

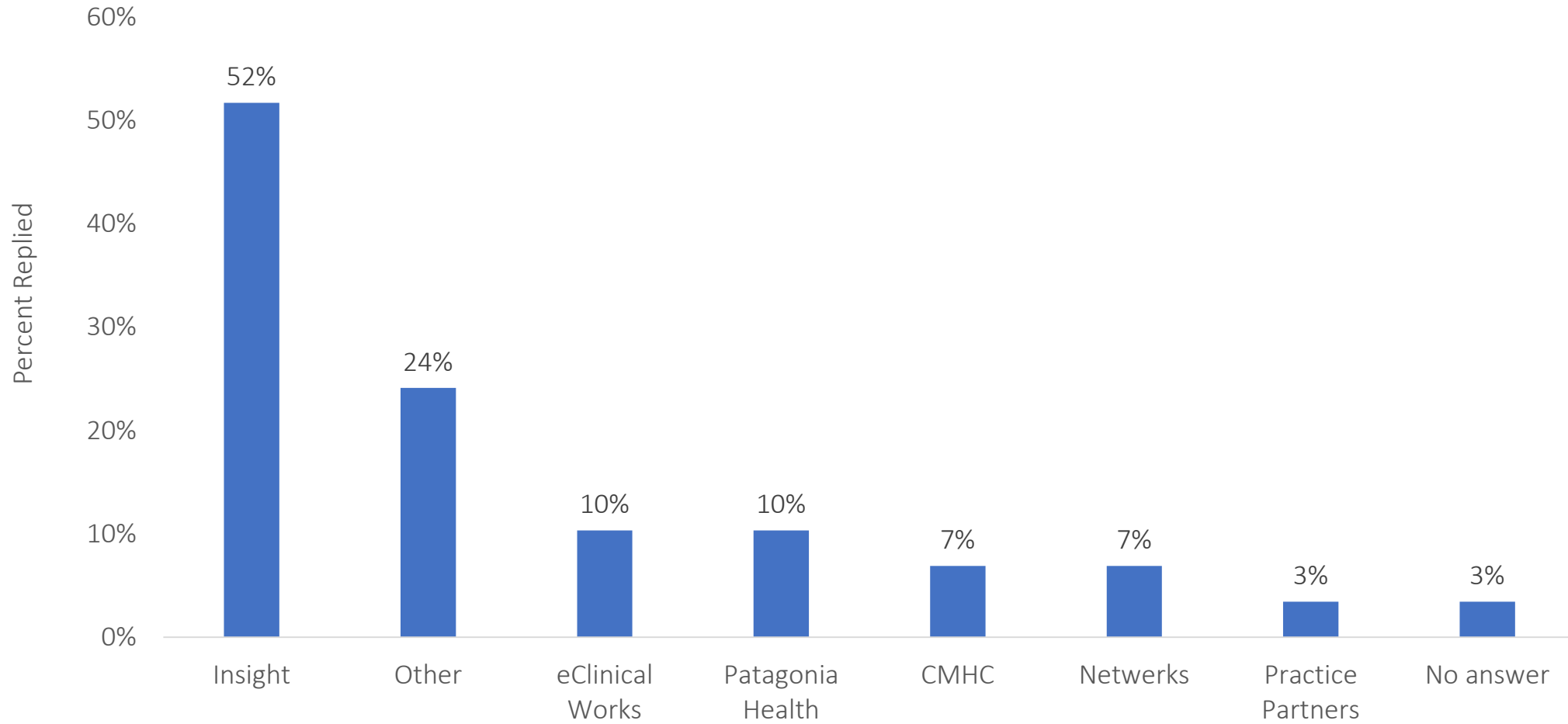
Michigan Health Departments Billing for Tuberculosis Services Survey

Active: 1/31/18 – 3/5/18

Demographics:

- 59 people representing 30 (55%) Michigan health departments
 - 32 from finance departments
 - 27 public health nurses

What PMS (Practice Management System) do you use?

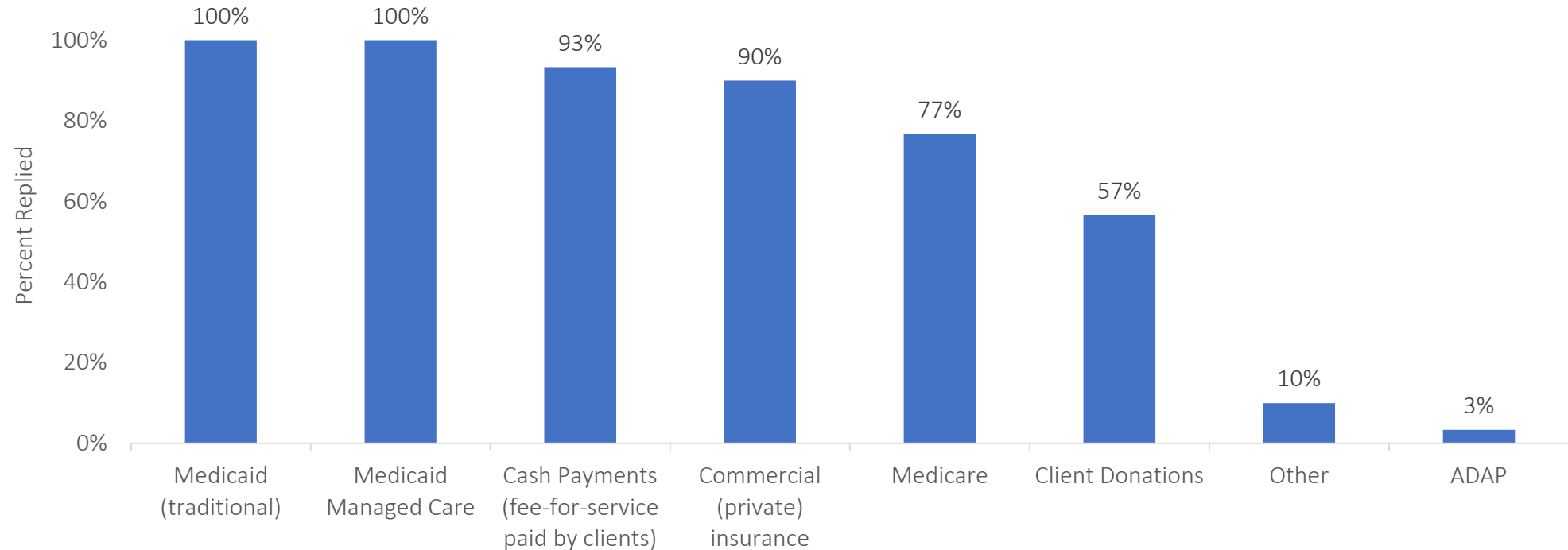


What billable services does your health department offer?

Service	% replied
Immunizations	100%
Hearing and vision screening	93%
STI testing and treatment	87%
Lead testing	83%
Family planning	63%
MIHP/WIC	57%
Breast and cervical cancer screening and control	47%
Pediatric and adolescent care	30%
Other*	27%
Substance use	13%
Dental	7%

*Primary care PN services, refugee, health education

What types of payments and/or insurance does your HD accept?



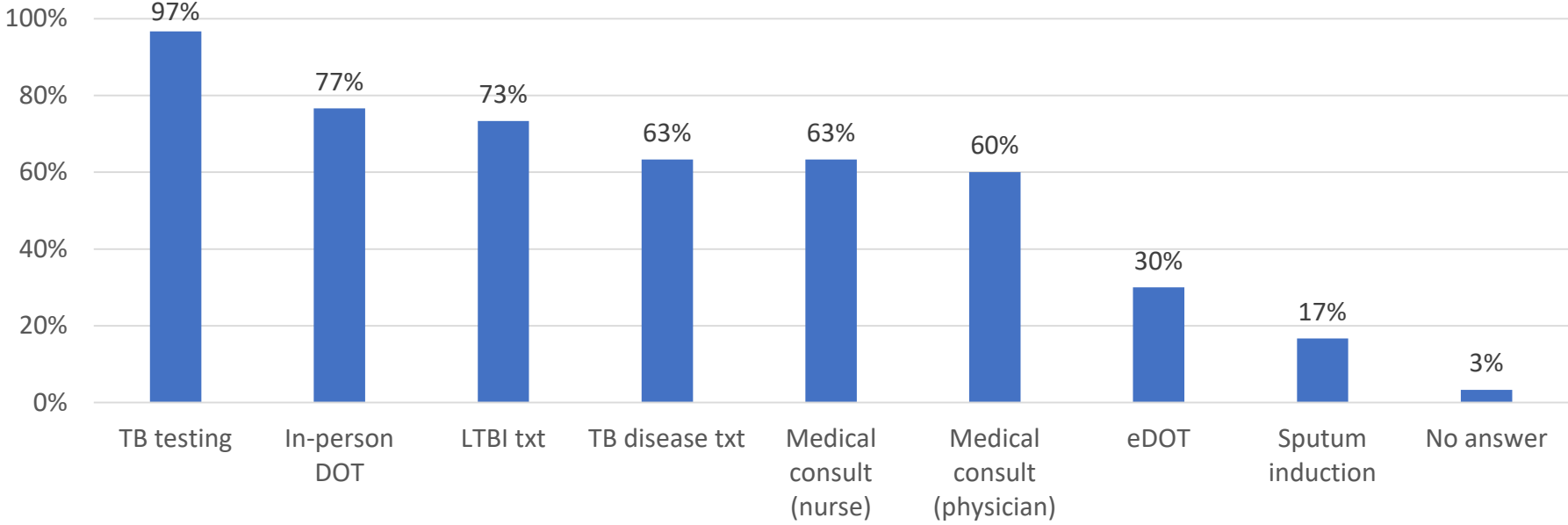
Medicaid Managed Care comprises, on average, 37% of payer-mix, followed by Commercial (private) insurance (24%) and Medicaid (traditional) (20%).

What insurance companies do you contract with?

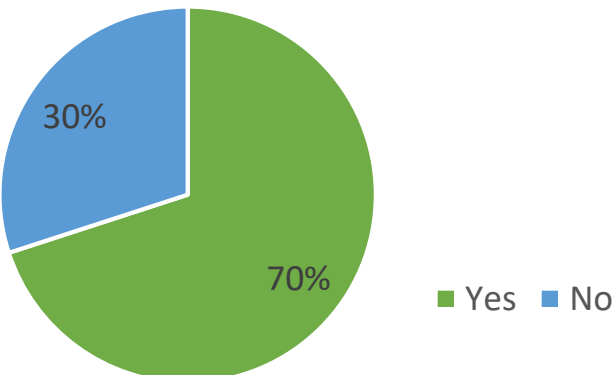
	Aetna	Blue Cross Blue Shield of Michigan	Harbor Health Plan, Inc.	Health Alliance of Michigan	McLaren Health Plan	Meridian Health Plan of Michigan, Inc	Molina Healthcare (of Michigan)	Physicians Care
Commercial/private	54%	100%	N/A	29%	63%	58%	8%	13%
Medicaid Managed Care	41%	64%	9%	27%	73%	82%	77%	N/A

Continued...	Physicians Health Plan	Priority Health Choice	Total Health Care USA, Inc.	United Health Care Services, Inc.	United Healthcare Community Plan, Inc.	Upper Peninsula Health Plan	No Answer	Other
Commercial/private	17%	75%	25%	54%	63%	N/A	8%	29%
Medicaid Managed Care	N/A	59%	32%	N/A	77%	36%	36%	5%

What TB services are offered at your HD?



Does your HD currently bill for TB services?



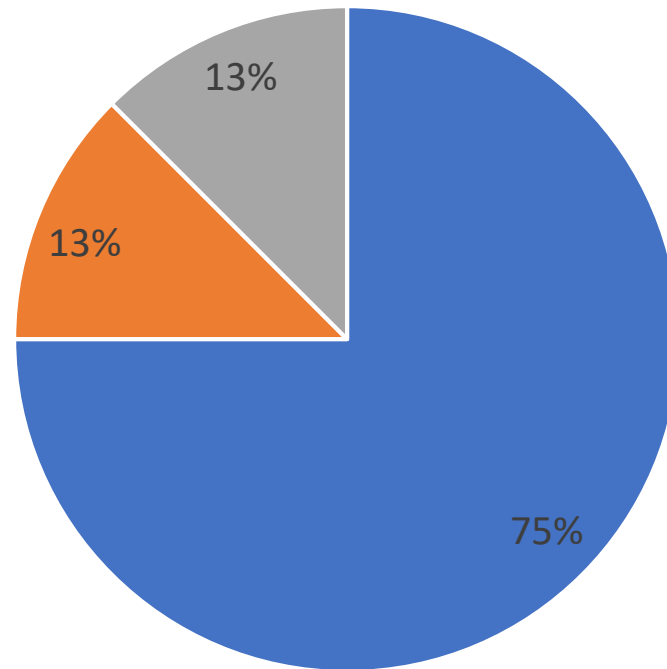
Those who don't bill: Indicate the reason(s) your HD does not bill for TB services

Service type	% replied
We do not see enough TB cases/LTBI to justify billing	each 50%
We do not bill for communicable diseases	
We send these patients to outside organizations for services, who then bill the patient	38%
Poor reimbursement rates	each 25%
Do not know which codes to use / Staff are not trained in coding and billing	
No funding to provide staff training to code	
Other	each 13%
Most of our clients do not have insurance	
Not enough staff time available for coding & billing / follow-up on unpaid bills	
Difficulty getting on private carrier's insurance lists	
No answer	

Comments

- “Do not know what services that are provided by our nurse can be billed and how to go about doing it”
- “We only bill TB test to Medicaid, no other insurance covers this”
- “Without contract with the insurance providers, we would not be able to bill for TB skin tests unless we had prior authorization. Regarding treatment services, I am told by our TB staff that most of these patients do not qualify for Medicaid and are uninsured.”

Those who don't bill: How of these costs usually covered?



■ Subsidized by local funds

■ Cash payers (fee-for-service paid by clients)

■ No answer

Those who don't bill: If you could bill for TB services, what services would you bill for?

Service type	% replied
TB testing	78%
In-person DOT	each 67%
LTBI treatment	
Physician consultation (LTBI & active TB)	each 56%
eDOT	
Nurse consultation (LTBI & active TB)	44%
Chest x-ray	22%
Labs	each 11%
Translation line	
Sputum induction	

Comments

“Would like to get reimbursed for labs that are paid for by PHMC because the PHN can't get the blood. Usually IV drug abusers with bad veins, or others who state their veins roll. These clients are sent to a lab for AST which is \$7 plus \$3 for the venipuncture (\$10) and/or HIV testing (\$25.25). Would like to get reimbursed for these tests. If these labs were done at PHMC, then HIV would be free, but sometimes the nurse isn't able to get the blood or she doesn't feel comfortable doing phlebotomy on clients with poor veins. PHMC pays LTBI treatment for each person. For cases w/insurance if they want to do 3HP & DOT the INH and Vit B is supplied but they have to pay for the Rifampentine. Medicaid will not pay for Rifampentine but they do pay for Rifampin so if client has Medicaid and wants to do the shorter time period then Rifampin works well. If client has a copay they have to pick up from the pharmacy. They do the first time so pharmacy can verify insurance.”

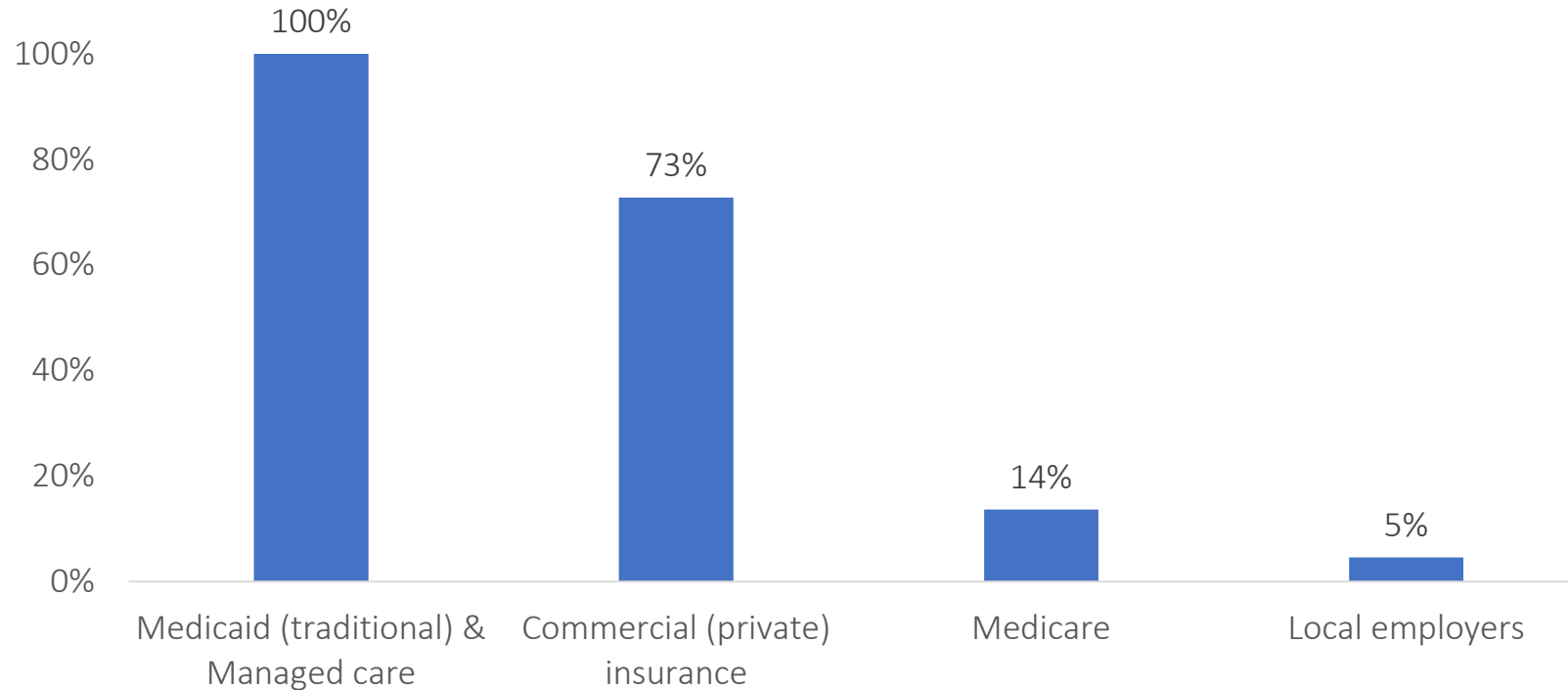
Those who bill: What are the most pressing challenges your HD encounters when billing for TB services?

Service type	% replied
Poor reimbursement rates	52%
None	24%
Difficulty getting on private carrier's insurance lists	19%
Managing multiple Medicaid Managed Care contracts	each 14%
Most of our clients do not have insurance	
Difficulty working with Commercial and Medicaid health plans	each 10%
Not enough staff time available for coding & billing / follow-up on unpaid bills	
Inadequate or difficult billing software	
Do not know which codes to use / Staff are not trained in coding and billing	each 5%
Checking and entering eligibility information	
No funding to provide staff training to code	
We do not have a "referring provider" or we are not the primary care provider	
No answer	

Comments

- "We currently only bill for TST placement and venous draws for QFT. We are currently getting denials for TST because we do not have a "Referring Provider" or we are not the primary care provider"
- "We only bill for TSTs and that is done through out immunizations program. In the next few months we will start billing for T-spots."
- "Inability to bill for nursing time"

Those who bill: Who does your HD currently bill for TB services?



Comments

- “Reimbursement rates are very poor for private insurance carriers, we do a lot of private pay TB tests as well as Contractor Billing for TB tests.”
- “We don't bill for nursing services. We may bill for TST, but do not provide IGRA testing currently. We will encourage those covered by insurance to use the PCP for medication management, and provide meds for those not covered using general fund or bill the county directly for services including diagnostics and/or meds.”

Those who bill: What type of TB services does your HD bill for?

Service type	% replied
TB testing	100%
LTBI treatment	each 14%
Physician consultation (LTBI & active TB)	
In-person DOT	
Chest x-ray	each 5%
Nurse consultation (LTBI & active TB)	
eDOT	
No answer	

Comments

“SCCHD bills nursing services AFTER client becomes an established patient (has to have seen the MD and/or NP).”

Those who bill: Billing Codes Overview

Code*	TB TESTING							CHEST X-RAY	
	TST	QFT	T-SPOT	Venipuncture	Non-specific reaction to PPD w/o active TB	Encounter for screening for respiratory TB	Outpatient new or established patient	Front	Lateral
86580	Always reimbursed	Sometimes reimbursed							
86480		Always reimbursed	Sometimes reimbursed						
86481			Sometimes reimbursed						
36415				Always reimbursed					
ICD-10 R76.11					Sometimes reimbursed				
ICD-10 R11.1						Sometimes reimbursed			
99201-99215							Always reimbursed		
71010†								Always reimbursed	
71020†									Always reimbursed

Key

Always reimbursed
Sometimes reimbursed
Never reimbursed

*Codes are CPT unless otherwise stated

†These codes were deleted 1/1/18, should now use codes 71045-71048 (<http://www.m3meridian.com/resources/insights/cpt-2018-summary-changes/>)

Those who bill: Billing Codes Overview

CPT Code	TB Testing	LTBI Txt	Physician consult for TB disease	Physician consult for LTBI	Nurse consult for LTBI	Nurse in-person DOT	eDOT
99201-99215	Always reimbursed		Sometimes reimbursed	Always reimbursed			
99201-99205			Always reimbursed				
99211-99215			Always reimbursed				
99201		Always reimbursed	Sometimes reimbursed	Sometimes reimbursed			
99202			Sometimes reimbursed	Sometimes reimbursed			
99203		Always reimbursed	Sometimes reimbursed	Sometimes reimbursed			
99204			Sometimes reimbursed	Sometimes reimbursed			
99211		Sometimes reimbursed			Sometimes reimbursed	Sometimes reimbursed	Never reimbursed
99212			Sometimes reimbursed	Sometimes reimbursed			
99213		Sometimes reimbursed	Sometimes reimbursed	Sometimes reimbursed			
99214			Sometimes reimbursed	Sometimes reimbursed			
99215		Always reimbursed	Sometimes reimbursed	Sometimes reimbursed			
99384-99386			Sometimes reimbursed	Sometimes reimbursed			
99394-99396			Sometimes reimbursed	Sometimes reimbursed			
36415		Sometimes reimbursed					

Key

Always reimbursed
Sometimes reimbursed
Never reimbursed

The following slides (16-24) are detailed information regarding the use and effectiveness of different billing codes for each TB service

Those who bill: What billing codes have you used for TB testing?

Code* (description)	% replied (# replied)	Successfully received payment	Sometimes received payment
86580 (TST)	86% (18)	39% (7)	61% (11)
86480 (QFT)	14% (3)	33% (1)	67% (2)
86481 (T-Spot)	5% (1)	0% (0)	100% (1)
36415 (venipuncture)	5% (1)	0% (0)	100% (1)
99201-99215 (Outpatient new or established patient)	5% (1)	100% (1)	0% (0)
ICD-10 Diagnosis Code R76.11 (non-specific reaction to PPD w/o active TB)	5% (1)	0% (0)	100% (1)
ICD-10 Diagnosis Code R11.1 (encounter for screening for respiratory TB)	5% (1)	0% (0)	100% (1)

*Codes are CPT unless otherwise stated

Those who bill: What billing codes have you used for TB testing?

Comments

- RE TST: “Must include the Physicians NPI.”
- RE TST: “Blue Cross does not pay”
- “Denials have recently started for not having Referring Provider NPI from BCBS”
- “...reimbursement rates from private insurance and Medicaid are very low.”
- If the client is a contact and has no coverage we write off the cost of the TST. Most of the time we do get paid for TSTs. A bulk of our insured seem to be a BCBS product and they will pay about half of what we charge. They do require we enter a 'referring physician' on the claim, or it won't pay any. We've also seen payment from most of the other insurances MA only pays about 1/4 of our charge. If the patient has no insurance we charge \$20 and they do pay it.”
- “We occasionally have to make multiple attempts to collect payments due to things like insurance discrepancies (lapses in coverage, etc.)”
- “The agency is having difficulty being reimbursed when using Tubersol for TST (ex, managed Medicaid will pay, but traditional Medicaid will not; private BCBS will pay for only one test per year, but Blue Care Network will reject all).”

Those who bill: What billing codes have you used for chest x-rays?

CPT code (description)	% replied (# replied)	Successfully received payment
71010 (x-ray front)	100% (1)	100% (1)
71020 (x-fay lateral)	100% (1)	100% (1)

Note from Helen: these codes were deleted 1/1/18, should now use codes 71045-71048 (<http://www.m3meridian.com/resources/insights/cpt-2018-summary-changes/>)

Those who bill: What billing codes have you used for LTBI treatment?

CPT code	% replied (# replied)	Successfully received payment	Sometimes received payment
99201	67% (2)	50% (1)	50% (1)
99215	33% (1)	100% (1)	0% (0)
99213	33% (1)	0% (0)	100% (1)
99211	33% (1)	0% (0)	100% (1)
36415	33% (1)	0% (0)	100% (1)
99203	33% (1)	0% (0)	100% (1)

Those who bill: What billing codes have you used for physician consultation for TB disease?

CPT code	% replied (# replied)	Successfully received payment	Sometimes received payment
99201-99396	100% (4)	25% (1)	75% (3)

Specific codes given

- 99201-99215
- 99203
- 99201-99205 & 99211-99215
- 99212, 99213, 99214, 99215, 99201, 99202, 99203, 99204, 99384, 99385, 99386, 99394, 99395, 99396

Those who bill: What billing codes have you used for physician consultation for LTBI?

CPT Code	% replied (# replied)	Successfully received payment	Sometimes received payment
99201-9396	100% (3)	33% (1)	67% (2)

Specific codes given

- 99201-99215
- 99203, 99213
- 99212, 99213, 99214, 99215, 99201, 99202, 99203, 99204, 99384, 99385, 99386, 99394, 99395, 99396

Those who bill: What billing codes have you used for nurse consultation for LTBI?

CPT Code	% replied (# replied)	Sometimes received payment
99211	100% (1)	100% (1)

Those who bill: What billing codes have you used for nurse in-person DOT?

CPT Code	% replied (# replied)	Sometimes received payment
99211	100% (3)	100% (3)

Those who bill: What billing codes have you used for nurse eDOT?

CPT Code	% replied (# replied)	Never received payment
99211	100% (1)	100% (1)