- Eat healthy foods.
- Brush and floss your teeth daily.

### Baby's First Months

Start taking care of your baby's mouth early, even before there are any teeth. Within the first few months a baby can start getting germs in their mouth that can lead to tooth decay (cavities) when the teeth start coming in. Here are some tips to keep your baby's mouth clear:

- Hold your baby while feeding.
- After your baby eats, wipe their gums with a clean, soft, damp cloth.
- Brush and floss your own teeth daily.

### 6 Months Old

Babies will get their first tooth around 6 months of age. Start good habits early.

- Take your baby for their first dental checkup at 6 months old.
- Think of that dentist's office as your baby's dental home. It is best to go to the same dentist for all your child's checkups.
- Brush your baby's teeth every day using a soft toothbrush.
- Help your baby learn to use a cup.
- Avoid sharing bottles, cups, utensils, and pacifiers.
- Avoid putting your baby to bed with a bottle with anything in it other than water—not even milk.
- Brush and floss your own teeth daily.

### 1 to 2 Years Old

As more baby teeth come in, help your child take care of their teeth at home and with regular checkups.

- Take your child to the dentist for checkups every 3 to 6 months.
- Brush your child's teeth every day using a soft toothbrush.
- Use toothpaste and fluoride as directed by your child's dentist.
- Choose healthy food, snacks, and drinks for your child.
- Brush and floss your own teeth daily.



### 3 to 5 Years Old

The cleaning and care you start at this age will lead to good lifelong habits that help your child keep a healthy mouth.

- Take your child for dental checkups every 6 months.
- Help your child brush their teeth 2 times a day.
- Start teaching your child how to use a soft toothbrush to clean their teeth.
- Use toothpaste and fluoride as directed by your child's dentist.
- Choose healthy food, snacks, and drinks for your child.
- Brush and floss your own teeth daily.

### 6 Years and Older

During this time, you will see changes in your child's mouth. Adult teeth will start to take the place of baby teeth. Help your child keep up the good habits you've started. Regular cleaning and care will help to keep your child's new adult teeth healthy.

- Take your child to the dentist for checkups every 6 months.
- Ask your dentist if your child should get sealants put on their molars (teeth in the back part of the mouth). Sealants help prevent tooth decay.
- Make sure your child brushes their teeth at least 2 times a day.
- Make sure your child uses toothpaste and fluoride as directed by their dentist.
- Choose healthy food, snacks, and drinks for your child.
- Brush and floss your own teeth daily.

## Finding a Ride to the Checkup

### Medicaid Can Help Get You There

If you need a ride to get to your child's checkup, call us toll-free:

- Houston/Beaumont area: 855-687-4786
- Dallas/Ft.Worth area: 855-687-3255
- All other areas: 877-633-8747 (877-MED-TRIP)



MyChildrensMedicaid.org | 877-847-8377



## Simple Steps to Healthy Teeth

### Make Dental Health a Habit

Texas Health Steps dental checkups are covered by Medicaid. Visit your dentist every 6 months for a checkup. You don't need to pay for checkups.

- Brush your teeth 2 times a day and make sure you floss, too.
- Germs hide in between teeth where a toothbrush can't reach. Flossing cleans in those tight areas and fights tooth decay.

### Every Teenager Should Know

- If you wear braces, you need to take extra care of your teeth. Again, germs hide in those hard-to-reach places.
- Don't chew tobacco or smoke. Tobacco can cause tooth decay, bad breath and cancer.
- Oral piercings can be dangerous to your health. Talk to your dentist for more information before getting one.
- Eat snacks that are good for you like cheese, raw vegetables, plain yogurt or fruit. Just like when you were a kid, if you eat or drink too many things with sugar, you could get tooth decay.
- If you play sports, be sure to wear a mouth guard to protect your teeth from injury or loss.

## Smile. We Can Help You Get There.

### Medicaid Can Help Get You There

If you need a ride to get to your checkup, call us toll-free:

- Houston/Beaumont area: 855-687-4786
- Dallas/Ft.Worth area: 855-687-3255
- All other areas: 877-633-8747 (877-MED-TRIP)

### Your Smile Is Up to You

It's hard to smile when things aren't quite right. Small things you do every day to take care of your teeth can have a big effect on how you feel about yourself. Take care of your teeth and keep your smile bright for life.



For people age 20 and younger who have Texas Medicaid

## Brush up on healthy habits.

Make sure to get regular Texas Health Steps dental checkups.

EP5DF-26 8/18

For children birth through age 20 who have Medicaid

## Brush up on healthy habits.

Make sure your children get their regular Texas Health Steps dental checkups.

DENTAL 8/17 8/18

MyChildrensMedicaid.org | 877-847-8377



# Immunizations

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At each medical checkup

- Assess immunization status.
- Use diagnosis code Z23 to indicate immunization administration.
- Administer according to the Advisory Committee on Immunization Practices (ACIP) recommendations unless:
  - Medically contraindicated, or
  - Parent's reason of conscience (including religious beliefs).

Providers **must not** refer children to the local health department or other entity for immunizations.



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# Immunizations

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## **Texas Health Steps ages birth through 18**

- Vaccine available through TVFC
- Reimbursement covers administration fee

## **Texas Health Steps ages 19 and 20**

- Privately purchased vaccine
- Reimbursed by Medicaid
- Reimbursement covers vaccine and administration fee



**TEXAS**  
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# Laboratory Services

## G-THSTEPS (September 2016)

Specimen submission form for **THSteps only**



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		<b>G-THSTEPS</b> (SEP 2016) Specimen Submission Form CAP# 3024401 CLIA #45D0660544 Laboratory Services Section, MC-1947 P. O. Box 149347, Austin, Texas 78714-9347 Courier: 1100 W. 49 <sup>th</sup> Street, Austin, Texas 78756 (888) 963-7111 x7318 or (512) 776-7318 <a href="http://www.dshs.texas.gov/lab">http://www.dshs.texas.gov/lab</a>		<i>For DSHS Use Only</i> Place DSHS Bar Code Label Here	
<b>FOR TEXAS HEALTH STEPS SPECIMENS ONLY !!!</b>					
IS THIS LABORATORY SUBMISSION PART OF THE THSTEPS MEDICAL CHECKUP OR FOLLOW-UP VISIT? <input type="checkbox"/> Yes <input type="checkbox"/> No					
The specimen submission form <i>must</i> accompany <i>each</i> specimen. The patient's name listed on the specimen <i>must</i> match the patient's name listed on the form. Specimen must have two (2) identifiers that match this form. If the Date of Collection field is not completed, the specimen will be rejected.					
<b>Section 1. SUBMITTER INFORMATION – (** REQUIRED)</b>			<b>Section 4. ORDERING PHYSICIAN INFORMATION – (** REQUIRED)</b>		
Submitter/TPI Number **		Submitter Name **		Ordering Physician's NPI Number **	
NPI Number **		Address **		Ordering Physician's Name **	
City **		State **		Zip Code **	
Phone **		Contact		<b>Section 5. PAYOR SOURCE – (** REQUIRED)</b>	
Fax **		Clinic Code		1. Reflex testing will be performed when necessary and the appropriate party will be billed. 2. If the patient does not meet program eligibility requirements for the test requested and no third party payor will cover the testing, the submitter will be billed. 3. If the Medicaid number is not provided or is inaccurate, the submitter will be billed. 4. Please write the Medicaid number in the space provided below.	
<b>Section 2. PATIENT INFORMATION – (** REQUIRED)</b>			<input checked="" type="checkbox"/> THSteps (1)		
NOTE: Patient name on specimen is REQUIRED & MUST match name on this form & Medicaid card. Specimen must have two (2) identifiers that match this form.					
Last Name **		First Name **		Medicaid #: **	
Address **		Telephone Number		<b>Section 6. HL</b>	
<input type="checkbox"/> Hemoglobin (Hb)					

# Laboratory Services

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## Newborn Screening

- 1<sup>st</sup> screen collected at 24-48 hours of age
- 2<sup>nd</sup> screen collected at 7-14 days of age
- Up to 12 months if no record of testing
- Special circumstances, such as adoption
- [DSHS Laboratory NBS Refusal Form](#)

## DSHS NBS Clinical Care Coordination will:

- Open case for each out-of-range result.
- Communicate abnormal results to the provider.
- Provide guidance for recommended actions.
- Monitor case until infant is cleared or diagnosis is determined.



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# Laboratory Services

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## Accessing Newborn Screening Results

**All results reported to the submitting facility via mail, fax, HL7, or web application.**

## Additional copies can be accessed as follows:

- Sign up as a registered user of the Texas Newborn Screening Web Application and access reports online or
- Contact DSHS Laboratory Reporting  
Monday-Friday  
8 a.m. to 5 p.m.  
Send a fax request to 512-776-7533 or  
Call 512-776-7578



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## Texas Newborn Screening Web Application: Sign Up in 3 Easy Steps

1. Download forms:

<http://www.dshs.texas.gov/lab/remotedata.shtm>

2. Fill out:

- Facility Security Agreement (1 per facility) AND
- Web User Agreements (1 for each user)

3. Submit:

- Scan and email: [remotelabsupport@dshs.texas.gov](mailto:remotelabsupport@dshs.texas.gov)
- Fax: 512-776-7223, Attn: Remote Lab Support, L-601 (not recommended)

For help, call 1-888-963-7111 extension 2484



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# Laboratory Services

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## Lead Screening and Testing

A blood lead level is mandatory at 12 and 24 months of age.

### Initial screening

- Venous or capillary specimen.
- Send specimens to DSHS Laboratory, or
- Provider may use point-of-care testing.



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# Laboratory Services

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## Lead Screening and Testing

Point-of-care testing:

- Initial screening only
- Clinical Laboratory Improvement Amendments (CLIA)
- Procedure code 83655 with modifier QW
- Separate reimbursement



# Laboratory Services

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## Lead Screening and Testing

### Follow-up

- Blood lead level of 5/mcg/dL or greater
- Venous specimen
- Laboratory of provider's choice



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<http://www.dshs.texas.gov/lead/child.shtm>

# Laboratory Services

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## Lead Screening and Testing

Risk assessment may be addressed as part of anticipatory guidance:

- Using the questions on the back of the Child Health Record forms (**optional**).
- Using Risk Assessment for Lead Exposure questionnaire, Form Pb-110 (**optional**).
- or
- Discussion of risk factors or other methods of education.

<http://www.dshs.texas.gov/thsteps/forms.shtm>



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# Laboratory Services

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## Lead Screening and Testing

Follow-up assistance:

Contact MAXIMUS Special Services Unit at  
1-877-847-8377

OR

Complete Texas Health Steps Provider  
Outreach Referral Form and Fax to  
1-512-533-3867, Attn: Special Services Unit



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## Lead Reporting

- Must submit results to Childhood Lead Poisoning Prevention Program (CLPPP)  
<http://www.dshs.texas.gov/lead/child.shtm>
- Report all results



# Laboratory Services

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## Anemia Screening

- Mandatory according to the *Texas Health Steps Medical Checkup Periodicity Schedule*
- Required at 12 months of age
- DSHS Laboratory



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# Laboratory Services

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## Dyslipidemia

- Required once for all clients 9 through 11 years of age and again at 18 through 20 years of age.
- Risk-based for all clients 24 months through 20 years.
- Child or specimen may be sent to laboratory of provider's choice, including the DSHS Laboratory.

## Type 2 Diabetes

- Risk-based test.
- Child or specimen may be sent to laboratory of provider's choice, including the DSHS Laboratory.



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# Laboratory Services

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## Gonorrhea and Chlamydia Screening

- Risk-based
- Amplified probe technique
- Specimens must be submitted to the DSHS Laboratory.
- Supplies may be obtained from the DSHS Laboratory.

## Syphilis

- Risk-based
- Child or specimen may be sent to laboratory of provider's choice, including the DSHS Laboratory.



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# Laboratory Services

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## **HIV:**

- Required once for all clients 16 through 18 years of age.
- Risk-based for all clients 11 through 20 years of age.

Provide information that testing for HIV is:

- Routinely available, confidential.
- Completely anonymous by choice.

Child or specimen may be sent to laboratory of provider's choice, including the DSHS Laboratory.



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# THSteps Medical Checkup Lab Requirements

THSteps Medical Checkup Laboratory Requirements						Acute Care/Non-THSteps Medical Checkup Reimbursement available to provider outside of a checkup (See TMPPM Volume 2 Radiology and Laboratory Services Handbook)
Contact the appropriate laboratory for specimen collection/shipping supply information						
Test	Required for THSteps Medical Checkups (See THSteps Periodicity Schedule for ages)	Additional Reimbursement to Checkup Provider (Excludes FQHCs & RHCs)	Specimen Collection Location	Location for Specimen Testing/Analysis	Additional Handling/Collection Fee for THSteps Checkup Specimens	
Second NBS	Yes	No	Provider's office	DSHS Laboratory	No	No
Lead	Yes	No	Initial-Provider's office	Initial-DSHS Laboratory	No	Yes
			Confirmatory-Provider's choice of laboratory or provider's office	Confirmatory-Provider's choice, including DSHS		
Lead Point-of-Care	Yes, point-of-care is provider's option	Yes	Provider's office	Provider's office	N/A	Yes
Hemoglobin	Yes	No	Provider's office	DSHS Laboratory	No	Yes
Hemoglobin or Hematocrit Point-of-Care	Allowed if urgent results are needed	No	Provider's office	Provider's office	N/A	Yes
Glucose	Risk-based	No	Provider's choice of laboratory or provider's office	Provider's choice, including DSHS	No	Yes
Glucose Point-of-Care	Risk-based, point-of-care is provider option	No	Provider's office	Provider's office	N/A	Yes

# Lab Checklist for THSteps

## DSHS Laboratory Checklist for Texas Health Steps (THSteps) Medical Providers

The following THSteps laboratory services obtained during a medical checkup or follow-up visit are required to be submitted to the DSHS Laboratory:

- Newborn Screening
- Total Hemoglobin
- Initial Lead (Exception: point-of-care) testing)
- Gonorrhea/Chlamydia testing

The following THSteps laboratory services obtained during a medical checkup or follow-up visit may be sent to the medical provider's choice of laboratory (DSHS Laboratory or local laboratory):

- Glucose
- Lipid Profile, Cholesterol and HDL
- Lead - Testing may be performed using a venous or capillary specimen. Confirmatory tests must be venous
- specimens and may be sent to the DSHS Laboratory or the client or specimen may be sent to a lab of the provider's choice. Providers with a CLIA Certificate of Waiver may perform initial blood lead testing in the office using point-of-care testing.
- HIV
- RPR (Syphilis)

The DSHS Laboratory provides THSteps specimen collection and shipping supplies for THSteps providers at no cost when specimens are submitted to the DSHS Laboratory.

Link to [http://www.dshs.state.tx.us/lab/mrs\\_forms.shtml](http://www.dshs.state.tx.us/lab/mrs_forms.shtml)

- Order Form for Newborn Screening Supplies
- Order Form for Child Health Laboratory Supplies (G-399)
- Order Form for Gonorrhea/Chlamydia (GC/CT) Laboratory Supplies (G-6C)

THSteps medical providers must always use the current version of the specimen submission form.

Link to [http://www.dshs.state.tx.us/lab/mrs\\_forms.shtml](http://www.dshs.state.tx.us/lab/mrs_forms.shtml) for a sample of the most current THSteps specimen submission form.

# Risk-Based Guidance Tool

Test	Ages	Risk Factors
Dyslipidemia	2 years and older	<p>Dyslipidemia testing is recommended for anyone at increased risk for dyslipidemia, including:</p> <p><b>Positive family history:</b></p> <ul style="list-style-type: none"> <li>• Premature coronary artery disease</li> <li>• Parent with known dyslipidemia or TC &gt;240 mg/dL (6.2 mmol/L)</li> </ul> <p><b>Specific conditions:</b></p> <ul style="list-style-type: none"> <li>• Diabetes mellitus and familial hypercholesterolemia associated with high or moderate risk for CVD</li> <li>• Significant tobacco smoke exposure</li> <li>• Hypertension</li> </ul> <p><b>Overweight:</b></p> <ul style="list-style-type: none"> <li>• Elevated body mass index (BMI)</li> <li>• Children between 2 and 8 years of age with a BMI ≥95th percentile</li> <li>• Older children with a BMI ≥85th percentile</li> </ul>
Type 2 diabetes	10 years, or onset of puberty if earlier	<p>Type 2 diabetes testing is recommended for anyone at increased risk for type 2 diabetes, including: <b>Overweight:</b></p> <ul style="list-style-type: none"> <li>• BMI &gt;85th percentile for age/gender</li> <li>• Weight for height &gt;85th percentile</li> <li>• Weight &gt;120% of ideal for height</li> </ul> <p><b>Plus any two of the following: Positive family history:</b></p> <ul style="list-style-type: none"> <li>• Type 2 diabetes in first- or second-degree relative</li> </ul> <p><b>Race/ethnicity:</b></p> <ul style="list-style-type: none"> <li>• American Indian</li> <li>• African American</li> <li>• Latino</li> <li>• Asian American</li> <li>• Pacific Islander</li> </ul> <p><b>Signs of insulin resistance or:</b></p> <ul style="list-style-type: none"> <li>• Acanthosis nigricans</li> <li>• Hypertension</li> <li>• Dyslipidemia</li> <li>• PCOS</li> <li>• Small for gestational age birth weight <b>Maternal history of diabetes or GDM during the child's gestation</b></li> </ul>

# Completing the Checkup: Anticipatory Guidance

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- Each checkup.
- Child development.
- Benefits of healthy lifestyles and practices, accident and disease prevention.
- Must include time period for next checkup.
- Written material may be given, but does not replace counseling.



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# Oral Evaluation and Fluoride Varnish (OEFV) - *Optional*

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During Texas Health Steps medical checkup for ages 6 through 35 months

- Limited oral evaluation
- Fluoride varnish application
- Referral to dental home

Provided by trained and certified

- Physicians
- Physician Assistants
- Advanced Practice Registered Nurses

<http://www.dshs.texas.gov/thsteps/OEFV.shtm>



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# Exception to Periodicity

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- Needed in addition to regularly scheduled checkups
- Must be a complete medical checkup
- Must be medically necessary



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# Exception to Periodicity

- The same procedure codes,
- Provider type modifier, and
- Condition indicators (NU, ST, S2)

Modifiers in table shown below indicate the reason for exception.

Modifier	
SC	<ul style="list-style-type: none"><li>• Medically necessary (developmental delay or suspected abuse).</li><li>• Environmental high-risk (sibling of child with elevated blood level).</li></ul>
32	To meet state or federal requirements for Head Start, daycare, foster care, or pre-adoption.
23	When needed before a dental procedure provided under general anesthesia.



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# Texas Health Steps Follow-up Visits

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A return visit may be required to complete necessary screenings or procedures

- Placing or reading a Tuberculin Skin Test (TST)
- Immunizations
- Specimen collection for a laboratory test
- Completion of a component
- Separate reimbursement may not be available

CPT code 99211 with Texas Health Steps provider identifier, and THSteps benefit code.



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# Children in Foster Care

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Children entering or re-entering foster care require the following:

- Texas Health Steps medical checkup within 30 days
- Tuberculin Skin Test (TST)

Checkups must be performed by a medical provider enrolled in Medicaid and Texas Health Steps, and who is contracted with STAR Health.

STAR Health member connection representatives call caregivers immediately once a child is enrolled in STAR Health to offer assistance with scheduling the Texas Health Steps checkup.



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# **Texas Health Steps Documentation**

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# Texas Health Steps Documentation

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All checkup components must be documented in the medical record.

Quality review activities include:

- Random chart review
- Focused studies of Texas Health Steps medical checkup completeness
- MCO reviews



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# Texas Health Steps Documentation

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A component may be omitted due to:

- Provider's assessment of child's condition
- Lack of cooperation
- Parent's refusal to give consent

May also omit specific screening tools if a related condition has been identified, and child is currently receiving treatment.

Documentation must include the rationale for the omission.



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# Texas Health Steps Child Health Record Forms

- **Optional**
- Age-specific
- Reflect current policy



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Available online at:

<http://www.dshs.texas.gov/thsteps/childhealthrecords.shtm>

NAME: _____	MEDICAID ID: _____
DOB: _____	PRIMARY CARE GIVER: _____
GENDER: <input type="radio"/> MALE <input type="radio"/> FEMALE	PHONE: _____
DATE OF SERVICE: _____	INFORMANT: _____

---

<b>HISTORY</b>	<b>UNCLOTHED PHYSICAL EXAM</b>
<input type="checkbox"/> See new patient history form	<input type="checkbox"/> See growth graph
<b>INTERVAL HISTORY:</b>	Weight: _____ (____%) Length: _____ (____%)
<input type="checkbox"/> NKDA Allergies: _____	Head Circumference: _____ (____%)
Current Medications: _____	Heart Rate: _____ Respiratory Rate: _____
Visits to other health-care providers, facilities: _____	Temperature (optional): _____
Parental concerns/changes/stressors in family or home: _____	<input type="checkbox"/> Normal (Mark here if all items are WNL)
Psychosocial/Behavioral Health Issues: Y <input type="radio"/> N <input type="radio"/>	Abnormal (Mark all that apply and describe):
Findings: _____	<input type="checkbox"/> Appearance <input type="checkbox"/> Mouth/throat <input type="checkbox"/> Genitalia
<input type="checkbox"/> TB questionnaire, risk identified: Y <input type="radio"/> N <input type="radio"/>	<input type="checkbox"/> Head/fontanelles <input type="checkbox"/> Teeth <input type="checkbox"/> Extremities
*Tuberculin Skin Test if indicated <input type="checkbox"/> TST	<input type="checkbox"/> Skin <input type="checkbox"/> Neck <input type="checkbox"/> Back
(See back for form)	<input type="checkbox"/> Eyes <input type="checkbox"/> Heart/pulses <input type="checkbox"/> Musculoskeletal
<input type="checkbox"/> <b>DEVELOPMENTAL SURVEILLANCE:</b>	<input type="checkbox"/> Ears <input type="checkbox"/> Lungs <input type="checkbox"/> Hips
• Gross and fine motor development	<input type="checkbox"/> Nose <input type="checkbox"/> Abdomen <input type="checkbox"/> Neurological
• Communication skills/language development	Abnormal findings: _____
• Self-help/care skills	
• Social, emotional development	
• Cognitive development	
• Mental health	
<b>NUTRITION*:</b>	
Breastmilk _____	
Min per feeding: _____ Number of feedings in last 24 hrs: _____	
<input type="checkbox"/> Formula (type) _____	
Oz per feeding: _____ Number of feedings in last 24 hrs: _____	
Water source: _____ fluoride: Y <input type="radio"/> N <input type="radio"/>	
<input type="checkbox"/> Solids _____	
*See Bright Futures Nutrition Book if needed	
<b>IMMUNIZATIONS</b>	<b>HEALTH EDUCATION/ANTICIPATORY GUIDANCE (See back for useful topics)</b>
<input type="checkbox"/> Up-to-date	<input type="checkbox"/> Selected health topics addressed in any of the following areas*:
<input type="checkbox"/> Deferred - Reason: _____	• Family Interactions • Nutrition
	• Setting Routines • Safety
	• Development/Behaviors
	*See Bright Futures for assistance
Given today: <input type="checkbox"/> DTaP <input type="checkbox"/> Hep A <input type="checkbox"/> Hep B <input type="checkbox"/> Hib <input type="checkbox"/> IPV	<b>ASSESSMENT</b>
<input type="checkbox"/> MMR <input type="checkbox"/> PCV <input type="checkbox"/> Meningococcal <input type="checkbox"/> Varicella	_____
<input type="checkbox"/> MMRV <input type="checkbox"/> Hib-Hep B <input type="checkbox"/> DTaP-IPV-Hep B	
<input type="checkbox"/> DTaP-IPV/Hib <input type="checkbox"/> Influenza	
*Special populations: See ACIP	
<b>LABORATORY</b>	<b>PLAN/REFERRALS</b>
Tests ordered today: _____	Dental Referral: Y <input type="checkbox"/>
Hgb/Hct: Y <input type="radio"/> N <input type="radio"/>	Other Referral(s): _____
Blood lead test: Y <input type="radio"/> N <input type="radio"/>	
Other: _____	
Signature/title: _____	Return to office: _____
	Signature/title: _____

CHILD HEALTH RECORD

12 MONTH CHECKUP

# Texas Health Steps Documentation

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## **Tuberculosis (TB) Questionnaire**

The only required form for a Texas Health Steps checkup.

### **Ways to document the questionnaire**

- Document the results of the completed tool in the checkup record - or -
- Retain or scan completed questionnaire in the record - or -
- Include and document the answers to the TB Questionnaire within a provider-created medical record.



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# Texas Health Steps Documentation

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## Other **Optional** Forms

- Form Pb-110 Risk Assessment for Lead Exposure
- Parent Hearing Checklist



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# Texas Health Steps Documentation

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For all electronic, online, or web-based tools, consent/release of information may be needed for:

- Transfer of patient data stored electronically in external databases, or
- If data will be used for purposes other than Texas Health Steps checkups.



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# Texas Health Steps Documentation

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Previous results may be used to meet the checkup requirements if completed within:

- Preceding 30 days for children who are two years of age and younger.
- Preceding 90 days for children who are three years of age and older.

Documentation must include:

- The date(s) of service.
- Clear reference to previous visit by the same provider, or results obtained from another provider.



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# Documenting THSteps Components



TEXAS HEALTH AND HUMAN SERVICES COMMISSION

EXECUTIVE CHARLES SMITH COMMISSIONER

Dear Texas Health Steps Provider:

As a Texas Health Steps (THSteps) provider, you affect the lives of many young Texans, and the Health and Human Services Commission (HHSC) understands documenting the THSteps components of the checkup can be challenging.

One federal and two state contracted reviews of medical records have shown that missing documentation is the **largest factor** and the **primary cause** of records being reviewed and money being recouped. HHSC would like to assist you in documenting all of the required components and elements of the THSteps checkups in order to reflect the work you perform to complete each checkup.

THSteps checkups are made up of six primary components. Many of the primary components include individual elements, and each are outlined in the *Texas Health Steps Medical Checkup Periodicity Schedule* found on the THSteps internet Provider Information page. For providers to be reimbursed, each of the following six checkup components and their individual elements must be completed and clearly documented in the medical record:

1.	<b>Comprehensive health and developmental history</b> - This includes nutrition screening, developmental and mental health screening and TB screening. The medical record must contain documentation on all screening tools used for TB, growth and development, autism, and mental health screenings. The results of these screenings and any necessary referrals must be documented in the medical record.
2.	<b>Comprehensive unclothed physical examination</b> - This includes measurements; height or length, weight, fronto-occipital circumference, BMI, blood pressure, and vision and hearing screening.
3.	<b>Appropriate immunizations</b> - This is established by the Advisory Committee on Immunization Practices, according to age and health history, including influenza, pneumococcal, and HPV.
4.	<b>Appropriate laboratory/screening tests</b> - This includes newborn screening, blood lead level assessment appropriate for age and risk factors, and anemia.
5.	<b>Health education</b> (including anticipatory guidance)
6.	<b>Oral health referral</b> - This establishes a main dentist beginning at 6 months, then every 6 months until the parent or caregiver reports a dental home is established.

# THSteps Clinical Record Review Tool

## Texas Health Steps Clinical Record Review Tool

**Date of Review:**

For each review item, place an X under the appropriate column (Yes, No, Not Applicable or Not Reviewed). The column to the right should be used to clarify any No, N/A, or N/R responses or to provide additional information. Comments can be continued on the back if additional space is needed.

REVIEW CRITERIA	YES	NO	N/A OR N/R	COMMENTS
<b>I. Clinical Record Review</b>				
1. Comprehensive Health and Developmental History				
a. Initial and Interval History as Appropriate				
b. Mental Health Screening				
c. Tuberculosis Screening				
d. Developmental Surveillance/Screening				
e. Autism Screening				
f. Nutrition Screening				
2. Age Appropriate Screening and Administration of Immunizations				
3. Laboratory Screening				
a. Newborn Screening Panel				
b. Blood Lead Level				

# THSteps Clinical Record Review Tool Instructions

Record Review Criteria	Instructions For Review
<p>General Instructions</p>	<p>Electronic Format            total will self populate with numerical values.            of numerical result in each cell to allow this feature.            1=Component was completed            was not completed            applicable for the age or gender of the record. Format cell to highlight in black.</p>
	<p>Paper Format            •Complete the fields as indicated below.            P=Component was completed            was not completed            applicable for the age or gender of the record.</p>
	<p>•This form will accommodate up to 10 records per specific paid claims date.            •Review all information in the record for the specific date of the selected paid claim only.            •When reviewing the record, flow sheets, laboratory slips, stand alone immunization records or other forms are acceptable documentation methods for purposes of this review even if such documentation is not noted on the clinical record form or narrative sheet.</p>
	<p>Record Identifier Methods:            noted on the record,            •Unique Identifier: create a unique number or other confidential means of identifying the specific record under review.            •Patient age: notate the age of the patient as recorded on the date of the checkup under review,            Number: the order of the record 1-10 under review.</p>
	<p>All federal and state required components of the Texas Health Steps checkup must be reviewed and scored using the Texas Health Steps Periodicity Schedule in effect at the time of the paid claims. The current schedule date is located online at <a href="http://www.dshs.texas.gov/thsteps/providers.shtm">http://www.dshs.texas.gov/thsteps/providers.shtm</a>.            •Provider banner messages are available on the TMHP website at: <a href="http://www.tmhp.com/Pages/Medicaid/medicaid_pubs_banners.aspx">http://www.tmhp.com/Pages/Medicaid/medicaid_pubs_banners.aspx</a>            •For further information, the Texas Medicaid Provider Procedures Manuals may also be found on the TMHP website at <a href="http://www.tmhp.com/Pages/Medicaid/Medicaid_Publications_Provider_manual.aspx">http://www.tmhp.com/Pages/Medicaid/Medicaid_Publications_Provider_manual.aspx</a></p>
<p>Comprehensive Health and Developmental History</p>	<p>Documentation must contain an initial health history and each subsequent checkup up must contain information on an interim history.            • The comprehensive health and developmental history must address the following areas: physical, mental, developmental, nutritional and tuberculosis.            •The interim history may state "No Change" and will be considered complete if an initial history is completed as described and in the record.</p> <p>•If the checkup form under review is the initial visit and the THSteps child health record is being used, a "See new patient history form" box may be completed and no interim history is required.            •A separate interim history form is an acceptable method of documentation.            •If the checkup form under review is for a subsequent checkup, an interim history must be documented.</p>

# Texas Health Steps Billing

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The Current Procedural Terminology (CPT) codes are available in the Texas Medicaid Provider Procedure Manual (TMPPM).

Providers, including Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) should contact:

- The appropriate medical or dental managed care plan, or
- TMHP for patients with fee-for-service coverage.

RHCs and FQHCs receive an all-inclusive encounter rate.



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# Texas Health Steps Billing

## ICD-10-CM Coding for Texas Health Steps

<b>ICD-10 CM Code</b>	<b>Descriptor</b>
<b>Z00110</b>	Newborn exam, birth to 7 days
<b>Z00111</b>	Newborn exam, 8 days to 28 days
<b>Z00129</b>	Routine child exam
<b>Z00121</b>	Routine child exam, abnormal
<b>Z0000</b>	General adult exam
<b>Z0001</b>	General adult exam, abnormal

<http://www.tmhp.com/Pages/CodeUpdates/ICD-10.aspx>



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# Texas Health Steps Quick Reference Guide (QRG)

## Texas Health Steps Quick Reference Guide

Remember: Use Provider Identifier • Use Benefit Code EPI

### THSteps Medical Checkup Billing Procedure Codes

THSteps Medical Checkups				
99381	99382	99383	99384	99385*
99391	99392	99393	99394	99395*

\* For clients who are 18 through 20 years of age, use diagnosis code Z0000 or Z0001.

ICD-10 Diagnosis Codes	
Z00110	Routine newborn exam, birth through 28 days
Z00111	Routine newborn exam, 8 through 28 days
Z00129	Routine child exam
Z00121	Routine child exam, abnormal
Z0000	General adult exam
Z0001	General adult exam, abnormal

**THSteps Follow-up Visit**  
Use procedure code 99211 for a THSteps follow-up visit.

**Oral Evaluation and Fluoride Varnish**  
Use procedure code 99429 with U5 modifier.

**Developmental and Autism Screening**  
Developmental screening with use of the ASQ, ASQ:SE or PEDS is reported using procedure code 96110.  
Autism screening with use of the M-CHAT or M-CHAT R/F is reported using procedure code 96110 with U6 modifier.

**Mental Health Screening**  
Mental Health Screening with the use of the PHQ-9, PSC-17, PSC-35, Y-PSC or CRAFFT is reported using procedure code 96160 or 96161. Only one procedure code (96160 or 96161) may be reimbursed per client per lifetime.

**Tuberculin Skin Testing (TST)**  
Use procedure code 86580 for TST. Procedure code 86580 may be reimbursed on the same day as a checkup.

**Point-of-Care Lead Testing**  
Use procedure code 83655 with QW modifier to report that an initial blood lead level screening test was completed using point-of-care testing.

Immunizations Administered	
Use code Z23 to indicate when immunizations are administered.	
Procedure Codes	Vaccine
90632 or 90633* with (90460/90461 or 90471/90472)	Hep A
90620 or 90621 with (90460/90461 or 90471/90472)	MenB
90636 with (90460/90461 or 90471/90472)	Hep A/Hep B
90644	Hib-MenCY
90647* or 90648* with (90460/90461 or 90471/90472)	Hib
90649*, 90650*, or 90651* with (90460/90461 or 90471/90472)	HPV
90630, 90654, 90655*, 90656*, 90657*, 90658*, 90685*, 90686*, 90687* or 90688* with (90460/90461 or 90471/90472) or 90660* or 90672* with (90460/90461 or 90473/90474) or 90661* or 90673* or 90674* with (90471/90472)	Influenza
90670* with (90460/90461 or 90471/90472)	PCV13
90680* or 90681* with (90460/90461 or 90473/90474)	Rotavirus
90696* with (90460/90461 or 90471/90472)	DTaP-IPV
90698* with (90460/90461 or 90471/90472)	DTaP-IPV-Hib

\* Indicates a vaccine distributed by TVFC

**Immunizations Administered**  
Use code Z23 to indicate when immunizations are administered.

Procedure Codes	Vaccine
90700* with (90460/90461 or 90471/90472)	DTaP
90702* with (90460/90461 or 90471/90472)	DT
90703* with (90460/90461 or 90471/90472)	MMR
90704* with (90460/90461 or 90471/90472)	MMRV
90713* with (90460/90461 or 90471/90472)	IPV
90714* with (90460/90461 or 90471/90472)	Td
90715* with (90460/90461 or 90471/90472)	Tdap
90716* with (90460/90461 or 90471/90472)	Varicella
90723* with (90460/90461 or 90471/90472)	D'Tap-Hep B-IPV
90732* with (90460/90461 or 90471/90472)	PPSV23
90733 or 90734* with (90460/90461 or 90471/90472)	MPSV4
90743, 90744*, or 90746 with (90460/90461 or 90471/90472)	Hep B
90748* with (90460/90461 or 90471/90472)	Hib-Hep B

**Modifiers**

**Performing Provider**  
Use to indicate the practitioner who is performing the unclothed physical examination component of the medical checkup.

AM (Physician)	SA (Nurse Practitioner)	TD (Nurse)	U7 (Physician Assistant)
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**Exception to Periodicity**  
Use with THSteps medical checkups procedure codes to indicate the reason for an exception to periodicity.

23 (Unusual Anesthesia)	32 (Mandated Services)	SC (Medically Necessary)
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**FQHC and RHC**  
Federally qualified health center (FQHC) providers must use modifier EP for THSteps medical checkups. Rural health clinic (RHC) providers must bill place of service 72 for THSteps medical checkups.

**Vaccine/Toxoids**  
Use to indicate a vaccine/toxoid *not available* through TVFC and the number of state defined components administered per vaccine.

U1	Vaccine/toxoid privately purchased by provider when TVFC vaccine/toxoid is not available
----	--

**Vaccine Administration and Preventive E/M Visits**  
Use with THSteps preventive visit checkup procedure codes to indicate a significant, separately identifiable E/M service that was rendered by the same provider on the same day as the immunization administration.

25	Significant, separately identifiable evaluation
----	---

**Condition Indicator Codes**  
Use one of the Condition Indicators below if a referral was made.

Indicator	Indicator Codes	Description
N	NU	Not used (no referral)
Y	ST	New services requested
Y	S2	Under treatment



# Texas Health Steps Quick Reference Guide

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## THSteps medical checkup CPT codes:

### **New Patient**

- 99381, 99382, 99383, 99384, 99385

### **Established Patient**

- 99391, 99392, 99393, 99394, 99395

### **Follow Up visit**

- 99211

### **Immunizations**

- Diagnosis code Z00110, Z00111, Z00129, Z00121, Z0000, or Z0001 in addition to Z23
- Appropriate immunization administration and vaccine codes



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# Texas Health Steps Quick Reference Guide

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## **Additional requirements**

THSteps Benefit Code EP1

Identify the provider completing the physical examination

- AM-Physician
- SA-Nurse Practitioner
- TD-Registered Nurse
- U7-Physician Assistant

Condition indicators

- NU-Not used (no referral)
- ST-New services requested
- S2-Under treatment



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# Texas Health Steps Quick Reference Guide

Procedures that are a benefit may be reimbursed on the same day as a medical checkup-

- Postpartum depression screening (CPT code G8431 or G8510)
- Developmental screening (CPT code 96110)
- Autism screening (CPT code 96110 with U6 modifier)
- Mental health screening in adolescents (CPT code 96160 or 96161)
- Tuberculin Skin Test (TST) (CPT code 86580)
- Point-of-care lead testing (CPT code 83655 with QW modifier)
- Immunizations administration (Individual MCOs may require the use of a modifier)
- Oral Evaluation & Fluoride Varnish (CPT code 99429 with U5 modifier)



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# Separate Identifiable Acute Care Evaluation & Management (E/M) Visit

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Acute or chronic condition that requires care in addition to the checkup:

- May be treated at the same time of the medical checkup, or
- Child may be referred.

Child's medical record must contain documentation of Medical necessity.

A separate claim is not indicated when treatment for an insignificant or trivial problem/abnormality does not require additional work.



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# Separate Identifiable Acute Care Evaluation & Management (E/M) Visit

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Both the checkup and E/M visit may be reimbursed as a *NEW patient visit* if child meets new patient requirements.

Contact the MCO or TMHP for claims filing information

- Appropriate diagnosis code
- Appropriate evaluation and management code



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# **Texas Health Steps Dental Checkup and Services**

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# Texas Health Steps Dental Services

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Texas Health Steps dental services are benefits of Medicaid eligible children from birth through 20 years of age.

- Early detection and treatment of dental health problems.
- Oral health preventive services.



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# Texas Health Steps Dental Services

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Services include preventive and medically necessary dental services:

- Dental preventive services; checkups every 6 months
- Therapeutic services
- Diagnostic services
- Orthodontia services
- Anticipatory guidance
- Self referral or referral by medical provider
- Specialist referrals by main dentist



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# Texas Health Steps Dental Services

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- Medical providers refer children 6 months and older to establish a main dentist / dental home
- Clients can self refer to main dentist / dental home
- Clients 6 months through 20 years receive dental checkup at 6 month intervals (181 days)
- Periodicity follows -
  - Academy of Pediatric Dentistry Periodicity Guidelines
  - American Dental Association Guidelines for Prescribing Dental Radiographs



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# First Dental Home

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First Dental Home (FDH) is a package of dental services aimed at improving the oral health of children, ages 6 through 35 months, who have Medicaid benefits.

## Goals

- Begin preventive dental services for very young children to decrease the occurrence of Early Childhood Caries (ECC).
- Provide simple and consistent oral health messages to parents and caregivers.



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# First Dental Home

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Children ages 6 through 35 months of age may be referred at 6 months of age and receive services at:

- 3-month intervals based on their caries risk assessment.
- 6-month intervals thereafter through 3 years of age.



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# First Dental Home

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## Benefits

- Comprehensive oral examination
- Oral hygiene instruction with primary caregiver
- Dental prophylaxis
- Topical fluoride application using fluoride varnish
- Caries risk assessment
- Dental anticipatory guidance



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# First Dental Home

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**First Dental Home** providers must complete training and certification from Texas Health Steps.

Link to the online training at <http://www.txhealthsteps.com> and click on “Courses”, then under Topic, select Oral Health and then click on First Dental Home.

For more information on First Dental Home, link to <http://www.dshs.texas.gov/thsteps/FDH.shtm>



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# Texas Health Steps Dental Services

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Dental checkups and visits may be scheduled:

- At 6 months of age for preventive care.
- At more frequent intervals if in First Dental Home.
- At any age for appropriate therapeutic procedures or emergency dental services.



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# Texas Health Steps Dental Services

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Exceptions to six-month periodicity for dental checkup services:

- Medically necessary.
- Required to meet federal or state requirements.
- Patient requests second opinion or service provider change.



# Texas Health Steps Dental Services

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Some services may require prior authorization.

Contact the appropriate dental managed care organization, or TMHP for further information.

Emergency and trauma services

- Prior authorization is not required.
- Contact the appropriate dental managed care organization or TMHP for further information.



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# Carries Risk Assessment (CRA)

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- Prevention of childhood caries is a fundamental part of preventative dental care and it is crucial to oral health that Texas manages caries risk in our child population.
- HHSC made the decision to utilize Dental Quality Alliance (DQA) measures in 2017 so Texas would have nationally recognized standards for dental care.



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# Caries Risk Assessment (CRA)

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- In order to implement the DQA sealant measure as part of its 2017 dental P4Q program, HHSC Quality Assurance (QA) initiated steps to track documented caries risk assessments.
- In order to track caries risk assessment results, providers append the CRA code to the oral evaluation on their claim form.
- The American Dental Association and the American Academy of Pediatric Dentistry support DQA measures and utilizing them would help Texas policy align with best practices and standards of care.



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# Caries Risk Assessment (CRA)

Texas Health Steps requires [caries risk assessment](#) and documentation to be included in all dental exams. Reimbursement for dental exams will be denied by Medicaid unless a caries risk assessment has properly been conducted, documented, and coded.

HHS offers training with step-by-step guidance about conducting and documenting caries risk assessment for patients ages 6 months through 20 years. Take the First Dental Home (FDH) training module for children 6 through 35 months old; and, the Promoting Oral Health through Caries Risk Assessment and Dental Anticipatory Guidance (OHCRA) for children 3 through 20 years old. Both trainings provide links to all caries risk assessment forms and include documentation and billing information.

To access the training modules, link to <http://www.txhealthsteps.com/cms>, select Courses, then under Topic, select Oral Health.



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# Adolescent Dental Needs

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Adolescents have distinctive dental needs.

- Potential for dental caries, traumatic injury and periodontal disease
- May use tobacco, alcohol and drugs
- Young pregnant women need dental evaluation
- Orthodontic treatment
- Aesthetics
- Oral piercings



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# Children in Foster Care

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Children entering or re-entering foster care require the following:

- Texas Health Steps dental checkup within 60 days

Checkups must be performed by a dental provider enrolled in Medicaid and Texas Health Steps, and who is contracted with STAR Health.

STAR Health member connection representatives call caregivers immediately once a child is enrolled in STAR Health to offer assistance with scheduling the Texas Health Steps dental checkup.



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# Related Programs

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# Texas Vaccine for Children (TVFC)

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Texas Health Steps providers are strongly encouraged to enroll in TVFC.

Vaccines available at no cost to providers.

To enroll, or for more provider information, go to

[www.dshs.texas.gov/immunize/tvfc/default.shtm](http://www.dshs.texas.gov/immunize/tvfc/default.shtm)



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# Texas Vaccine for Children (TVFC)

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Children birth through 18 years of age who meet at least one of the following criteria are eligible to receive TVFC vaccine from any TVFC-enrolled provider.

- Medicaid eligible
- Uninsured
- American Indian or Alaskan Native
- Underinsured
- Enrolled in CHIP



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# Texas Vaccine for Children (TVFC)

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## **UNDERINSURED**

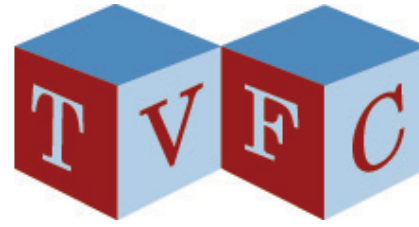
A child who has commercial (private) health insurance, but:

- Coverage does not include vaccines;
- Insurance covers only selected vaccines (TVFC-eligible for non-covered vaccines only)



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# Texas Vaccines *for* Children



## **TVFC CRITERIA**

Children through 18 years of age who *meet at least one* of the following criteria are eligible to receive TVFC vaccine:

- **Medicaid eligible:** A child who is eligible for the Medicaid program. *(For the purposes of the TVFC program, the terms "Medicaid-eligible" and "Medicaid-enrolled" are equivalent and refer to children who have health insurance covered by a state Medicaid program)*
- **Uninsured:** A child who has no health insurance coverage
- **American Indian or Alaska Native:** As defined by the Indian Health Care Improvement Act (**25 U.S.C. 1603**)
- **CHIP eligible:** Children who receive benefits from the Children's Health Insurance Plan (CHIP).
- **Underinsured:**
  - A child who has commercial (private) insurance, but the coverage does not include vaccines;
  - A child whose insurance covers only selected vaccines (TVFC eligible for non-covered vaccines only)

# ImmTrac2 Texas Immunization Registry

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- State law requires that all providers must report.
- Child's immunization information is stored electronically.
- Free Service
- One centralized system

Consent happens during:  
birth registration process  
**or**  
completion of consent form.



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# Case Management for Children and Pregnant Women

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## Services

- Assist eligible clients in gaining access to medically necessary medical, social, educational and other services.
- Provides health related case management services to Medicaid eligible children and pregnant women.
- A Medicaid benefit and a component of Texas Health Steps services.



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# Case Management for Children and Pregnant Women

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## Eligibility

To be eligible for case management services, the client must:

- Be Medicaid-eligible in Texas.
- Be a child with a health condition/health risk or a pregnant woman with a high-risk condition (pregnant at time of enrollment).
- Need assistance in gaining access to the necessary medical, social, educational, and other services related to their health condition/health risk or high-risk condition.
- Desire case management services.



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# Case Management for Children and Pregnant Women

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## Who are Case Management Providers?

- Registered Nurses
- Licensed Social Workers

## Where do they work?

- Nonprofit Agencies/Organizations
- Individual Owners
- Healthcare Clinics
- Schools & School Districts
- Rehabilitation Centers



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# Case Management for Children and Pregnant Women

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## What Are Case Management Services?

- Identifying needs of clients and their family; develop plan to address needs; follow-up with client and family to ensure needs have been addressed or resolved.
- Identifying strengths and challenges.
- Assisting with accessing, advocating for, and coordinating needed services.
- Empowering clients to find and access services they need.
- Delivering services in a culturally sensitive manner.



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# Case Management for Children and Pregnant Women

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## Identifying Strengths and Challenges

- Encourage families to identify their own strengths.
- Identify barriers to addressing client needs.

## Empowering clients

- Encourage clients and families to become active participants.
- Educate clients so they are able to access services in the future.



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# Case Management for Children and Pregnant Women

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## Assist with Accessing, Advocating for, and Coordinating

- Durable medical equipment and supplies.
- Referral to developmental and mental health services.
- Education/school services.



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# Case Management for Children and Pregnant Women

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## How does it differ from other CM programs/care coordination?

- Home visits are usually conducted.
- Visits are face-to-face.
- Case Manager may attend school meetings with parent to advocate for client.
- The whole family is assessed, not just the client.
- Services are provided only if client currently has needs related to their health condition or health risk.



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# Case Management for Children & Pregnant Women Brochure - 23599



## Case Management for Children

### Who can get a case manager?

Children (birth to age 20) who get Medicaid and:

- Have health problems.
- Are at a high risk for getting health problems.

### What do case managers do?

A case manager will visit with you and then:

- Find out what services you need.
- Find services near where you live.
- Teach you how to find and get other services.
- Make sure you are getting the services you need.

### What kind of help can I get?

- Getting medical and dental services.
- Finding a counselor.
- Working on school or education issues.
- Getting other services.

## Case Management for Pregnant Women

### Who can get a case manager?

Pregnant women who get Medicaid and have a health concern.

### What do case managers do?

A case manager will visit with you and then:

- Find out what services you need.
- Find services near where you live.
- Teach you how to find and get other services.
- Make sure you are getting the services you need.

### What kind of help can I get?

- Getting prenatal care.
- Finding a counselor.
- Getting other services.



### How can you get a case manager?

Call Texas Health Steps at 877-847-8377 (toll-free), Monday through Friday, 8 a.m. to 6 p.m. CST or visit [dshs.texas.gov/caseman/](https://dshs.texas.gov/caseman/).



[MyChildrensMedicaid.org](https://MyChildrensMedicaid.org) | 877-847-8377

Children and Pregnant Women

Need help finding  
and getting services?

A case manager might be able to help you.



Case Management for Children and Pregnant Women

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# Making a Referral

www.dshs.texas.gov/caseman/default.shtm



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**Texas Department of State  
Health Services**

Topics: A B C D E F G H I J K L M N O P Q R S T U V W

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## Case Management for Children and Pregnant Women

[Administración de Casos para Niños y Mujeres Embarazadas](#)

To watch a short video about our services, click on the arrow below.



[Learn about Case Management](#)



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# Making a Referral

Call Texas Health Steps at 1-877-847-8377 or fax CM referral form to 512-533-3867



CM Referral  
10/16

## REFERRAL FOR CASE MANAGEMENT FOR CHILDREN AND PREGNANT WOMEN

REFERRAL		
Referral Date:	Name of Referral Source (List agency/company name):	Name of Person Making Referral:
Referral Source (Please check one):		
<input type="checkbox"/> Health Care Provider	<input type="checkbox"/> Community Agency	<input type="checkbox"/> School <input type="checkbox"/> ECI <input type="checkbox"/> City or County Health Department
<input type="checkbox"/> Health Plan	<input type="checkbox"/> Individual	<input type="checkbox"/> State Agency: <input type="checkbox"/> Other
Phone Number for Person Making Referral:	Fax Number for Person Making Referral:	
Do you Desire Information Regarding the Status of the Referral?		
<input type="checkbox"/> YES <input type="checkbox"/> NO		

CLIENT INFORMATION			
Client Name:	DOB:	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Medicaid #:	Describe Medical/Health Condition/Risk or High-Risk Pregnancy Condition:		
Parent/Guardian Name (if client is under 18):	Language Preference:		
Residential Address:	City:	ZIP:	County:
Phone Numbers -	Home:	Work:	Cell: Other:



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# Case Management Referral Pad

- Designed for providers to make referrals for Case Management
- Order publication #05-13916 at <http://www.dshs.texas.gov/thsteps/THStepsCatalog.shtm>
- Two-sided pad with 50 referral forms



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# Personal Care Services (PCS)

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**PCS** is a Medicaid benefit that assists eligible clients who require assistance with **activities of daily living (ADLs)**

*and*

**instrumental activities of daily living (IADLs)** because of a physical, cognitive or behavioral limitation **related to** their disability or chronic health condition.



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# Personal Care Services (PCS)

## ADLs

- Bathing
- Locomotion or Mobility
- Dressing
- Eating
- Personal Hygiene
- Positioning
- Transferring
- Toileting

## IADLs

- Grocery/Household Shopping
- Light Housework
- Laundry
- Meal Preparation
- Medication Assistance or Administration
- Escort or Assistance with Transportation Services
- Money Management
- Telephone Use or Other Communication

Assistance is provided by non-skilled attendants. Nursing tasks are not covered under Personal Care Services.



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# Personal Care Services (PCS)

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## Who can receive PCS?

Individuals who are:

- Younger than 21 years of age.
- Enrolled with Texas Medicaid.
  - Fee-for-Service (FFS)
  - STAR
- Have physical, cognitive, or behavioral limitations related to a disability, or chronic health condition that inhibits ability to accomplish ADLs and IADLs.
- Have parental barriers that prevent the client's responsible adult from assisting the client.



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# Personal Care Services (PCS)

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## **The following needs of the responsible adult are also considered:**

- The responsible adult's need to sleep, work, attend school, meet his/her own medical needs.
- The responsible adult's legal obligation to care for, support, and meet the medical, education, and psychosocial needs of his/her other dependents.
- The responsible adult's physical ability to perform the personal care services.



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# Personal Care Services (PCS)

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## Client Referrals

A client referral can be provided by anyone who recognizes a client need for PCS including, but not limited to, the following:

- Client or family member.
- A primary practitioner, primary care provider, or medical home.

DSHS social workers process referrals, assess clients, and submit prior authorizations to TMHP for services.

PCS/CFC Referral Line: 1-888-276-0702



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# Personal Care Services (PCS) Brochure - 23601

Help for Daily Living.

## Personal Care Services (PCS)



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Help finding services.

### What is the Personal Care Services benefit?

Personal Care Services (PCS) is a Medicaid benefit that helps clients with everyday tasks like:

- Bathing
- Toileting
- Walking
- Fixing meals
- Eating
- Dressing
- Light housework

### Who can get these services?

A person age 20 or younger who has:

- Medicaid coverage.
- An ongoing disability or physical or mental illness that has been confirmed by a doctor.

If you need help with these kinds of tasks because of an ongoing physical, mental or behavioral limitation, you may be able to get PCS.

### How it works.

First, you must be assessed by a Department of State Health Services (DSHS) Case Manager. An assessment is a review of your condition to decide if you can get PCS. The assessment will help decide the level of services you may need.

For children birth through 17 years, part of the assessment will include looking at the parental support you already have. The services you receive will take into account your parent's:

- Need to sleep, work, attend school or meet his/her own medical needs;
- Legal obligation to care for, support and meet the medical, educational and psychosocial needs of his/her other dependents; and
- Physical ability to perform the personal care services.

After you start getting services, you will need to be reassessed:

- Every 12 months.
- When there is a change in your medical condition or in your living situation at home.

### Case Management for Children and Pregnant Women

You may also be able to get case management services. These services help you when you have a health problem or are at risk for a health problem. Case management may help you to:

- Get medical and dental services.
- Find a counselor.
- Work on school or education issues.
- Get other services.

### DSHS Case Manager and Region

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### Selected PCS Provider

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### Medical Home

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### For More Information and Help

Texas Medicaid & Healthcare Partnership (TMHP)

#### TMHP Client Line

For questions about the PCS benefit, call 888-276-0702 (toll free), Monday through Friday, 7 a.m. to 7 p.m. CST.

### Case Management for Children and Pregnant Women

If you want to know about Case Management Services, call Texas Health Steps at 877-847-8377 (toll free), Monday through Friday, 8 a.m. to 6 p.m. CST or visit [dshs.texas.gov/caseman/](http://dshs.texas.gov/caseman/).



# Community First Choice (CFC)

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Community First Choice (CFC) is a program that enables Texas Medicaid to provide the most cost effective approach to basic attendant and habilitation service delivery.

CFC is a Medicaid benefit that assists eligible clients who require assistance with **activities of daily living (ADLs)** *and* **instrumental activities of daily living (IADLs)** because of a physical, cognitive or behavioral limitation **related to** their disability or chronic health condition.

It also helps with habilitation - teaching a person how to do everyday tasks without help.



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# Community First Choice (CFC)

## Services

- Personal assistance services is assistance with activities of daily living (ADLs), instrumental activities of daily living (IADLs), and health-related tasks through hands-on assistance, supervision or cueing.
- Habilitation services is the acquisition, maintenance and enhancement of skills-training to accomplish ADLs, IADLs, and health-related tasks.
- Support Management provides voluntary training for individuals who want to choose to select, manage and dismiss their own attendants.
- Emergency Response System is a service for members who would otherwise require extensive routine supervision and who live alone, alone for significant parts of the day, or do not have regular caregivers for extended periods of time.



# Community First Choice (CFC)



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## ADLs

- Bathing
- Locomotion or Mobility
- Dressing
- Eating
- Personal Hygiene
- Positioning
- Transferring
- Toileting

## IADLs

- Grocery/Household Shopping
- Light Housework
- Laundry
- Meal Preparation
- Medication Assistance or Administration
- Escort or Assistance with Transportation Services
- Money Management
- Telephone Use or Other Communication

Assistance is provided by non-skilled attendants. Nursing tasks are not covered under Community First Choice.

# Community First Choice (CFC)

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- CFC follows the same rules for parental barriers as PCS for attendant care services only.
- Parent barriers are not taken into consideration for habilitation services.



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# Community First Choice (CFC)

## Who can receive CFC?

Individuals who are:

- Younger than 21 years of age.
- Enrolled with Texas Medicaid.
  - Fee-for-Service (FFS)
  - STAR
- Have physical, cognitive, or behavioral limitations related to a disability, or chronic health condition that inhibits ability to accomplish ADLs and IADLs.
- Require an institutional level of care, such as:
  - A nursing facility
  - An institution of mental disease
  - An intermediate care facility for individuals with an intellectual disability or related condition



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# Community First Choice (CFC)

## Client Referrals

A client referral can be provided by anyone who recognizes a client need for CFC including, but not limited to, the following:

- Client or family member.
- A primary practitioner, primary care provider, or medical home.

DSHS social workers process referrals, assess clients, and submit prior authorizations to TMHP for services.

PCS/CFC Referral Line: 1-888-276-0702



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# Children with Special Health Care Needs (CSHCN)

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## Benefit Summary

The Children with Special Health Care Needs (CSHCN) Program serves:

- Children who have special health-care needs.
- Individuals of any age who have cystic fibrosis.

The program helps clients with their:

- Medical, dental and mental health care
- Drugs
- Special therapies
- Case Management
- Family Support Services
- Travel to health care visits
- Insurance premiums



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# Children with Special Health Care Needs (CSHCN)

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## Eligibility Summary

The program is available to anyone who-

- Lives in Texas (includes undocumented residents).
- Is under 21 years old (or any age with cystic fibrosis).
- Has a certain level of family income.
- Has a medical problem that-
  - is expected to last at least 12 months.
  - will limit one or more major life activities.
  - needs more health care than children usually need.
  - has physical symptoms\*.

*\*This means that the program does not cover clients with only a mental, behavioral or emotional condition, or a delay in development.*



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# Children with Special Health Care Needs (CSHCN)

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## Contact the CSHCN Services Program

Mailing Address:

Children with Special Health Care Needs  
Services Program  
Department of State Health Services, MC 1938  
P.O. Box 149347  
Austin, TX 78714-9347

Ask questions by phone:

CSHCN Inquiry Line toll free at 1-800-252-8023  
512-776-7355 Austin  
512-776-7565 Fax



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# Children with Special Health Care Needs Brochure

## Support for Families

### Navigate Life Texas

Navigate Life Texas is a resource website for families of children with disabilities and special health care needs. The website includes tools, articles, and videos about diagnoses, health care, family support, and more. To learn more, visit [navigatelifetexas.org](http://navigatelifetexas.org).

### Texas Parent to Parent

Texas Parent to Parent is a parent-led non-profit organization that provides support for families of children with disabilities, special health care needs, and chronic illnesses. To learn more, visit [txp2p.org](http://txp2p.org).

## Learn More About Birth Defects

- Centers for Disease Control and Prevention:  
[cdc.gov/ncbddd/birthdefects](http://cdc.gov/ncbddd/birthdefects)
- March of Dimes:  
[marchofdimes.org](http://marchofdimes.org)
- Texas Birth Defects Epidemiology & Surveillance Branch:  
[dshs.texas.gov/birthdefects](http://dshs.texas.gov/birthdefects)

## About Us

The Children with Special Health Care Needs (CSHCN) Systems Development Group works to improve care for children and youth with special health care needs. We partner with community-based organizations across Texas to provide support for families of CSHCN.

To see a list of our community-based partners, visit [dshs.texas.gov/mch/CSHCN/CSHCN-Contractors.aspx](http://dshs.texas.gov/mch/CSHCN/CSHCN-Contractors.aspx).

## Contact CSHCN Systems Development Group

Department of State Health Services  
CSHCN Systems Development Group  
Mail Code: 1922  
PO BOX 149347  
Austin, TX 78714-9347

512-776-7373  
[CSHCNSDG@dshs.texas.gov](mailto:CSHCNSDG@dshs.texas.gov)

[dshs.texas.gov/mch/CSHCN.aspx](http://dshs.texas.gov/mch/CSHCN.aspx)

## Children with Special Health Care Needs



Texas Department of State  
Health Services

A Resource Guide for Families



# FAQ

**What does CSHCN mean?** Children with Special Health Care Needs is a program that was originally created in 1933 as the Chronically Ill and Disabled Children's program to help children with special health care needs in Texas improve their health, well-being and quality of life. Not only has the name changed, but also several important features. Previously, the program was diagnosis specific; now clients receive comprehensive health care benefits.

**Who are CSHCN clients?** They are children ages birth to 21 with a medical diagnosis that requires special health consideration, and for people of any age with Cystic Fibrosis. The program allows for higher income than Medicaid. For example, a family of four can make up to \$3441.67 a month and still qualify. The program also serves children unable to secure insurance through traditional programs due to immigration status.

**What services are covered under CSHCN?** The program assists clients and their families obtain medically necessary health care benefits and support services. The Family Support Services program helps families to secure additional benefits such as vehicle and home modifications and respite for caregivers. Families are also eligible to receive case management by licensed social workers or registered nurses. CSHCN claims are reimbursed at Medicaid rates.

**How can I help?** This program is in need of doctors, dentists and specialists to provide primary and preventative care. Often it necessary for clients to travel great distances for even the most basic of services; becoming a provider and taking several, or just a few of our clients, will make a big impact on access to healthcare for these clients.

**How can I get more information?** Contact CSHCN Provider Outreach: Martha Calderon @ 512-873-6315, or Erica Salazar @ 254-771-6774, to request a visit to your office to provide a program overview and answer questions. You can also explore our Children with Special Health Care Needs program website, <https://hhs.texas.gov/services/disability/children-special-health-care-needs-program> for additional information on the program, benefits and clients supports, as well as links and forms for enrollment.

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800-789-2865 – Regional Office  
[martha.calderon@dshs.texas.gov](mailto:martha.calderon@dshs.texas.gov) [ericaS.salazar@dshs.texas.gov](mailto:ericaS.salazar@dshs.texas.gov)

**ENROLLMENT:** <https://hhs.texas.gov/laws-regulations/forms/3000-3999/form-3031-cshcn-program-application>

**CSHCN Inquiry Line:** 800-252-8023, 512-776-7355 or 877-888-2350 [cshcn@hhsc.state.tx.us](mailto:cshcn@hhsc.state.tx.us)

# Medical Transportation Program (MTP)

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The Medical Transportation Program (MTP), under the direction of HHSC, arranges transportation for all children eligible for Medicaid, and children in the Children with Special Health Care Needs (CSHCN) Services Program. MTP is responsible for the prior authorization of all MTP services.

Clients can request transportation services by calling toll free:

- Statewide 1-877-633-8747
- Houston/Beaumont area 1-855-687-4786
- Dallas/Ft. Worth area 1-855-687-3255



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# Medical Transportation Program Desk Reference 5386



## FREE RIDES FROM MEDICAID: A REMEDY FOR MISSED APPOINTMENTS

*Use this desk reference to talk with patients about transportation services available through Medicaid.*

### Medicaid Pays for the Ride

Medicaid provides free transportation for Texas Health Steps patients and most others who use Medicaid medical and dental services, provided they have no other means to make it to their visit. However, a patient's doctor or dentist may need to complete a form to prove the medical need for the service.

### How Medicaid Pays for the Ride

Medicaid provides three ways for patients to get to their doctor appointments:

1. If your patient does not have a car and no one can drive them, Medicaid can arrange and pay for their ride on the bus or with a ride sharing service.
2. If your patient does not have a car but someone can drive them to their appointment, then Medicaid will pay back the driver by the mile to take the patient to their Medicaid medical or dental appointment and back. For Medicaid to pay, the person driving must have a current driver's license, inspection sticker, license plate, car insurance, and Social Security number.
3. If your patient has a car but no gas money, Medicaid might pay your patient ahead of time by the mile to get to the visit and back home. For Medicaid to pay, the person driving must have a current driver's license, inspection sticker, license plate, car insurance, and Social Security number. Only Texas Health Steps patients can get paid ahead of time.

#### Additional Medicaid transportation services:

- Medicaid can pay for a parent or an adult to travel with a child 18 years old or younger that has a visit with a Medicaid provider.
- For trips that require an overnight stay, Medicaid might pay for overnight lodging and meals for the patient and their parent or guardian.

### Advantages for Health-Care Professionals

- Medicaid free rides help patients **miss fewer appointments**, reducing no-shows and the need to over-book appointments.
- With a single call to Medicaid's 1-877-MED-TRIP hotline, your office or patient can **arrange travel for an entire month** for ongoing appointments such as renal dialysis for kidney disease.

### How You Can Help Your Practice and Your Patients

- Tell Medicaid patients about the free ride service when you schedule visits.
- Remind patients about Medicaid free rides if they miss an appointment.
- Provide the Medicaid free ride phone number: 1-877-MED-TRIP (1-877-633-8747).

### Contact Information

Call Medicaid toll-free at 1-877-633-8747, Monday to Friday, 8 a.m. to 5 p.m.

Patients should call to arrange transportation services immediately after scheduling a doctor's visit and at least two workdays before the appointment (the sooner, the better).

To file a complaint or suggestion, the patient or the patient's advocate should call Medicaid toll-free 1-877-633-8747.

Learn more at [www.HHSC.state.tx.us](http://www.HHSC.state.tx.us) and click on "Questions about your benefits?"

### Confidentiality

Medicaid free ride services are confidential.

Client/patient medical information remains confidential.



# Medical Transportation Program Brochure 10901



## WE CAN HELP YOU GET A RIDE.

If you or your child can't get to the doctor or dentist, Medicaid may be able to help. Children with Medicaid and their parent can get free rides to get to and from the doctor, dentist, hospital, or drug store. Some adults with Medicaid can get free rides, too.

## TWO WAYS TO GET TO THE DOCTOR

NEED A RIDE TO THE DOCTOR?  
CALL MEDICAID.



# 1

**Don't have a car? Don't know anyone who can drive you?**

Medicaid can pay for your ride on the bus or with a ride sharing service.



# 2

**Have a car or know someone who can drive you?**

Medicaid might pay back you or your driver by the mile to take you to the doctor and back home. The person can be anyone that has a Social Security number and an up-to-date:

- Driver's license
- License plate
- Inspection sticker
- Car insurance policy



## OTHER SERVICES



### Parent or Adult

Need to go with your child? Medicaid can pay for a parent or adult's transportation with a child age 18 or younger who has a Medicaid visit.



### Meals and Lodging

Does your child have to travel out of town for a Medicaid visit? Medicaid might pay for a place to stay and meals for the child and their parent or guardian.

TO FIND OUT IF MEDICAID CAN PAY FOR YOUR RIDE, CALL US TOLL FREE:

Live in the Houston/Beaumont area?  
Call 1-855-687-4786.

Live in the Dallas area? Call 1-855-687-3255.

Everyone else can call 1-877-633-8747  
(1-877-MED-TRIP).

Or, go to [www.HHSC.state.tx.us](http://www.HHSC.state.tx.us) and click on "Questions about your benefits?"



If you have Medicaid,  
you have a ride.  
**1-877-MED-TRIP**





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# Resources

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# Texas Health Steps Provider Outreach Referral Service

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The Texas Health Steps Provider Outreach Referral Service is utilized by Texas Health Steps providers who request outreach and follow-up on behalf of a Texas Health Steps patient. This service provides necessary outreach such as:

- Contacting a patient to schedule a follow-up appointment.
- Contacting a patient to reschedule a missed appointment.
- Contacting a patient to assist with scheduling transportation to the appointment.
- Contacting a patient for other outreach services.



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# Texas Health Steps Provider Outreach Referral Service

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A Texas Health Steps provider may submit a request for patient outreach to the Texas Health Steps Special Services Unit (SSU) using the Texas Health Steps Provider Outreach Referral Form.

Once received, SSU will process each referral and attempt to respond to it in a timely and efficient manner.

Successfully contacted patients are:

- Assisted with scheduling or rescheduling an appointment and/or obtaining transportation to the appointment.
- Educated about the importance of keeping or canceling appointments when appropriate.
- Engaged in a problem-solving process to overcome barriers preventing them from keeping appointments.



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# Texas Health Steps Provider Outreach Referral Service



TEXAS HEALTH STEPS  
PROVIDER OUTREACH REFERRAL FORM  
FAX: 512-533-3867

- Complete this form and submit by fax.
- Use only **ONE FORM PER HOUSEHOLD**, up to 2 patients.
- You will receive notification once your referral is processed.

<b>Provider Information</b>		<b>Date:</b>	
Provider/Clinic Name:		Contact Name:	
Office Address:	City:	County:	Zip Code:
Phone Number:	Fax Number:		
Provider Type:	<input type="checkbox"/> Medical	<input type="checkbox"/> Dental	<input type="checkbox"/> Orthodontic
	<input type="checkbox"/> Case Management	<input type="checkbox"/> Other:	

<b>Parent/Guardian Information</b>	
Parent/Guardian Name:	Phone Number:
Address:	Mobile Number:
City:	County:
Language Preference:	Zip Code:
<input type="checkbox"/> English	<input type="checkbox"/> Spanish
<input type="checkbox"/> Other:	

<b>Patient #1 Information</b>	
Patient Name:	Date of Birth:
Appointment Type:	Medicaid ID:
<input type="checkbox"/> THSteps Checkup	<input type="checkbox"/> THSteps Followup
<input type="checkbox"/> Sick Visit	<input type="checkbox"/> Lead
<input type="checkbox"/> Other:	

Reason for referral (check all that apply)	
<input type="checkbox"/> Patient missed appointment, date:	<input type="checkbox"/> Assistance needed scheduling appointment.
<input type="checkbox"/> Follow-up appointment for additional lead testing.	<input type="checkbox"/> Provide updated patient address (Case Management Only)
<input type="checkbox"/> Assist with transportation to appointment.	<input type="checkbox"/> Other, see comments.

Comments:

<b>Outreach Services Results (SSU Use Only)</b>	
<input type="checkbox"/> Appointment scheduled; date/time:	<input type="checkbox"/> Patient provided education about appointment etiquette.
<input type="checkbox"/> Patient assisted with transportation to appointment.	<input type="checkbox"/> Patient will contact provider directly.
<input type="checkbox"/> No action taken; patient declined assistance.	<input type="checkbox"/> No action taken; patient no longer eligible for Medicaid.
<input type="checkbox"/> Unable to locate patient; letter mailed to patient.	<input type="checkbox"/> Other:

Comments to Provider:

<b>Patient #2 Information</b>	
Patient Name:	Date of Birth:
Appointment Type:	Medicaid ID:
<input type="checkbox"/> THSteps Checkup	<input type="checkbox"/> THSteps Followup
<input type="checkbox"/> Sick Visit	<input type="checkbox"/> Lead
<input type="checkbox"/> Other:	

Reason for referral (check all that apply)	
<input type="checkbox"/> Patient missed appointment, date:	<input type="checkbox"/> Assistance needed scheduling appointment.
<input type="checkbox"/> Follow-up appointment for additional lead testing.	<input type="checkbox"/> Provide updated patient address (Case Management Only)
<input type="checkbox"/> Assist with transportation to appointment.	<input type="checkbox"/> Other, see comments.

Comments:

<b>Outreach Services Results (SSU Use Only)</b>	
<input type="checkbox"/> Appointment scheduled; date/time:	<input type="checkbox"/> Patient provided education about appointment etiquette.
<input type="checkbox"/> Patient assisted with transportation to appointment.	<input type="checkbox"/> Patient will contact provider directly.
<input type="checkbox"/> No action taken; patient declined assistance.	<input type="checkbox"/> No action taken; patient no longer eligible for Medicaid.
<input type="checkbox"/> Unable to locate patient; letter mailed to patient.	<input type="checkbox"/> Other:

Comments to Provider:



TEXAS HEALTH STEPS  
PROVIDER OUTREACH REFERRAL SERVICES

## FAX COVER SHEET

DATE: \_\_\_\_\_

TO: SPECIAL SERVICES UNIT

PHONE: 877-847-8377

FAX: 512-533-3867

FROM: \_\_\_\_\_

PHONE: \_\_\_\_\_

FAX: \_\_\_\_\_

TOTAL PAGES INCLUDING COVER SHEET: \_\_\_\_\_

COMMENTS:

**CONFIDENTIALITY NOTICE:** This fax and any pages transmitted with it are confidential and intended solely for the use of the individual or entity to which they are intended. If you are not the intended recipient, you are hereby notified that any use, disclosure, dissemination, distribution, copying, or taking of any action because of this information is strictly prohibited. Please notify the sender immediately if you received this fax in error and destroy this fax and any pages transmitted with it.



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# Provider Outreach Referral Service

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Texas Health Steps providers may submit the referral form by fax to the THSteps Special Services Unit (SSU) at:

**512-533-3867**

Providers who have questions about the Provider Outreach Referral Service or need technical assistance with completion and submission of the referral form should contact their Texas Health Steps Provider Relations Representative.

Contact name and information can be found at:  
<http://www.dshs.texas.gov/thsteps/regions.shtm>



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# Online Provider Education (OPE)

OPE offers more than 50 **FREE** online CE courses on a variety of preventive health topics that support the Texas Health Steps program.



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The screenshot shows the Texas Health Steps OPE website. The main banner is purple with white text: "Get CME today. Put it into practice tomorrow." and a "REGISTER NOW >>" button. Below the banner, there are sections for "Free online CME from experts you trust. Available 24/7." with a description of the program, an "Overview video" player, and "PODCASTS" and "ETHICS-ACCREDITED COURSES" links. On the right, there are two sidebar sections: "FIND A COURSE" with a "FIND >>" button and "RESOURCE CENTER" with a "GET >>" button.

**Get CME today.  
Put it into practice tomorrow.**

**REGISTER NOW >>**

**Free online CME from experts you trust. Available 24/7.**

Texas Health Steps' award-winning online program offers FREE CE courses for primary care providers and other health professionals. These courses offer updated clinical, regulatory, and best practice guidelines for a range of preventive health, oral health, mental health, and case management topics.

Overview video

**PODCASTS** **ETHICS-ACCREDITED COURSES**

**FIND A COURSE**

Choose from more than 50 CE-accredited courses on pediatric and adolescent health-care topics.

**FIND >>**

**RESOURCE CENTER**

Access the latest references and resources 24/7, and take advantage of our patient case studies and quick courses here.

**GET >>**

<http://www.txhealthsteps.com/>



# Online Provider Education (OPE)

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The courses are available 24/7 and offer education covering:

- Best practices.
- Case-based evaluation and diagnostic training.
- Texas Health Steps preventive and screening services.
- Overall Medicaid benefits.



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# Online Provider Education (OPE)

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The site also offers mobile-friendly quick courses and case studies. These 5-minute courses provide targeted instruction and up to date information on timely Medicaid topics.

Stay connected to OPE!

[Sign up for OPE updates with GovDelivery](#)



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# Online Provider Education - FLYER



## TEXAS HEALTH STEPS ONLINE PROVIDER EDUCATION

*Keep updated.*  
GET FREE  
CE CREDITS.  
*Online.*

*Self-paced courses  
for health-care providers.*



[www.txhealthsteps.com](http://www.txhealthsteps.com)  
1-877-847-8377

# Texas Health Steps Resource Catalog

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Texas Health Steps offers brochures, posters and other outreach resources, at no cost to Medical and Dental Providers, Schools, Community Based Organizations (CBOs), Case Managers and other partners.

Materials cover a variety of topics, including:

- Medical or Dental Checkup
- Newborn Hearing Screening/TEHDI
- Medical Transportation Program
- Case Management for Children and Pregnant Women

<http://www.dshs.texas.gov/thsteps/THStepsCatalog.shtm>



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# Texas Health Steps Resource Catalog

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Email a request to [txmailhouse@maximus.com](mailto:txmailhouse@maximus.com) to receive a log in/password to place an order, or call 512-919-1623.

Include the following information:

- Organization Name
- Physical Street Address (Cannot ship to PO Box)
- City, State, Zip Code
- Contact Person
- Telephone (With area code)
- Email address (Email address is required to receive an online account to order publications)



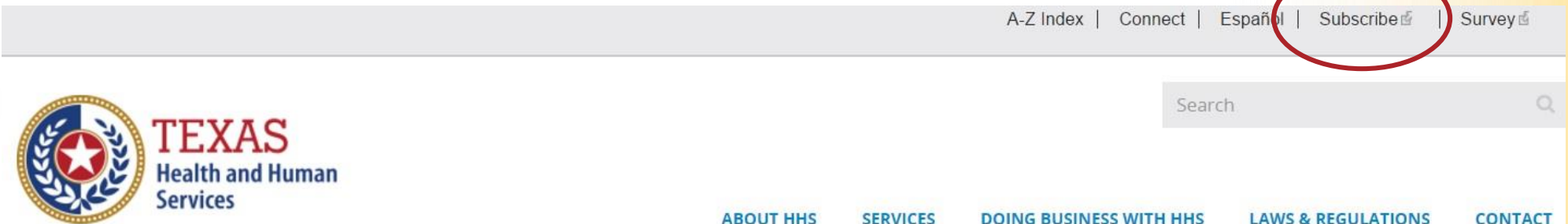
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# Sign up for Texas Health Steps Alerts

You can sign up for email notifications that will let you know when information, forms, and/or documents on the Texas Health Steps internet have been updated. To begin receiving notifications, go to the HHS internet home page at <https://hhs.texas.gov/> and click on **Subscribe**.



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# Provider Information Change Form

## Provider Information Change Form

Texas Medicaid fee-for-service and Children with Special Health Care Needs (CSHCN) Services Program providers can complete and submit this form to update their provider enrollment file. Print or type all of the information on this form. Mail or fax the completed form and any additional documentation to the address at the bottom of the page.				
Date : / /				
Nine-Digit Texas Provider Identifier (TPI):			Provider Name:	
National Provider Identifier (NPI):			Primary Taxonomy Code:	
Atypical Provider Identifier (API):			Benefit Code:	
List any additional TPIs that use the same provider information:				
TPI:		TPI:		TPI:
TPI:		TPI:		TPI:
TPI:		TPI:		TPI:
<b>Physical Address</b> —The physical address cannot be a PO Box. Ambulatory Surgical Centers enrolled with Traditional Medicaid who change their ZIP Code must submit a copy of the Medicare letter along with this form.				
Street address City County State Zip Code				
Telephone: ( )		Fax Number: ( )		Email:
<b>Accounting/Mailing Address</b> —All providers who make changes to the Accounting/Mailing address must submit a copy of the W-9 Form along with this form.				
Street Address City State Zip Code				
Telephone: ( )		Fax Number: ( )		Email:
<b>Secondary Address</b>				
Street Address City State Zip Code				
Telephone: ( )		Fax Number: ( )		Email:
<b>Type of Change (check the appropriate box)</b>				
<input type="checkbox"/> Change of physical address, telephone, and/or fax number				
<input type="checkbox"/> Change of billing/mailling address, telephone, and/or fax number				
<input type="checkbox"/> Change/add secondary address, telephone, and/or fax number				
<input type="checkbox"/> Change of provider status (e.g., termination from plan, moved out of area, specialist) <i>Explain in the Comments field</i>				
<input type="checkbox"/> Other (e.g., panel closing, capacity changes, and age acceptance)				
<b>Comments:</b>				
<b>Tax Information—Federal Tax Identification (ID) Number and Name for the Internal Revenue Service (IRS)</b>				
Federal Tax ID number:			Effective Date:	
Exact name reported to the IRS for this Tax ID:				
<b>Provider Demographic Information—Note: This information can be updated on <a href="http://www.tmhpc.com">www.tmhpc.com</a>.</b>				
Languages spoken other than English:				
Provider office hours by location:				
Accepting new clients by program (check one): Accepting new clients <input type="checkbox"/> Current clients only <input type="checkbox"/> No <input type="checkbox"/>				
Patient age range accepted by provider:			Additional services offered (check one): HIV <input type="checkbox"/> High Risk OB <input type="checkbox"/>	
Participation in the Woman's Health Program? Yes <input type="checkbox"/> No <input type="checkbox"/> Patient gender limitations: Female <input type="checkbox"/> Male <input type="checkbox"/> Both <input type="checkbox"/>				
<b>Signature and date are required or the form will not be processed.</b>				
Provider signature:			Date: / /	
<b>Mail or fax the completed form to:</b> Texas Medicaid & Healthcare Partnership (TMHP) Provider Enrollment			Fax: 512-514-4214	



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**QUESTIONS?**

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# EVALUATION – HANDOUT #34

## Texas Health Steps Presentation - Evaluation Form

PRESENTER: Deneice Pryor, RN, BSN

Name (optional): \_\_\_\_\_ Date: 07/22/2020

Location: WEBINAR – BCBSTX, THSTEPS PROVIDER TRAINING

Please take a few minutes to give us your reactions and opinions about this training event.  
Your responses will let us know how to improve future presentations.

DEMOGRAPHICS				
<i>Please answer the below questions about yourself.</i>				
<b>Are you currently enrolled as a Medicaid provider?</b>				
<input type="checkbox"/> Yes		<input type="checkbox"/> No		
<b>My specialty is: (listed in alphabetical order)</b>				
<input type="checkbox"/> Administrative/Office Staff ( <i>please also select the specialty of your office</i> )				
<input type="checkbox"/> Audiologist	<input type="checkbox"/> CPW Case Manager	<input type="checkbox"/> Dentist	<input type="checkbox"/> Dermatology	<input type="checkbox"/> Dietician
<input type="checkbox"/> Emergency Medicine	<input type="checkbox"/> Family Medicine	<input type="checkbox"/> General Practice	<input type="checkbox"/> Licensed Pharmacist	<input type="checkbox"/> Midwife
<input type="checkbox"/> Nurse (ANP, RN, LVN)	<input type="checkbox"/> Obstetrics and Gynecology	<input type="checkbox"/> Optometrist	<input type="checkbox"/> Pediatrics	<input type="checkbox"/> Pharmacy Tech
<input type="checkbox"/> Physician Assistant	<input type="checkbox"/> Psychiatry	<input type="checkbox"/> Psychologist	<input type="checkbox"/> Social Worker	<input type="checkbox"/> Surgery
<input type="checkbox"/> Other _____				
<b>My sub-specialty is: (if applicable)</b>				
<input type="checkbox"/> Adolescent	<input type="checkbox"/> Child & Adolescent	<input type="checkbox"/> Clinical	<input type="checkbox"/> Neonatal	<input type="checkbox"/> Pediatric
<input type="checkbox"/> Other _____				
<b>Which best describes why you attended this event?</b>				
<input type="checkbox"/> The topic was important to me personally.				
<input type="checkbox"/> The topic was important to me professionally.				
<input type="checkbox"/> My supervisor encouraged me to attend.				
<input type="checkbox"/> I knew the presenters.				
<input type="checkbox"/> Other (please list) _____				

# Contact Information:

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## Texas Health Steps Provider Relations

Name: **DENEICE PRYOR, RN, BSN**

Phone: **512-789-2156**

Email: **deneice.pryor@dshs.texas.gov**



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