

**Happy New Year! We extend our warmest wishes to our providers for a new year filled with health and happiness!**

## **PHYSICIAN CHAMPION — DR. FRANCIS RUSHTON**

### **Integrating behavioral health into your practice**



Dr. Francis Rushton has a long history of experience serving the people of South Carolina. He worked as a pediatrician for Beaufort Pediatrics for more than 30 years, and now has been working as Medical Director for the Quality through Technology and Innovation in Pediatrics (QTIP) project, a joint initiative between the South Carolina Department of Health and Human Services (SCDHHS) and the South Carolina Chapter of the American Academy of Pediatrics.

One of the main roles of the QTIP project is integrating behavioral and physical health services, employing screening tools and assisting practices to identify resources for improving pediatric quality measures. This includes integrating preventive and treatment services within practices and/or identifying alternate solutions to obtaining behavioral health services for patients.

As a champion of whole-person care, Dr. Rushton understands the importance of behavioral health and primary care providers (PCPs) working together. “When I started, pediatrics was focused on infectious diseases,” said Dr. Rushton. “But with vaccines, we don’t see as many infectious diseases. Vaccines have changed the practice. Now, we see more behavioral health issues, and we need to address this demand.”

Expanding behavioral health services into a pediatric office, although challenging, provides opportunities to increase services to patients. A focus on behavioral health can help build on long-standing relationships and decrease stigma for families, which improves identification of behavioral health needs and increases opportunities for providing treatment services and support.

While PCPs may feel that behavioral health is not their problem or they don’t have the time or money to address behavioral health issues, Dr. Rushton urges that a change is needed in this attitude. “We all have a responsibility to help with issues like anxiety,” he said. In addition, he says the screenings don’t take long to complete with patients, and they are reimbursable by Select Health and the South Carolina Medicaid program.

**(continued on page 2)**

## **Clinical practice guidelines**

Select Health has adopted clinical practice guidelines for use in guiding the treatment of First Choice members, with the goal of reducing unnecessary variations in care. The Select Health clinical practice guidelines represent current professional standards, supported by scientific evidence and research.

These guidelines are intended to inform, not replace, the physician’s clinical judgment. The physician remains responsible for ultimately determining the applicable treatment for each individual.

Select Health’s clinical guideline list is available at: [www.selecthealthofsc.com/provider/resources/shsc-clinical-policies.aspx](http://www.selecthealthofsc.com/provider/resources/shsc-clinical-policies.aspx) or call your Provider account executive to request a copy.

## **Notice of nondiscrimination**

First Choice by Select Health of South Carolina complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. First Choice does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

## **Language services**

If your primary language is not English, language assistance services are available free of charge. Call **1-888-276-2020 (TTY 1-888-765-9586)**.

## QTIP program

The QTIP project has also put into place a program for pediatricians that encourages them to conduct behavioral health screenings during well-child visits for children. “We have worked to create a toolkit that gives providers a screening protocol,” he said. The program has been working toward more efficient referrals, reimbursement, and office receptivity to behavioral health and point-of-care support. In addition, QTIP has invested much time in teaching new skills to physicians such as recognizing the presence of severe developmental issues that may contribute to health problems.

For specific screenings that you may find useful, please see our [Behavioral Health Provider Toolkit](#) to access multiple screening tools for anxiety disorders, attention-deficient/hyperactivity disorder, and depressive disorders.

In addition to screening children, Dr. Rushton also recommends using a postpartum depression screening as part of a well visit. “I used the PHQ2, which is only two questions, as part of my regular well visits,” said Dr. Rushton. “And if it was positive, I first let the mother know that postpartum depression is common and then discuss options. By doing this, you can save lives. In one instance, Dr. Rushton recalled screening a mother of a 2-month-old, identifying through screening that she was acutely suicidal and being able to get her immediate help.

Overall, Dr. Rushton recommends that physicians raise patient awareness about behavioral health, develop referral networks with trusted providers, and consider adding a professional mental health staff worker to the practice.

## Looking to the future

Looking to the future of pediatrics, Dr. Rushton sees practices moving away from a solo pediatrician model to a team-based model of care that could include home visitors, lactation consultants, and so forth. “We need to figure out a way for all of these professionals to work better together synergistically,” said Dr. Rushton. “In the future, I’d like to see home visits as part of the norm in pediatric care. I’m intrigued with home visitors because they can spend more time with families, and they can talk to parents about things like parenting and developmental needs. They can give the support and tools parents need. And by improving health status through home care, we will see many important benefits including increased school readiness and decreased child abuse and neglect.”

Select Health sincerely appreciates Dr. Rushton’s service and valuable efforts to improving the lives of our First Choice<sup>SM</sup> members.

## Limitation of billable psychotherapy visits policy

In accordance with SCDHHS policy for licensed independent practitioner (LIP) providers, any combination of the following codes may be billed up to six sessions per month: 90832, 90834, and 90837. SCDHHS initially informed providers of this policy in a Medicaid bulletin dated November 10, 2016.

Select Health of South Carolina adheres to benefit limits as established by SCDHHS. Providers are to coordinate care when more than one behavioral health provider is providing services to the same member to ensure compliance with the benefit limit.

## Children and adolescents (20 and under):

Select Health realizes that there may be exceptional situations in which six psychotherapy sessions per month may not be sufficient to meet the needs of children and adolescent members (aged 20 and under). In these situations, providers will need to submit a prior authorization request to Select Health’s Behavioral Health Utilization Management department to determine if additional monthly use sessions for consistency are medically necessary.

Please contact the Behavioral Health Utilization Management department at **1-866-341-8765** if you have questions.

## Pharmacy updates:

Effective January 1, 2019, for medications that require prior authorization, members may receive an emergency supply of medicine that will cover them for 72 hours while a prior authorization request is pending. A member is permitted one temporary supply per prescription number. Inhalers, diabetic test strip and supplies, and creams or lotions are exceptions to the supply limit because of how they are packaged. For those medicines, the member may receive the smallest package size available.

Effective January 1, 2019, the following formulary changes went into effect for First Choice Members:

Medication	Formulary Status
Acyclovir Cream	Requires Prior Authorization
Acyclovir Ointment	Requires Prior Authorization
Sklice	Requires Prior Authorization
Spinosad	Requires trial of over the counter products
Fentanyl Patches (all strengths)	Requires Prior Authorization
Morphine Sulfate Tablets 15MG	Requires Prior Authorization
Morphine Sulfate Tablets 30MG	Requires Prior Authorization
Morphine Sulfate Tablets 60MG	Requires Prior Authorization
Morphine Sulfate 100MG ER	Requires Prior Authorization
Morphine Sulfate 200MG ER	Requires Prior Authorization
Opioid containing Cough and Cold Liquids	Quantity Limit of 120ML per 30 days
Opioid containing Cough and Cold tablets and capsules	Quantity limit of 2 tablets or capsules per day

Please remember to visit the Select Health website at: [selecthealthofsc.com/Pharmacy\\_Services](http://selecthealthofsc.com/Pharmacy_Services) for:

- Up-to-date pharmacy information.
- Changes voted on at the Pharmacy and Therapeutics meetings.
- Preferred drug list (PDL) updates.
- New prior authorization criteria and procedures for submitting a prior authorization.
- Pharmacy benefit restrictions or limitations.

For questions, contact PerformRx<sup>SM</sup> Pharmacy Services at **1-866-610-2773**.

## IMPORTANT REMINDERS:

### Clinical Laboratory Improvement Amendments (CLIA) identification number requirement

Claims submitted for laboratory services without the appropriate CLIA identification number will be denied.

Centers for Medicare & Medicaid Services (CMS) CLIA regulations apply to laboratory testing in all settings, including commercial, hospital, and physician office laboratories.

To help ensure your claims are processed quickly and accurately, please follow the guidelines indicated below:

- For paper claims submitted on the CMS 1500, enter the 10-digit CLIA ID in field 23 (in lieu of the prior authorization number).
- For 837 professional electronic claim submissions, enter your 10-digit CLIA ID number in Loop ID 2300 segment/data element REF02 where REF01 = X4.
- The CLIA number entered must be specific to the location where the provider is performing on-site lab testing.
- Claim payments can only be made for dates of service falling within the particular certification dates governing those services.
- Providers are reminded to add the QW modifier to the procedure code for CLIA waived tests when required. See [www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Categorization\\_of\\_Tests.html](http://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Categorization_of_Tests.html) for tests requiring the QW modifier.

You may verify your CLIA certification level and effective dates at:

[www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/CLIA\\_Laboratory\\_Demographic\\_Information.html](http://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/CLIA_Laboratory_Demographic_Information.html).

## Behavioral health — crisis intervention

Effective November 1, 2018, Select Health requires medical necessity review after 80 units of crisis intervention services have been used in the state fiscal year (July 1 to June 30), as outlined in the SCDHHS Medicaid bulletin dated June 1, 2018. A Crisis Intervention Notification form must be submitted for all crisis intervention services (including for the first 80 units).

Providers are required to complete the **Crisis Intervention Notification Form** which is located on the Select Health website at:

**www.selecthealthofsc.com > Providers > Resources > Forms**, and return it to Select Health Behavioral Health Utilization Management, no later than two business days after crisis intervention has been provided.

The notification form is required for all crisis intervention services. Forms may be returned via fax to **1-888-796-5521**. Notification is required to receive an authorization number for claims payment. Claims will be denied if notification is not received.

Once a member has reached 80 units of crisis intervention, Select Health will review the notification of a crisis intervention service for medical necessity prior to issuing an authorization.

Providers may use their own form as long as it contains:

- Member identifying data (name, date of birth, and member ID).
- Provider identifying data (name, provider ID, and NPI).
- Details of what occurred during the crisis event (type of crisis, summary of event, and actions taken by the provider).

## First Choice by Select Health of South Carolina temporarily pauses enrollment

For many years, First Choice has enjoyed outstanding membership growth because of the quality of the services we provide, the strength of our provider network, and our commitment to our mission. We are proud that so many people have put their trust in us; however, it takes time and resources to integrate members into our innovative care management programs and see the rewards in terms of higher quality care and lower costs.

Therefore, Select Health and the SCDHHS have agreed to stop adding new Medicaid members to our First Choice plan during a temporary enrollment hold that will go into effect beginning January 1, 2019.

Beginning January 1, 2019, only the following Medicaid recipients will be permitted to enroll in First Choice:

- Newborns of current First Choice members.
- An existing First Choice member who temporarily loses Medicaid eligibility and then subsequently regains eligibility.
- Any foster care members.

(continued on page 5)

## First Choice by Select Health is on Facebook!

Check out our new Facebook page! Follow First Choice by Select Health on Facebook for event information, health tips, member information, and more. We're excited about connecting with you there.

## Fraud, waste, and abuse contact information

To report or refer suspected cases of fraud, waste, and abuse, contact:

- **Select Health Fraud, Waste, and Abuse Hotline**  
(secure and confidential, available 24 hours a day, seven days a week):  
**1-866-833-9718**  
Mail: Special Investigations Unit  
200 Stevens Dr.  
Mail Stop 13A  
Philadelphia, PA 19113
- **Select Health Compliance Hotline**  
(secure and confidential, available 24 hours a day, seven days a week):  
**1-800-575-0417**

Providers may also report suspected fraud, waste, and abuse to:

### South Carolina Division of Program Integrity Fraud and Abuse Hotline:

- Phone: **1-888-364-3224**
- Fax: **1-803-255-8224**
- Email: [fraudres@scdhhs.gov](mailto:fraudres@scdhhs.gov)
- Mail: South Carolina Fraud Hotline  
Division of Program Integrity  
1801 Main Street  
Columbia, SC 29202

We feel that closing enrollment to new Medicaid members is in the best interest of our over 366,000 existing plan members, allowing us to focus on high quality, comprehensive health care services for them.

We remain committed to the Medicaid managed care program in South Carolina and believe this change will help to better serve our members. If you have any questions about this temporary pause in enrollment, please feel free to contact your Provider account executive or Provider Services at **1-800-741-6605**.

First Choice members who require assistance should be directed to our Member Services Call Center at **1-888-276-2020**.

As always, thank you for your participation in the First Choice network, and for your continued commitment to our members.