

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL *246-3500*

TO <i>Giese</i>	DATE <i>5-27-11</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER 100528	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>cc: Walchup, M. Fick</i> <i>Cleared 6/22/11, letter</i> <i>attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>6-8-11</i> <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action		

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

~~4220 Hospital Drive~~ 1135 *Bairman Rd, Suite 509-C*
Mount Pleasant, SC 29464

Phone: 843-849-9009
Fax: 843-849-9077
info@thecabn.com
www.thecabn.com

RECEIVED

MAY 27 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

May 25, 2011

Dear Mr. Keck,

I am a Canadian Board Certified Family Physician who has a South Carolina Medical License. I moved to South Carolina in 2008 and opened my own practice in 2009.

Since I was born, raised, trained and practiced in Ontario, Canada, I am delighted that Medicaid sees the value of having a PCP. A PCP, who is a gate keeper, does decrease health care costs and I believe increases the quality of care for patients.

Prior to coming to SC, I practiced in NYS for 16 years. Twelve of those years were spent looking after adolescents with Developmental and Learning Disabilities, Behavioral Problems, and Psychiatric Illnesses. While in NY, I practiced at a specialized clinic called the Rose F. Kennedy Center, The Children's Evaluation and Rehabilitation Center. I gained my experience and expertise by working alongside professionals on a multidisciplinary team. I learned from Child and Adolescent Psychiatrists, Developmental Pediatricians, Learning Specialists, Speech and Language Specialists, Psychologists and Social Workers. I was an apprentice learning and honing my skills, until I too had an expertise in evaluating and treating these children. Most of our patient population was Medicaid. Academically, I was an Assistant Clinical Professor in the Department of Family and Social Medicine and the Department of Pediatrics.

I loved practicing this type of medicine because I felt there was a great need and that these children were underserved. In the Adolescent population Developmental and Learning Disabilities were frequently overlooked and these children often developed school failure and behavioral/psychiatric problems. The primary care practices were not able to spend the time that was often needed, to tease these problems apart, and too often these teens were labeled as ADHD or Oppositional Deviant Disorder, placed on medicine and sent on their way. Subsequently, this led to chronic school failure and an increase in depression and anxiety.

Unfortunately, I was ill prepared for the realities of Billing, in order to be paid for the services I provided. It has recently come to my attention that Medicaid owes me approximately \$25,000.00 in outstanding



1135 Bowman Rd., Suite 529 C
Mount Pleasant, SC 29464-3205

Coastal

Adolescent Behavioral Health, P.A.

CHARLESTON SC 294

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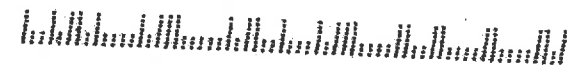
Department of Health and Human Services
PO Box 8206
Columbia, SC 29202

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MAY 27 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

ATTN: Mr. Anthony Keck
Director of ~~Medical~~ ~~Services~~



DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Gise Williams</i>	DATE <i>5-27-11</i>
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DIRECTOR'S USE ONLY		ACTION REQUESTED	
1. LOG NUMBER <i>100528</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____		
2. DATE SIGNED BY DIRECTOR <i>cc: Waldrop, Mr. York</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>5-8-11</i> DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action		

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1. <i>Gise Williams</i>	<i>6-16-11</i>		
2. <i>BS Green</i>	<i>6/23 OK</i>	<i>cls</i>	
3.			
4.			

RECEIVED
Dept. of Health
& Human Services
MAY 27 2011
Medical and
Managed Care Services

Coastal Adolescent Behavioral Health, P.A.

Katherine M. Graber M.D.

~~4220 Hospital Drive~~ 1135 Baumr Rd., Suite 509-C
Mount Pleasant, SC 29464

Phone: 843-849-9009

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Department of Health & Human Services
OFFICE OF THE DIRECTOR

May 25, 2011

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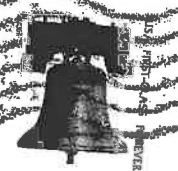
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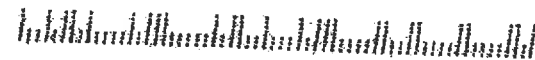
Department of Health and Human Services
PO Box 8206
Columbia, SC 29202

RECEIVED

MAY 27 2011

Department of Health & Human Services
OFFICE OF THE DIRECTOR

ATTN: Mr. Anthony Keck
Director of Medicaid



June 22, 2011

Katherine M. Graber, M.D.
Coastal Adolescent Behavioral Health, P.A.
1135 Bowman Road, Suite 529-C
Mount Pleasant, South Carolina 29464

Dear Dr. Graber:

Thank you for your letter regarding billing issues your office has experienced while providing services to children with Developmental and Learning Disabilities.


The South Carolina Department of Health and Human Services (SCDHHS) has reviewed the concerns outlined in your letter. There are two main topics in which you have requested guidance. First, regarding Current Procedural Terminology (CPT) codes as it relates to consultation and psychiatric services, we do not have any restrictions related to these codes that would prevent a physician from billing if the service they have delivered is best described by a consult or psychiatric code.

Second, Mr. Nicholas Thacker, Program Manager in the Division of Physician Services, spoke with you on June 6, 2011 concerning unpaid claims. We discovered that your claims issues are primarily related to Eligibility and proper utilization of CPT and ICD-9 codes. In the area of Eligibility, our Physicians, Laboratories, and Other Medical Professionals manual states that eligibility must be checked prior to services being rendered. Eligibility can be verified by utilizing one of three methods, the Web Tool, Interactive Voice Response System (IVRS) or by calling the Provider Service Center.

The issues relating to CPT and ICD-9 codes revolved mostly around the utilization of codes that are not currently approved for use in the most recent coding publications. It is suggested that you or your staff utilize the most current version of CPT and/or International Classification of Diseases 9th Revision to ensure appropriate billing. You should also contact your medical association for recommendations regarding medical coding specialists to assist with your coding needs. The Physician Services fee schedule can be consulted for the most current list of CPT codes covered by the South Carolina Medicaid program for reimbursement. Mr. Thacker will continue to assist with resolving the fee for service claims that have not exceeded the timely filing criteria and will help identify which claims should be filed to the managed care companies for resolution.

Thank you for bringing your concerns to our attention. If you have additional questions or concerns you may contact your Program Manager, Mr. Nicholas Thacker, at 803-898-4352.

Sincerely,


Melanie "BZ" Glese, RN
Deputy Director

MG/ws