

ADPH Fee Manual Update

**Satellite Conference and Live Webcast
Monday, August 17, 2009
2:00-3:00 p.m. Central Time**

Produced by the Alabama Department of Public Health
Video Communications and Distance Learning Division

Faculty

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Objectives

- **Review changes to fee schedule including the rates and service code descriptions**
- **Review the day sheet entry changes**

Why the Changes?

- We heard you
 - The fees are evaluated annually and will be based on programmatic direct cost effective September 1, 2009
 - As a result of this review, the rates have been changed
 - Some increased, some decreased

Why the Changes?

- We wanted to eliminate duplicate or extra entry from the Day sheet
 - The changes include issuing one receipt in most cases for the FP visit and method except under limited circumstances

Changes to Family Planning Fee Schedule

- The service codes have been changed to include the “visit with method” or “visit without method”
- The fee for injections (Depo) has been reduced based on rate decreases from company

Changes to Family Planning Fee Schedule

- The fees for the Paragard and Mirena IUDs were increased based on rate increases from the companies
- A few additional changes were made to service codes related to services provided outside the HD (such as sterilizations)

Changes to Family Planning Fee Schedule

- Implant and IUD removals will have a separate fee
- If the patient has an existing Implanon or IUD, and has no method changes, they are only to be charged for the visit

Family Planning Fee Schedule Service Code 100

| Service Code | Service Description | Percentage of Fee Charge | | | | |
|--------------|---|--------------------------|----------|----------|----------|---------|
| | | A 100% | B 75% | C 50% | D 25% | E 0% |
| 100 | Family Planning - Initial , Annual or Extended Counseling Postpartum Visit – No Method Fee No charge for method if it includes patients with existing IUDs or Implants, abstinence, condoms, no method, or seeking pregnancy. | \$156 | \$117 | \$78 | \$39 | \$0 |

Family Planning Fee Schedule Service Code 100

- Example

- Patient in for annual exam and has IUD in place with no desire to change methods
- Her income and family size put her in the D bracket, 25% pay category, therefore, she is charged \$39

Family Planning Fee Schedule - Service Code 101

| Service Code | Service Description | Percentage of Fee Charge | | | | |
|--|--|--------------------------|----------|----------|----------|---------|
| | | A 100% | B 75% | C 50% | D 25% | E 0% |
| 101 | Family Planning - Initial, Annual, or Extended Counseling Postpartum Visit – Plus Method Fee | \$156 + method | | | | |
| Visit plus Method rates already calculated per day sheet | | | | | | |
| 101A | OCs - \$7/monthly pack | \$163 | \$122 | \$82 | \$41 | \$0 |
| 101D | Injection: \$2/injection | \$158 | \$119 | \$79 | \$40 | \$0 |
| 101E | Patch: \$22/cycle | \$178 | \$134 | \$89 | \$45 | \$0 |
| 101F | Vaginal Ring: \$15/cycle | \$171 | \$128 | \$86 | \$43 | \$0 |
| 101G | Diaphragm/Jelly: \$28 | \$184 | \$138 | \$92 | \$46 | \$0 |
| 101I | Paragard IUD (when inserted onsite by trained HD staff): \$200 | \$356 | \$267 | \$178 | \$89 | \$0 |
| 101J | Mirena IUD (when inserted onsite by trained HD staff): \$376 | \$532 | \$399 | \$266 | \$133 | \$0 |
| 101K | Implanon: \$285 | \$441 | \$331 | \$221 | \$110 | \$0 |

Family Planning Fee Schedule Visit Charge Guide – Service Code 101 Pay Category A – 100%

| Service Code | Method | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
|--------------|-----------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|
| 101A | OCs | \$168 | \$170 | \$177 | \$184 | \$191 | \$198 | \$205 | \$212 | \$219 | \$228 | \$233 | \$240 | \$247 | \$254 |
| 101D | Injection | \$158 | | | | | | | | | | | | | |
| 101E | Patch | \$178 | \$200 | \$222 | \$144 | | | | | | | | | | |
| 101F | Vaginal Ring | \$171 | \$186 | \$201 | \$216 | | | | | | | | | | |
| 101G | Diaphragm/Jelly | \$184 | | | | | | | | | | | | | |
| 101I | Paragard IUD | \$356 | | | | | | | | | | | | | |
| 101J | Mirena IUD | \$532 | | | | | | | | | | | | | |
| 101K | Implanon | \$441 | | | | | | | | | | | | | |

Family Planning Fee Schedule Service Code 101I and 101J

- Service Code 101I and 101J
 - Paragard and Mirena IUD insertion (when inserted on site by trained HD staff)
- These service codes only apply to those few counties that insert IUDs on site by our staff

Family Planning Fee Schedule Service Code 101

- Example
 - Patient in for initial visit
 - Desires to receive Depo-Provera
 - Her income and family size put her in the C bracket, 50% pay category, therefore, she is charged with Service Code 101D = \$79

Family Planning Fee Schedule Service Code 102

| Service Code | Service Description | Percentage of Fee Charge | | | | |
|--------------|--|--------------------------|----------|----------|----------|---------|
| | | A 100% | B 75% | C 50% | D 25% | E 0% |
| 102 | Periodic Revisit or Deferred Physical Visit – <u>No Method Fee</u> No charge for method if it includes patients with existing IUDs or Implants, abstinence, condoms, no method, or seeking pregnancy. | \$67 | \$50 | \$34 | \$17 | \$0 |

Family Planning Fee Schedule Service Code 102

- Example

- Patient in for Periodic Revisit due to complaint of irregular bleeding while using Implanon
- Patient seen by NP for counseling and opts to continue Implanon
- No other method provided
- Her income and family size put her in the D bracket, 25% pay category, therefore, she is charged \$17

Family Planning Fee Schedule – Service Code 103

| Service Code | Service Description | Percentage of Fee Charge | | | | |
|--|--|--------------------------|----------|----------|----------|---------|
| | | A 100% | B 75% | C 50% | D 25% | E 0% |
| 101 | Periodic Revisit or Deferred Physical Visit – <u>Plus</u> Method Fee | \$67 + method | | | | |
| Visit plus Method rates already calculated per day sheet | | | | | | |
| 103 A | OCs - \$7/monthly pack | \$74 | \$56 | \$37 | \$19 | \$0 |
| 103 D | Injection: \$2/injection | \$69 | \$52 | \$35 | \$17 | \$0 |
| 103 E | Patch: \$22/cycle | \$89 | \$67 | \$45 | \$22 | \$0 |
| 103 F | Vaginal Ring: \$15/cycle | \$82 | \$62 | \$41 | \$21 | \$0 |
| 103 G | Diaphragm/Jelly: \$28 | \$95 | \$71 | \$48 | \$24 | \$0 |
| 103 I | Paragard IUD (when inserted onsite by trained HD staff): \$200 | \$267 | \$200 | \$134 | \$67 | \$0 |
| 103 J | Mirena IUD (when inserted onsite by trained HD staff): \$276 | \$443 | \$332 | \$222 | \$111 | \$0 |
| 103 K | Implanon: \$285 | \$352 | \$264 | \$176 | \$88 | \$0 |

Family Planning Fee Schedule Visit Charge Guide – Service Code 103 Pay Category A – 100%

| Service Code | Method | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | |
|--------------|------------------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|-------|--|
| 103A | OCs | \$74 | \$81 | \$88 | \$95 | \$102 | \$109 | \$116 | \$123 | \$130 | \$137 | \$144 | \$151 | \$158 | \$165 | |
| 103D | Injection | \$69 | | | | | | | | | | | | | | |
| 103E | Patch | \$89 | \$111 | \$133 | \$155 | | | | | | | | | | | |
| 103F | Vaginal Ring | \$82 | \$97 | \$112 | \$127 | | | | | | | | | | | |
| 103G | Diaphragm /Jelly | \$95 | | | | | | | | | | | | | | |
| 103I | Paragard IUD | \$267 | | | | | | | | | | | | | | |
| 103J | Mirena IUD | \$443 | | | | | | | | | | | | | | |
| 103K | Implanon | \$352 | | | | | | | | | | | | | | |

Family Planning Fee Schedule Service Code 103

- Example
 - Patient in for supply visit
 - Desires to continue Ocs
 - Previously received 3 packs at initial visit and is now eligible to receive the remainder of the year's supply (11 packs)

Family Planning Fee Schedule Service Code 103

- Example
 - Her income and family size put her in the A bracket, 100% pay category, therefore, she is charged Service Code 103A = \$144

Family Planning Fee Schedule Service Codes 104

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|-----------------------------------|-----------|----------|----------|----------|---------|
| 104 | GYN Problem/ Lab/Counseling Visit | \$33 | \$25 | \$17 | \$8 | \$0 |

- Service Code 104 involves a fee for
 1. GYN problem such as a breast complaint

Family Planning Fee Schedule Service Codes 104

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|-----------------------------------|-----------|----------|----------|----------|---------|
| 104 | GYN Problem/ Lab/Counseling Visit | \$33 | \$25 | \$17 | \$8 | \$0 |

2. Lab revisit

- Includes repeat Pap smears excluding unsatisfactory or No ECC results

3. Counseling visit such as for Pap smear counseling and referral

Family Planning Fee Schedule Service Codes 104

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|-----------------------------------|-----------|----------|----------|----------|---------|
| 104 | GYN Problem/ Lab/Counseling Visit | \$33 | \$25 | \$17 | \$8 | \$0 |

- This visit is coded as “GYN Problem/ Lab/Couns” visit in PHALCON

Family Planning Fee Schedule Service Code 104

• Example

- Patient in for post-colposcopy repeat Pap smear
- She is not due for any contraceptive method and needs no method counseling

Family Planning Fee Schedule Service Code 104

- Example
 - NP obtains smear and counsels her regarding Pap management plan
 - Her income and family size put her in the D bracket, 25% pay category, therefore, she is charged \$8

Family Planning Fee Schedule Service Codes 105

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|--|-----------|----------|----------|----------|---------|
| 105 | BP Recheck visit(s) to rule out hypertension <u>and</u> repeat Pap smear due to technical problems (i.e., unsatisfactory or No ECC result - specimen lost or broken) | \$0 | \$0 | \$0 | \$0 | \$0 |

- New Code
 - Service Code 105 – \$0 charge which involves 2

Family Planning Fee Schedule Service Codes 105

1. Brief visit for a repeat BP reading to rule out hypertension
 - **NOTE:** This visit does not involve those patients who are already diagnosed with hypertension, and receive quarterly BP monitoring prior to issuance of contraceptive

**Family Planning Fee Schedule
Service Codes 105**

- 2. Repeat Pap if unsatisfactory or No ECC result. Includes broken or lost specimens
- These visits are coded as “GYN Problem/Lab/Couns” visits in PHALCON

**Family Planning Fee Schedule
Service Codes 105**

- Example
 - Patient comes in for repeat BP reading following her Annual exam on previous day
 - Her BP was elevated yesterday but she has never been diagnosed with hypertension

**Family Planning Fee Schedule
Service Codes 105**

- Example
 - Repeat BP reading is normal. Patient to return for final “tie-breaker” reading tomorrow per protocol
 - No method issued today

Family Planning Fee Schedule Service Codes 105

- Example
 - Her income and family size put her in the B bracket, 75% pay category, therefore, she is charged \$0

Family Planning Fee Schedule Service Codes 106O

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|-------------------------|-----------|----------|----------|----------|---------|
| 106O | Implant/IUD removal fee | \$75 | \$56 | \$38 | \$19 | \$0 |

- Services include Implant or IUD removal procedures performed by a trained MD or Nurse Practitioner
- This is to be utilized in conjunction with the service code for the visit and method if applicable
 - 2 receipts issued

Family Planning Fee Schedule Service Codes 106O

- Example
 - Patient in for Annual exam
 - Desires to have IUD removed in order to start trying to get pregnant

Family Planning Fee Schedule Service Codes 106O

- Example
 - Her income and family size put her in the A bracket, 100% pay category, therefore, she is charged Service Code 100 for the visit (\$156) and Service Code 106O for the IUD removal = \$231

Family Planning Fee Schedule Service Codes 106O

- Example
 - One receipt is issued for the visit, and one for the IUD removal

Family Planning Fee Schedule Service Codes 107

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|--|-----------|----------|----------|----------|---------|
| 107 | Pregnancy Test Only Service (regardless of result) | \$11 | \$8 | \$6 | \$3 | \$0 |

- Services include a pregnancy test only (regardless of result) with counseling and referral as appropriate
- This visit is coded as a “GYN Problem/ Lab/Couns” visit in PHALCON

Family Planning Fee Schedule Service Codes 107

- **Example**
 - Patient in for pregnancy test only
 - She has never been to the HD
 - The pregnancy test is positive

Family Planning Fee Schedule Service Codes 107

- **Example**
 - She received counseling and referral for maternity services
 - Her income and family size put her in the B bracket, 75% pay category, therefore, she is charged \$8

New Encounter Form Changes

- Nurses will be required to mark the correct service provided under the “36- GYN Problem/Lab/

| FP Family Planning | | PROVIDER | |
|--------------------------|--|----------|--|
| <input type="checkbox"/> | 01 INITIAL | | |
| <input type="checkbox"/> | 02 PERIOD/REVISIT | | |
| <input type="checkbox"/> | 05 ANNUAL | | |
| <input type="checkbox"/> | 33 DEFERRED PHYSICAL | | |
| <input type="checkbox"/> | 34 PP HOME VISIT | | |
| <input type="checkbox"/> | 35 EXTENDED COUNS/PP | | |
| <input type="checkbox"/> | 36 GYN PROBLEMLAB/COUNS | | |
| <input type="checkbox"/> | Problem / Lab / Counseling Services | | |
| <input type="checkbox"/> | BP Recheck Only / Repeat Pap for Technical Reasons | | |
| <input type="checkbox"/> | Pregnancy Test Only (regardless of result) | | |
| <input type="checkbox"/> | 37 PLAN FIRST PRIVATE PROVIDER VISIT | | |

New Encounter Form Changes

- Couns" visit
- Clerks will use this to charge the patient appropriately

| | |
|---|----------|
| FP Family Planning | |
| <input type="checkbox"/> 01 INITIAL | PROVIDER |
| <input type="checkbox"/> 02 PERIODIC/REVISIT | |
| <input type="checkbox"/> 05 ANNUAL | |
| <input type="checkbox"/> 33 DEFERRED PHYSICAL | |
| <input type="checkbox"/> 34 FP HOME VISIT | |
| <input type="checkbox"/> 35 EXTENDED COUNS/FP | |
| <input type="checkbox"/> 36 GYN PROBLEMLAB/COUNS | |
| <input type="checkbox"/> Problem / Lab / Counseling Services | |
| <input type="checkbox"/> BP Recheck Only / Repeat Pap for Technical Reasons | |
| <input type="checkbox"/> Pregnancy Test Only (regardless of result) | |
| <input type="checkbox"/> 37 PLAN FIRST PRIVATE PROVIDER VISIT | |

Family Planning Fee Schedule Service Codes 106I, 106J, 106L and 106M with Contracted Providers

| Service Code | Description | A 100% | B 75% | C 50% | D 25% | E 0% |
|--------------|--|-----------|----------|----------|----------|---------|
| 106I | IUD/Paragard + Insertion – when inserted by contracted provider; includes device and insertion fee | \$275 | \$206 | \$206 | \$69 | \$0 |
| 106J | IUD Mirena + Insertion – when inserted by contracted provider; includes device and insertion fee | \$451 | \$338 | \$226 | \$113 | \$0 |
| 106L | Female Sterilization | \$1000 | \$750 | \$500 | \$250 | \$0 |
| 106M | Male Sterilization | \$300 | \$225 | \$150 | \$75 | \$0 |

Family Planning Fee Schedule Service Codes 106I, 106J, 106L and 106M with Contracted Providers

- Includes service codes which involve Title X only clients who are referred to contracted providers for IUD services or sterilizations

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- The IUD charges include the device and insertion fee
- These service codes are charged and billed as appropriate upon completion of the procedure

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- The clinic is to follow-up to confirm that the procedure was performed prior to billing, and document this in the patient's medical record
- In the interim pending the procedure, the patient is to be charged for all services/methods provided

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- Example
 - Patient in for resupply of patched
 - She received a Periodic Revisit and 3 cycles of patches
 - On this date, she signs consent for a tubal and is referred to a contracted provider

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- **Example**
 - Today she is charged utilizing service code 103E based on her pay category
 - Two months later, the county verifies that the procedure was done

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- **Example**
 - The clerk makes an entry into the day sheet utilizing service code 106L
 - An entry is made in the Notes section indicating the date of procedure

Family Planning Fee Schedule

Service Codes 106I, 106J, 106L and 106M
with Contracted Providers

- **Example**
 - The patient is then billed for the sterilization based on her pay category

Family Planning Fee Management

- **Implementation of these changes will be September 1, 2009**
- **Comments from Area/County staff on these changes will be accepted through August 21**
- **Final copy will be distributed and posted on the Document Library during the week of August 24**
