

# CMSP Provider Training

## Primary Care Benefit

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Welcome Everyone!

We will be starting the Webinar at 10:05 to allow everyone to log on.

Audio Instructions for webinar:

- 1-844-621-3956 Call-in number (US/Canada)
- Access code: 924 226 113
- All participant lines should be on **mute** during the webinar
- Please send all messages to the host Marissa Steiner using the chat box.

# CMSP 2018

## Provider Training: Important Updates

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CMSP  
COUNTY MEDICAL  
SERVICES PROGRAM

August 23, 2018

# CMSP 2018 PROVIDER TRAINING

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Presented by  
*Advanced Medical Management*

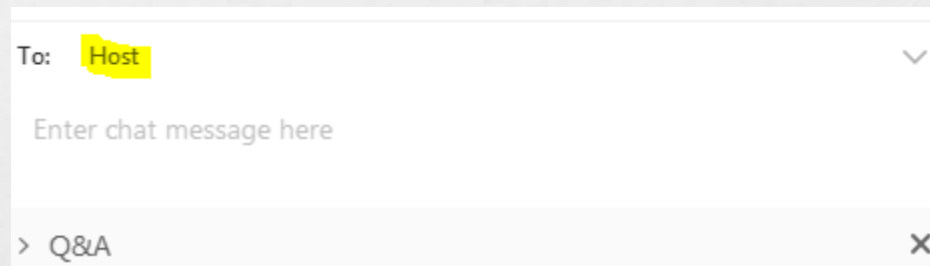
**Presenter:**  
Marissa Steiner, *CMSP Administration Manager*

# Meeting Logistics

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- **Questions & Answers**

- To ask a question, you will type your question into the “Chat” box in lower right section of the screen and hit “send” to the host (Marissa Steiner). All questions or technical assistance issues should be asked via the Chat box



To: Host

Enter chat message here

> Q&A

- Questions will be answered at the end of the presentation as time allows.

# Q&A Test

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- Using the Chat box, please type in your name, the Provider Name you are representing, your email address, and the number of webinar participants at **your** computer. Please make sure to select the host, Marissa Steiner, from the drop down selection each time you send your Chat message. Let's do a test run.
- For example:
  - Type & submit “ Stacy, ABC Clinic, stacy1@gmail.com - 1” if you are participating by yourself
  - Type & send “ Mary, Smith Family Practice, Mary5@gmail.com - 5” if you have five participants in a conference room watching the webinar
  - Thank you!

# Meeting Logistics

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Copies of this presentation will be available  
Monday, August 27<sup>th</sup> on the following websites:

**[www.cmspcounties.org/news/webinars.html](http://www.cmspcounties.org/news/webinars.html)**

**<https://cmsp.amm.cc/providers>**

# Key Abbreviations

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- **AMM** = Advanced Medical Management, Inc.
- **BIC** = Beneficiary Identification Card
- **CMSP** = County Medical Services Program
- **PCB** = Primary Care Benefit
- **SOC** = Share of Cost
- **TPA** = Third Party Administrator

# Pertinent CMSP Aid Codes

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Aid Code refers to the two-digit number which indicates the Aid Category under which a person is eligible.

Aid Code	Beneficiary Description
<b>88</b>	CMSP no share of cost
<b>89</b>	CMSP with a share of cost
<b>50</b>	CMSP member is undocumented; emergency services only; with a share of cost

**For the purposes of this training, we will primarily focus on Aid Codes 50 and 89.**



# CMSP Provider Training

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## **Agenda**

- ❖ Background
- ❖ PCB Pilot Program Run-out
- ❖ CMSP 2018 Program Updates

# Background

- The CMSP Primary Care Benefit (PCB) Program began as a pilot project in May 2016. Following the review of the two-year effort and with input of stakeholders, the CMSP Governing Board voted to incorporate the PCB into the Standard CMSP benefit with some simplifications.
- **These program enhancements will start September 1, 2018.**
- Counties will continue to process CMSP applications in the same manner.

# Primary Care Benefit Run Out

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# **CMSP Primary Care Benefit Program Run-Out**

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- **Primary Care Benefit Pilot ran from May 1, 2016 through August 31, 2018**
  - ❖ **Benefit Eligibility Period up to 6 months**
  - ❖ **No Share of Cost**
  - ❖ **Limited to Three (3) Visits within the benefit eligibility period**
  - ❖ **Includes PCP or Specialist office visits, Preventive Health Screenings, Laboratory Tests, Diagnostic tests, Minor Procedures, Physical Therapy, Prescriptions**
  - ❖ **Reservation Number is required to track visits and for claims payment**

# Primary Care Benefit Run Out Details

- All PCB members will term on August 31, 2018
  - Services rendered with a reservation approved prior to or on August 31, 2018 can be billed to AMM for claims processing and payment
  - If a provider received a reservation prior to or on August 31, 2018 and services WERE NOT rendered by August 31<sup>st</sup>, the reservation will be voided effective September 1, 2018.
- August to September Eligibility
  - PCB ID numbers/members will term at the end of August. However, the member will still have future eligibility with CMSP. Aid code 50 and 89 members eligible with CMSP effective 9/1 will qualify for the integrated, no cost benefits.

**\*\*Please Note - Aid codes 88 and 8F eligibility and covered services under CMSP are not affected by these program changes.**

# Provider Operations Manual PCB Transitional Addendum

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For more details regarding the Primary Care Benefit Pilot Program Run out, providers should access and review the updated Primary Care Benefit Transitional Addendum located at:

[https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP\\_PCB\\_Transitional\\_Addendum\\_2018.pdf](https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP_PCB_Transitional_Addendum_2018.pdf)

This Transitional Addendum includes detailed information regarding:

- Claims
- Appeals
- Eligibility
- Reservations and more

# Sample Member Notification Letter

Members who received a PCB ID Card with eligibility beyond August 31, 2018 will receive a notification regarding their updated CMSP ID Card.

August 23, 2018

**CMSP**  
COUNTY MEDICAL  
SERVICES PROGRAM

Dear CMSP Member:

A few months ago, you were mailed your County Medical Services Program (CMSP) Primary Care Benefit (PCB) ID Card. The card you received states you are eligible from (date) to (date).

<p><b>CMSP</b> COUNTY MEDICAL SERVICES PROGRAM</p> <p><b>PRIMARY CARE BENEFIT</b> Call PCB Information/Reservation Hotline: (800) 744-2760</p> <p>Member Name: John Smith PCB Member ID: PCB12345678A PCB Benefit Period: FROM 10/2017 - TO 4/2018</p> <p>Customer Service: (800) 744-2760 TTY Line: (562) 428-8162 Pharmacy: (909) 789-2949</p> <p>Medical Visit Copay: \$0 Pharmacy Copay: \$1 Rx Benefit Limit: 3 Visits, \$1,000 Rx</p> <p>Providers must check eligibility and obtain a reservation number prior to providing medical services by calling the CMSP PCB Hotline: (800) 744-2760.</p> <p>Please see the reverse side of the card for Important Medical and Pharmacy Coverage &amp; Claims Details.</p>	<p><b>AMM</b></p> <p>PCB Medical Benefit limited to (3) Primary Care or Specialist Visits, Adult Preventative Health Screenings, Selected Lab &amp; Diagnostic Tests performed by contracted providers with no share of cost or copay. Providers must check eligibility and obtain a reservation number prior to providing medical services by calling the CMSP PCB Hotline: (800) 744-2760. For more information, please visit AMM's website at <a href="http://amm.com">amm.com</a>.</p> <p>Claims: Advanced Medical Management, Inc. 3000 Airport Plaza Drive #150 Long Beach, CA 90815-1200</p> <p>Providers for electronic claims: In-state: CMSP Out-of-State: AMM-C1</p> <p><b>Medigapact</b></p> <p>PCB Pharmacy Benefit through Medigapact: not an AMM product. PCN Group No. 86146. PCB Pharmacy Benefit limited to \$1,000 for the PCB Benefit Period with \$0 copay per Rx. Network and formulary restrictions apply. Pharmacies contact Medigapact at (800) 789-2348 for coverage details.</p>
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**Starting September 1, 2018**, CMSP has made things simpler and has added these no-cost services and \$5 prescriptions to the regular CMSP benefit when you haven't met your monthly share of cost. Beginning September 1, 2018, you don't need to use your separate Primary Care Benefit ID Card. Also, your medical provider won't need to call for a visit reservation. You will get a new, updated CMSP ID card and program guide mailed to you to use for all health care services as long as you are enrolled in CMSP. The new card looks like this:

<p><b>CMSP</b> COUNTY MEDICAL SERVICES PROGRAM</p> <p>Member Name: John Smith Member ID: 12345678A</p> <p>Customer Service: (877) 589-6807 TTY Line: (562) 428-8162 Pharmacy: (909) 789-2949</p> <p>After Hours/Weekends: (562) 510-2143 Website: <a href="http://cmosp.amm.com">http://cmosp.amm.com</a></p> <p>Primary care or specialist visits, adult preventative health screenings, selected lab &amp; diagnostic tests performed by contracted providers with no share of cost or copay. \$0 Rx and \$1,000 Rx maximum over 9999.</p> <p>Please refer to the CMSP Member Guide for additional benefit information and list of covered services with no share of cost or copay.</p>	<p><b>AMM</b></p> <p>Hospital: Hospitals must notify AMM within twenty-four (24) hours of admission by calling (877) 589-6807.</p> <p>Participating hospitals and providers: Non-participating providers in CA or designated border state areas may be considered for payment only for emergency care. They must notify AMM within 24 hours of providing service by calling (877) 589-6807.</p> <p>Out-of-State Hospitals and Providers: This service has no benefits from non-AMM CMSP providers except for emergency care in CA and within a 10 mile radius of the CA border in AZ, NV, and OR.</p> <p>Claims: Advanced Medical Management, Inc. 3000 Airport Plaza Drive #150 Long Beach, CA 90815-1200</p> <p>Providers for electronic claims: In-state: CMSP Out-of-State: AMM-C1</p> <p>* Prescription drug services through Medigapact (PCN Group No. 86146), not an AMM product.</p>
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Please be sure to keep your State of California Benefits Identification Card (BIC).

Should you have any questions regarding these changes and/or your eligibility, please call **CMSP Customer Service at (877) 589-6807**.

Sincerely,

Marissa Steiner, CMSP Administration Manager

**AMM**  
ADVANCED MEDICAL MANAGEMENT, INC.

Advanced Medical Management, Inc.  
5000 Airport Plaza Drive, Suite 150 | Long Beach, CA 90815

# Program Comparisons

ITEM	PCB PILOT 5/16-8/18	PCB BEGINNING 9/18
<b>Identification Cards</b>	Members were issued 3 cards: 1) State of California BIC 2) CMSP Standard ID 3) PCB ID	Members will be issued 2 cards: 1) State of California BIC 2) Updated CMSP ID
<b>Member ID Number</b>	PCB Prefix + 8 Numbers + Letter <i>Example: PCB98765432E</i>	8 Numbers + Letter <i>Example: 98765432E</i>
<b>Enrollment Period</b>	Defined enrollment period began the month <u>following</u> the member's eligibility start date	Coverage begins on the first of the month of the beginning date of aid
<b>Visit Limits</b>	Up to three (3) medical office visits with an in-network primary care or specialty care provider with no co-pay or Share of Cost (SOC)	Unlimited in-network primary care or specialty care provider visits with no co-pay or Share of Cost (SOC)
<b>Reservations</b>	Providers had to call AMM to obtain a "visit reservation"	Reservations are <u>no longer</u> required
<b>Prescription Drug Coverage</b>	\$5 co-pay for prescription drugs at an in-network pharmacy	No change, \$5 co-pay for prescription drugs at an in-network pharmacy



# **CMSP Benefits: Important Updates**

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**Effective September 1, 2018**

# Updated Benefits for CMSP Aid Codes 50 and 89

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- Effective September 1, 2018, CMSP aid code 50 and 89 members will be eligible to receive preventative/primary care services and specialist office visits with no Share of Cost (SOC). This no Share of Cost benefit is in addition to covered inpatient, outpatient, and emergent services (SOC may be applicable).
- Preventative/primary care services and specialist office visits will no longer require a reservation. Additionally, there is no limit to the number of preventative/primary care services and specialist office visits a member may receive from a contracted CMSP provider during the benefit period.
- Aid code 50 and 89 members will receive a pharmacy benefit up to \$1500 per benefit period. Members may receive medications listed on the MedImpact formulary at a \$5 copay.
  - To access the MedImpact formulary, please reference:  
[http://www.cmspcounties.org/benefits/prescription\\_drug.html](http://www.cmspcounties.org/benefits/prescription_drug.html)

# Benefit ID Cards

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Members may qualify for CMSP benefits by submitting an application through their County Social Services Office.

Members will receive two (2) ID cards:

1. CMSP ID card
2. State of California BIC card

**Please note, as of September 1, 2018, the member's PCB ID Card will no longer be valid for dates of service after August 31, 2018.**

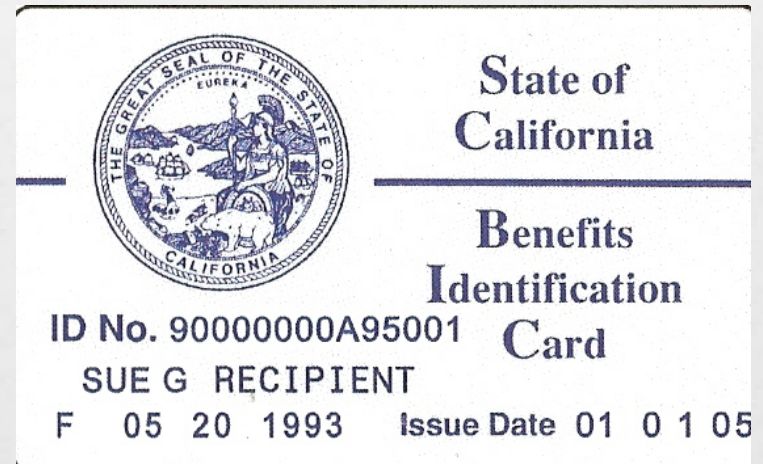
# Updated ID Card for CMSP Aid Codes 50 and 89

Effective September 1, 2018, CMSP aid code 50 and 89 members will receive only one card (see sample below) in addition to their Medi-Cal BIC.

<p><b>CMSP</b> COUNTY MEDICAL SERVICES PROGRAM</p> <p>Member Name: John Smith Member ID: 12345678A</p> <p>Customer Service: (877) 589-6807    After Hours/Weekends: (562) 310-2145 TTY Line: (562) 429-8162 Pharmacy: (800) 788-2949    Website: <a href="http://cmsp.amm.cc">http://cmsp.amm.cc</a></p> <p>Primary care or specialist visits, adult preventative health screenings, selected lab &amp; diagnostic tests performed by contracted providers with <b>no share of cost or copay</b>. \$5/Rx and \$1,500/Rx maximum may apply.</p> <p>Please refer to the CMSP Member Guide for additional benefit information and list of covered services with no share of cost or copay.</p>	<p><b>AMM</b> ADVANCED MEDICAL MANAGEMENT, INC.</p> <p><b>Hospitals:</b> Hospitals must notify AMM within twenty-four (24) hours of admission by calling (877) 589-6807.</p> <p><b>Nonparticipating hospitals and providers:</b> Non-contracting providers in CA or designated border state areas may be considered for payment only for emergency care. They must notify AMM within 24 hours of providing service by calling (877) 589-6807.</p> <p><b>Out-of-State Hospitals and Providers:</b> This member has no benefits from non-AMM/CMSP providers except for emergency care in CA and within a 30 mile radius of the CA borders in AZ, NV, and OR.</p> <p>By using this card, you acknowledge that AMM is the health care benefits administrator for CMSP.</p> <p>This card is for identification purposes only and is not proof of coverage and/or eligibility.</p> <p>* Prescription drug services through MedImpact (PCN/Group No. 50145); not an AMM product.</p>
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# CMSP Eligibility ID Card & California BIC

## State of California MediCal Benefits Identification Card (BIC)



# CMSP Eligibility Verification

Providers may use the BIC to verify eligibility in these ways:

- ❖ Swipe BIC in the **point-of-service (POS) device** to verify eligibility and determine if SOC applies
- ❖ Call the Automated Eligibility Voice System (**AEVS**) at **(800) 456-2387**
- ❖ Log on to the **Medi-Cal website** at:  
**[medi-cal.ca.gov/Eligibility/Login.asp](http://medi-cal.ca.gov/Eligibility/Login.asp)**
- ❖ Contact AMM for CMSP Customer Service at **(877) 589-6807**

Sample eligibility messages corresponding to a member's eligibility status (Effective September 1, 2018). 

Aid Code	Eligibility Message
89 when SOC met	SUBSCRIBER LAST NAME: XXX. EVC #: XXXXXXXXXXXX. CNTY CODE: XX. PRMY AID CODE: XX. ELIGIBLE FOR CMSP MEDICAL/DENTAL SVCS. CALL AMM 1-877-589-6807. CMSP PHARMACY SVCS BY MEDIMPACT CALL 1-800-788-2949.
50 with unmet SOC	SUBSCRIBER LAST NAME: XXX. CMSP EMERGENCY SVCS WITH SHARE OF COST OF \$XXX. ADDITIONAL PREVENTATIVE CARE BENEFIT WITHOUT SHARE OF COST. CALL AMM 1-877-589-6807. CMSP PHARMACY SVCS WITH \$5 COPAY FOR PREVENTATIVE CARE PHARMACY. CALL MEDIMPACT 1-800-788-2949. REMAINING SOC \$XXX.XX.
50 with met SOC	SUBSCRIBER LAST NAME: XXX. EVC #: XXXXXXXXXXXX. CNTY CODE: XX. PRMY AID CODE: XX. ELIGIBLE FOR CMSP EMERGENCY SVCS. ADDITIONAL PREVENTATIVE CARE BENEFIT. CALL AMM 1-877-589-6807. CMSP PHARMACY SVCS BY MEDIMPACT 1-800-788-2949.
85 & 89 with unmet SOC	SUBSCRIBER LAST NAME: XXX. CMSP MEDICAL/DENTAL SVCS WITH A SHARE OF COST OF \$XXX. ADDITIONAL PREVENTATIVE CARE BENEFIT WITHOUT SHARE OF COST. CALL AMM 1-877-589-6807. CMSP PHARMACY SVCS WITH \$5 COPAY FOR PREVENTATIVE CARE PHARMACY. CALL MEDIMPACT 1-800-788-2949. REMAINING SOC \$XXX.XX.

# Program Requirements for No Cost Benefit

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- To submit claims for the no cost, preventative benefit, providers must be contracted with CMSP and rendering services in the office, clinic, laboratory, or outpatient setting.
  - If services are rendered as an inpatient or in the emergency room, the member is responsible for paying their monthly Share of Cost even if the code falls under the covered CPT list.
- Share of Cost is not required when:
  - Member is aid code 50 or 89 + services rendered fall under covered CPT list ([https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP\\_CPT\\_Code\\_List.pdf](https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP_CPT_Code_List.pdf)) + provider is contracted + services rendered in office (11, 19), clinic (17, 49, 50, 71, 72) , laboratory (81), or outpatient (22) setting.
- Member is responsible for meeting monthly Share of Cost when:
  - Member is NOT aid code 88
  - Services rendered are not listed on covered CPT list
  - Provider is not contracted with CMSP
  - Any place of service that is NOT office (11, 19), clinic (17, 49, 50, 71, 72) , laboratory (81), or outpatient (22).

# Provider Resources

- The updated CMSP Provider Operations Manual includes information regarding verifying eligibility, covered services, and billing instructions. This manual will be available on September 1<sup>st</sup> at the following website:

**<https://cmsp.amm.cc/providers/>**

- Providers are responsible for verifying a member's SOC obligation prior to services being rendered. For a list of covered services where SOC is not applicable, please refer to:

**[https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP\\_CPT\\_Code\\_List.pdf](https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP_CPT_Code_List.pdf)**



# CMSP Covered Benefits

Acute inpatient hospital care (including acute inpatient rehabilitation and mental health)	Laboratory and radiology services
Adult day health care	Medical supplies dispensed by physicians, licensed pharmacies, or durable medical equipment dealers and prosthetic or orthotic providers
Blood and blood derivatives	Non-emergency medical transportation when medically necessary
Chronic hemodialysis services	Outpatient audiology services
Dental services (including diagnostic and preventative care, oral surgery and selected endodontic, restorative and prosthodontics services)	Outpatient occupational therapy services
Durable medical equipment (DME)	Outpatient physical therapy services
Emergency ambulance services and medically necessary transportation from the acute hospital to other facilities for medically necessary, specialized, or tertiary care	Outpatient rehabilitation services in a rehabilitation facility
Family planning services, including sterilization (when no other coverage, including F-PACT)	Outpatient speech pathology services
Hearing Aids	Physician services
Home Health Agency Services	Podiatry services
Hospital outpatient and outpatient clinic services	Prosthetic and orthotic appliances
Infusion therapy	Psychiatric services provided by a licensed psychiatrist
Inpatient and outpatient heroin detoxification services (excluding methadone maintenance)	Transplants (Except Aid Code 50)

# Summary of CMSP Benefits Exclusions

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- CMSP ***does not cover*** the following services:
  - Pregnancy-related services, infertility services, long-term care facility services, chiropractic services, acupuncture services, cosmetic services, sexual reassignment services, vision services, methadone maintenance, and services by a Psychologist, LCSW, MFT, or substance use disorder counselor
  - All services provided outside of the State of California and designated border state areas
  - Services provided by providers that do not participate in the CMSP network administered by Advanced Medical Management (excluding emergency services) and the MedImpact Healthcare Systems pharmacy network
  - Organ transplants for persons who are eligible for CMSP emergency services only under aid code 50

## CMSP Approved Procedure Codes with No Share of Cost

CPT Code	Procedure	CPT/HCPCS Code Description
10060	Incision & drainage of abscess	Simple or single
10061	Incision & drainage of abscess	Complicated or multiple
10160	Incision & drainage of abscess	Puncture aspiration of abscess
11200	Removal of skin tags - 15 skin tags	Removal of skin tags, multiple fibrocuteaneous tags, any area, up to and including 15 lesions
11201	Removal of skin tags - each additional 10 skin tags	Removal of skin tags, multiple fibrocuteaneous tags, any area, up to and including 15 lesions; each addition 10 lesions, or part thereof (list separately in addition to code for primary procedure)
11300	Shaving of epidermal or dermal lesions - 0.5 cm or less	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.5 cm or less
11301	Shaving of epidermal or dermal lesions - 0.6-1.0 cm	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.6 cm to 1.0 cm
12001	Minor Laceration Repair - Simple Repair 2.5 cm or less	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less
12002	Minor Laceration Repair - Simple Repair 2.6 cm to 7.5 cm	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.6 cm to 7.5 cm
12004	Minor Laceration Repair - Simple Repair 7.6 cm to 12.5 cm	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 7.6 cm to 12.5 cm
12005	Minor Laceration Repair - Simple Repair 12.6 cm to 20.0 cm	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 12.6 cm to 20.0 cm
12006	Minor Laceration Repair - Simple Repair 20.1 cm to 30.0 cm	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 20.1 cm to 30.0 cm
12007	Minor Laceration Repair - Simple Repair over 30.0 cm	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); over 30.0 cm
12011	Minor Laceration Repair - Simple Repair 2.5 cm or less	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less
12013	Minor Laceration Repair - Simple Repair 2.6 cm to 5.0 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm
12014	Minor Laceration Repair - Simple Repair 5.1 cm to 7.5 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm
12015	Minor Laceration Repair - Simple Repair 7.6 cm to 12.5 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm
12016	Minor Laceration Repair - Simple Repair 12.6 cm to 20.0 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm
12017	Minor Laceration Repair - Simple Repair 20.1 cm to 30.0 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm
12018	Minor Laceration Repair - Simple Repair Over 30.0 cm	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; Over 30.0 cm
12020	Minor Laceration Repair - Simple Repair	Treatment of superficial wound dehiscence; simple closure
12021	Minor Laceration Repair - Simple Repair; with packing	Treatment of superficial wound dehiscence; simple closure; with packing
13100	Benign Skin Tag, mole, wart removal (no pathology needed) - Repair, complex, trunk; 1.1 cm to 2.5 cm	Repair, complex, trunk; 1.1 cm to 2.5 cm
13101	Benign Skin Tag, mole, wart removal (no pathology needed) - Repair, complex, trunk; 2.6 cm to 7.5 cm	Repair, complex, trunk; 2.6 cm to 7.5 cm
11400	Excision - benign lesions (trunk, arms and legs) 0.5 cm or less	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms, or legs; excised diameter 0.5 cm or less
11401	Excision - benign lesions (trunk, arms and legs) 0.6 to 1.0 cm	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms, or legs; excised diameter 0.6 cm to 1 cm
11420	Excision - benign lesions (scalp, neck, hands, feet) 0.5 cm or less	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less
11421	Excision - benign lesions (scalp, neck, hands, feet) 0.6 cm to 1.0 cm	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 cm to 1.0 cm
11440	Excision - benign lesions (face, ears, eyelids, nose, lips, mucous membrane) 0.5 cm or less	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.5 cm or less
11441	Excision - benign lesions (face, ears, eyelids, nose, lips, mucous membrane) 0.6 to 1.0 cm	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.6 to 1.0 cm
17000	Destruction, Benign or premalignant lesions- 1st lesion	Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettment), premalignant lesions (e.g. actinic keratoses), first lesion
17003	Destruction, premalignant lesions - 2-14 lesions	Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettment), premalignant lesions (e.g. actinic keratoses), second thru 14 lesions
17004	Destruction, premalignant lesions - 15 or more lesions	Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettment), premalignant lesions (e.g. actinic keratoses); 15 or more lesions
17110	Destruction, Benign lesions - up to 14 lesions	Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettment), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; up to 14 lesions
17111	Destruction, Benign lesions - 15 or more lesions	Destruction (e.g., laser surgery, electro surgery, cryosurgery, chemosurgery, surgical curettment), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; 15 or more lesions
11765	Ingrown toenail removal	Wedge excision of skin of nail fold ( eg, for ingrown toenail)
20550	Injection of tendon sheaths	Injection(s); single tendon sheath, or ligament, aponeurosis (e.g., plantar "fascia")

**For the full list of CMSP Approved Procedure Codes with No Share of Cost, please visit: [https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP\\_CPT\\_Code\\_List.pdf](https://cmsp.amm.cc/wp-content/uploads/2018/08/CMSP_CPT_Code_List.pdf)**

# Places of Service

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- Services rendered at one of the following places of service do not require a Share of Cost:
  - 11 – Office
  - 17 – Walk-in Retail Health Clinic
  - 19 – Off Campus (Outpatient)
  - 22 – On Campus (Outpatient)
  - 49 – Independent Clinic
  - 50 – Federally Qualified Health Clinic (FQHC)
  - 71 – Public Health Clinic
  - 72 – Rural Health Clinic
  - 81 – Independent Laboratory

# Processes Not Affected by Program Changes

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- Claims Submission (paper or electronic)
- Timely Filing Window
  - Professional Claims have **150 calendar days** to submit a claim to AMM after services are rendered.
  - Institutional Claims have **180 calendar days** to submit a claim to AMM after services are rendered.
  - Claim Resubmissions must be received by AMM within **60 business days** of the denial date.

# CMSP Claim Submission

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- ❖ Submit the claim using the member's CMSP ID number
  - For dates of service prior to September 1, 2018, submit PCB related claims using the member's PCB ID number.
- ❖ Submit paper claims to:

**CMSP - Advanced Medical Management, Inc.**

**Attn: Claims Department**

**5000 Airport Plaza Drive, Suite 150**

**Long Beach, CA 90815-1260**

# Claims Submission

## Electronic claims submission Clearinghouses:

Clearinghouse	PayerID	Support Phone#	Website
Office Ally	AMM15	(360) 975-7000 Opt. 1	<a href="http://www.officeally.com">http://www.officeally.com</a>
Emdeon/Capario	CMSP1	(888) 363-3361	<a href="https://cda.changehealthcare.com/portal/">https://cda.changehealthcare.com/portal/</a>
Claimremedi	CMSP	(800) 763-8484	<a href="https://claimremedi.providersportal.com">https://claimremedi.providersportal.com</a>

For a complete list of AMM CMSP clearinghouses, please visit our website: [cmsp.amm.cc/providers/claims-billing](https://cmsp.amm.cc/providers/claims-billing)

# Final Reminders

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Copies of this presentation will be available August 27<sup>th</sup> on the following websites for your reference:

[www.cmcounties.org/news/webinars.html](http://www.cmcounties.org/news/webinars.html)

<https://cm.amm.cc/providers/>



# Contact Information

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- CMSP/AMM website:

<http://cmssp.amm.cc/contact-us/>

- ❖ Par Pourzanjani, *CMSP Administrative Liaison*

(562) 766-2000 Ext 313

[PPourzanjani@amm.cc](mailto:PPourzanjani@amm.cc)

- ❖ Marissa Steiner, *CMSP Administration Manager*

(562) 766-2000 Ext 238

[MSteiner@amm.cc](mailto:MSteiner@amm.cc)

# Other Important Numbers

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AMM Customer Service

*CMSP Third Party Administrator*

**(877) 589-6807**

MedImpact Customer Service

*CMSP Pharmacy Services Administrator*

**(800) 788-2949**

# Questions & Answers

To ask a question, please type your question into the “Chat” box in lower right section of the screen and hit “send” to the host (Marissa Steiner).



To: **Host** ▼

Enter chat message here

> Q&A ✕

Thank you for  
Attending!

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**CMSP**  
COUNTY MEDICAL  
SERVICES PROGRAM

**AMM**  
ADVANCED MEDICAL MANAGEMENT, INC.