

Provider Quick Reference Guide- Medical Foster Care (MFC)

Miami Children’s Health Plan (MCHP) covers Medical Foster Care Services provided to enrollees with complex medical needs to allow them to live in a foster care home. MCHP has implemented procedures to ensure enrollees continue to receive needed services and providers continue providers receive timely payment.

Continuity of Care

The 60-day period during which Miami Children’s Health Plan honors all services previously authorized or initiated for members who are transitioning from another Medicaid plan or the state’s Medicaid fee-for-service delivery system. During this period, MCHP will cover the continued course of treatment without authorization and without regard to provider’s participation status.

Claim Submission

Non-participating and participating providers may submit claims to MCHP, electronically or on paper as described below.

Current CPT and HCPCS procedure codes are required to identify the services provided. Medical Foster Care services are billed using the HCPCS codes and modifiers listed below, unless otherwise stated in your MCHP Provider Agreement.

HCPCS CODE	MODIFIER	DESCRIPTION
S5145	HA	Level I Medical Foster Care
S5145	TF	Level II Medical Foster Care
S5145	TG	Level III Medical Foster Care

For paper claims, please submit to MCHP at the following address:

Miami Children’s Health Plan
PO BOX 211241
Eagan, MN 55121

MCHP’s electronic claim clearinghouse is Change Healthcare. Providers may submit electronic claims through Change Healthcare and other clearinghouses. For additional information about electronic claims, contact Change Healthcare at 800-845-6592.

Miami Children’s Electronic Payer ID is 82832.

Claims Payments

Non-participating providers will be paid at 100% of the Agency’s fee schedule for MFC services. Single case agreements are not required.

Participating providers will be paid at the contracted rate for MFC services.

Claims Filing and Processing Timeframes

MCHP will process clean claims submitted electronically within 15 days and paper claims within 20 days.

Authorizations

MCHP does not require authorization for Medical Foster Care, regardless of the provider’s participation status, during the continuity of care period and after. Providers may render Medical Foster Care services without authorization even if non-participating within MCHP.

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Training Materials	Need help?	
<p>Providers may access MCHP’s Provider Handbook and general provider training materials on MCHP’s website at-</p> <p>https://www.miamichildrenshealthplan.com/en-US/Providers/Training-and-Resources.aspx</p> <p>Additionally, trainings specific to Medical Foster Care can be found on MCHP’s website at-</p> <p>https://www.miamichildrenshealthplan.com/en-US/Providers/Training-and-Resources/Medical-Foster-Care.aspx</p>	<p>For assistance with contracting, credentialing, claims, authorization, provider complaints including escalated issues or any other questions related to Medical Foster Care, please contact the MCHP’s Provider Relations Representatives listed below:</p> <ul style="list-style-type: none"> • Denise Castro-Sorondo (Region 9) Dcastrosorondo@evolenthealth.com (786) 624-3099 • Vilma Hernandez (Region 11) VHernandez@evolenthealth.com (786) 514-1433 <p>If you have a claims related complaint, including escalated issues, contact Customer Service at 844-243-5187 and a representative will assist you. You may also find Provider Complaint guidance in MCHP’s Provider Handbook on our website at-</p> <p>https://www.miamichildrenshealthplan.com/providers/Provider-Manual.aspx</p>	
Joining the MCHP network		
<p>Providers may contact MCHP’s Provider Relations Department to complete the credentialing and contract process.</p> <p>MCHP will also reach out to non-participating Medical Foster Care providers serving MCHP enrollees.</p>		
Other Important Phone Numbers		
<p>Member Customer Service (844) 243-5187</p>	<p>Provider Customer Service (844) 243-5188 (888) 843-3938 Fax</p>	<p>Utilization Management (844) 824-8768 (888) 518-5333 Fax</p>