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- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- Molina Medicare Options Plus
- Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- Molina Marketplace (Covered CA)

PROVIDER TYPES:

- Medical Group/ IPA/MSO**
 - Primary Care**
 - IPA/MSO
 - Directs
- Specialists**
 - Directs
 - IPA
- Hospitals**
 - Ancillary**
 - CBAS
 - SNF/LTC
 - DME
 - Home Health
 - Other

FOR QUESTIONS CALL PROVIDER SERVICES:

(855) 322-4075, Extension:

Los Angeles/Orange CountiesX111113 X123017
X127657 X120104**Riverside/San Bernardino Counties**X127684 X128010
X120618**Sacramento County**

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San Diego CountyX121805 X121401
X127709 X121413
X123006 X120630**Imperial County**

X125682 X125666

All Plan Letter 18-017

Blood Lead Screening of Young Children

This is an advisory notification to Molina Healthcare of California (MHC) network providers. The Department of Health Care Services (DHCS) has issued an All Plan Letter 18-017 - Blood Lead Screening of Young Children (Supersedes PL 02-01) on October 22, 2018 to clarify blood lead screening and reporting requirements for Medi-Cal managed care health plans (MCPs). This APL supersedes Policy Letter (PL) 02-01. Please review APL at: <https://www.dhcs.ca.gov/formsandpubs/Pages/AllPlanLetters.aspx>

BACKGROUND

Federal law requires states to screen children enrolled in Medicaid for elevated blood lead levels (BLLs) as part of required prevention services offered through the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Program. Accordingly, the Centers for Medicare and Medicaid Services (CMS) released an informational bulletin in November 2016 that provides an overview of blood lead screening requirements for children enrolled in Medicaid.

In addition, MCPs are contractually required to cover and ensure the provision of blood lead screenings in accordance with California state regulations. These regulations impose specific responsibilities on doctors, nurse practitioners, and physician's assistants conducting periodic health care assessments on children between the ages of six months and six years.

What is changing?

In order to comply with Health Insurance Portability and Accountability Act requirements, the PM-160 claim form was discontinued and replaced with the CMS1500/UB-04 claim forms or their electronic equivalents (837-P/837-I)

Requirements

Blood Lead Anticipatory Guidance and Screening Requirements. MCPs must ensure that their contracted providers (i.e. physicians, nurse practitioners, and physician's assistants), who perform periodic health assessments on children between the ages of six months to six years (i.e. 72 months), comply with current federal and state laws and industry guidelines for health care providers issued by CLPPB, including any future updates or amendments.

MCPs must ensure that their contracted providers:

- Provide oral or written anticipatory guidance to the parent(s) or guardian(s) of a child that at a minimum, includes information that children can be harmed by exposure to lead.
- Perform BLL testing on all children in accordance with the following:
 - At 12 months and at 24 months of age.
 - When the health care provider performing a periodic health assessment becomes aware that a child 12 to 24 months of age has no documented evidence of BLL test results taken at 12 months of age or thereafter.
 - When the health care provider performing a periodic health assessment becomes aware that a child 24 to 72 months of age has no documented evidence of BLL test results taken when the child was 24 months of age or thereafter.
 - Whenever the health care provider performing a periodic health assessment of a child 12 to 72 months of age becomes aware that a change in circumstances has placed the child at increased risk of lead poisoning, in the professional judgement of the provider.
 - When requested by the parent or guardian.

Reporting Requirements

- In an effort to improve reporting of blood lead screenings, MCPs are required to educate providers about appropriate Common Procedure Terminology (CPT) coding of blood lead screenings.
- MCPs must ensure that blood lead screening encounters are identified using the appropriate indicators (such as CPT codes) as outlined in the most recent DHCS Companion Guide for X12 Standard File Format, which can be obtained by emailing the Encounter Data mailbox at: MMCDEncounterData@dhcs.ca.gov
- MCPs are required to submit complete, accurate, reasonable, and timely encounter data consistent with the MCP contract and APLs 14-019 and 17-005.
- MCPs must ensure that applicable contracted providers are reporting blood lead results to CLPPB, as required.
- MCPs are required to have written policies and procedures describing methods of ensuring and monitoring provider compliance with the requirements detailed in this APL.
- MCPs are responsible for ensuring that their delegates and subcontractors comply with all applicable state and federal laws and regulations, contract requirements, and other DHCS guidance, including APLs and PLs.
- These requirements must be communicated by each MCP to all delegated entities and subcontractors.

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075. Please refer to the extensions on page one.