

## PEDIATRIC PREVENTIVE SERVICES FREQUENTLY ASKED QUESTIONS

**Q. How do I obtain the PM160 Information Only forms (PM160 INF)?**

A. Non CHDP certified Health Network providers contact their health network's PPS coordinator to order a supply of the PM160 Information Only forms.

Non CHDP certified providers with no health network affiliation contact the CalOptima PPS coordinator at 714-246-8600 to obtain PM160 Information Only forms.

CHDP certified providers should order their PM160 Information Only forms directly the Orange County Health Care Agency at 714-567-6224.

**Q. How do I obtain health education materials?**

A. CHDP certified providers order health education materials directly from the State.

Non CHDP certified Health Network providers contact their health network's PPS coordinator to order a supply of health education materials.

Non CHDP certified CalOptima Direct providers contact CalOptima's Quality Management and Improvement Department.

**Q. Where do providers send their claims to get payment for pediatric preventive services?**

A. Providers send their PM160 INF forms (brown form) **for CalOptima members** to:

**CalOptima PPS Unit  
P.O. Box 11037  
Orange, CA 92856**

CalOptima will reimburse the providers at the current CHDP rates. For those patients **not eligible** for CalOptima, a CHDP certified provider must send his or her claim on a PM160 (green form) directly to:

**Medi-Cal/CHDP  
P.O. Box 15300  
Sacramento, California 95851-1300**

**Q. Does the provider have to be CHDP certified in order to submit a PM160 INF?**

A. No, the provider does **not** have to be CHDP certified to submit a PM160 INF to CalOptima. However, it is to the provider's benefit to become certified so that the provider can bill the state for low-income children not covered by CalOptima or other health insurance. In addition, a CHDP certified provider may order supplies and health education materials at no charge directly from the State and local Health Care Agency.

**Q. What is the general turn-around time for payment of claims?**

A. Expect a 30-day turn-around time for payment at the current CHDP rates when a clean claim is submitted. Accurate completion of the PM160 INF is very important. No other form will be accepted. The PM160 INF is more than a claim form; it contains mandated encounter information regarding pediatric preventive services.

**Q. Which Periodicity Schedule should providers follow?**

A. The CalOptima Pediatric Preventive Services (PPS) Schedule is mandated to be followed for pediatric preventive services rendered to CalOptima members. CalOptima will reimburse providers according to this schedule, which follows AAP guidelines. The current CHDP Schedule will be used for low-income children and Medi-Cal children who are not CalOptima members.

**Q. Is an authorization necessary if the member is not assigned to the provider being seen?**

A. No, authorization is **not** required to provide pediatric preventive services to any CalOptima member; however, a member assigned to a health network is encouraged to obtain these services through their assigned PCP.

**Q. Will I be paid if I perform an examination that is prior to its “due date”?**

A. CalOptima will reimburse for exams performed prior to the “due date” in the following circumstances: School Entry, State Preschool and Head Start Entry, Sports and Camp Physicals, WIC Participation, or Foster Care Placement to a foster care/group home

➤ **Requirement:** Please be sure to note the reason for the exam in the comment section of the PM160 Information Only form to secure payment

**Q. Do CalOptima Direct members require prior authorization for a pediatric preventive service examination?**

A. No, prior authorization is not required.

**Q. Can I claim a pediatric preventive service when I perform newborn care in a hospital setting?**

A. No, newborn care services provided in an inpatient setting **cannot** be billed to CalOptima on a PM160 INF.

**Q. Do I have to give the name of a specific provider for the dental care referral?**

A. Not necessarily. If you do not refer to a specific dental provider, please provide the patient with the Denti-Cal toll-free number for specific provider referral information: 800-322-6384.

**Q. When should the blood lead testing be performed?**

A. Ages 12 and 24 months. Children who miss the 24 month test must be tested if they are less than 72 months of age. In addition, anticipatory guidance on a lead safe environment to be provided at each visit, ages six months to 72 months.