

# PROVIDER Update



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## Take Online Training to Get Paid for Cognitive Health Assessments for Medi-Cal Patients Ages 65 And Older

### Conduct assessments with online tool

As of July 1, 2022, the Department of Health Care Services (DHCS) pays Medi-Cal physicians and other providers who give an annual cognitive health assessment for Medi-Cal patients.

- Patients must be age 65 or older, and
- Not be eligible for a similar assessment as part of an annual wellness visit under the Medicare program.

### Train and attest online

You are eligible to receive the payment if you comply with both of the following:<sup>1</sup>

- Finish and attest to completing the cognitive health assessment training, as specified and approved by the DHCS. Training is available at [www.dementiacareaware.org](http://www.dementiacareaware.org).
- Conduct the cognitive health assessment using a tool suggested by the DHCS.

### Which screening tools are approved?

The DHCS has listed approved specific screening tools. At least one cognitive assessment tool listed below is required. Cognitive assessment tools used to determine if a full dementia evaluation is needed include, but are not limited to:<sup>1</sup>

- Patient assessment tools
  - General Practitioner assessment of Cognition (GPCOG)
  - Mini-Cog
- Informant tools (family members and close friends)
  - Eight-item Informant Interview to Differentiate Aging and Dementia
  - GPCOG
  - Short Informant Questionnaire on Cognitive Decline in the Elderly (IQCODE)

### THIS UPDATE APPLIES TO:

- Physicians
- Participating Physician Groups

### LINES OF BUSINESS:

- Medi-Cal
  - Kern
  - Los Angeles
    - Molina
  - Riverside
  - Sacramento
  - San Bernardino
  - San Diego
  - San Joaquin
  - Stanislaus
  - Tulare

### PROVIDER SERVICES

[provider\\_services@healthnet.com](mailto:provider_services@healthnet.com)

### Medi-Cal (including CS and ECM providers)

– 800-675-6110

### PROVIDER PORTAL

[provider.healthnetcalifornia.com](http://provider.healthnetcalifornia.com)

### PROVIDER COMMUNICATIONS

[provider.communications@healthnet.com](mailto:provider.communications@healthnet.com)

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Based on the scores from these assessments, additional assessment or a specialist referral may be appropriate (see the Centers for Medicare & Medicaid Services Cognitive Assessment & Care Plan Services webpage at [www.cms.gov/cognitive](http://www.cms.gov/cognitive)).<sup>2</sup>

## How to bill and get paid

To bill and get paid for conducting an annual cognitive health assessment, physicians and other providers must do all of the following:<sup>1</sup>

- 1 **Complete the DHCS Dementia Care Aware cognitive health assessment training** prior to conducting the brief cognitive health assessment;
  - The DHCS will maintain a list of providers who have completed the training; plans will have access to the list. Physicians and other providers can view the list at [provider.healthnet.com](http://provider.healthnet.com) > Resources For You > *Dementia Care Aware Training List (XLSX)*.
- 2 **Administer the annual cognitive health assessment** as a component of an evaluation & management (E&M) visit, including but not limited to, an office visit, consultation or preventive medicine service (elements of the cognitive health assessment can be conducted by non-billing team members acting within their scope of practice and under the supervision of the billing provider), once per 365 days;
- 3 **Document** all of the following in the member’s medical records and have such records available upon request:
  - The screening tool or tools that were used (at least one cognitive assessment tool listed above is required);
  - Verification that the provider reviewed the screening results;
  - The results of the screening;
  - The interpretation of results; and
  - Details discussed with the member and/or authorized representative and any appropriate actions taken in regard to screening results.
- 4 **Use allowable CPT codes** as outlined in the Medi-Cal Provider Manual at [files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/eval.pdf](http://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/eval.pdf). Per the manual, bill CPT code 1494F on an additional claim line.<sup>2</sup>

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Use this code...	For this service...
<b>1494F</b>	Only for applicable Medi-Cal members ages 65 and older with or without symptoms of cognitive decline and who do not have Medicare coverage. <sup>1</sup> CPT code 1494F has a frequency limit of once per year, per same provider. Bill 1494F on an additional claim line. <sup>2</sup>
<b>Normal E&amp;M codes</b>	For members under age 65 who are reporting symptoms or showing signs of cognitive decline, the physician or other provider should conduct a cognitive health assessment.

## What an annual cognitive health assessment does

An annual cognitive health assessment detects signs of Alzheimer’s disease or dementia, consistent with the standards for detecting cognitive impairment under the Medicare Annual Wellness Visit and the recommendations by the American Academy of Neurology.<sup>1</sup>

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## Background

California Senate Bill (SB) 48 expands the Medi-Cal schedule of benefits to include an annual cognitive assessment for Medi-Cal members who are ages 65 and older if they are otherwise not eligible for a similar assessment as part of an annual wellness visit through the Medicare program.<sup>1</sup>

SB 48 outlines requirements that Medi-Cal providers must complete prior to being eligible to receive payment for conducting annual cognitive health assessments. Medi-Cal providers must complete training as specified and approved by the DHCS and use validated tools recommended by DHCS.<sup>1</sup>

Refer to DHCS All Plan Letter (APL) 22-025, *Responsibilities for Annual Cognitive Health Assessment for Eligible Members 65 Years of Age or Older* at [www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-025.pdf](http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-025.pdf) for details.

## Additional information

Relevant sections of Health Net's provider operations manuals have been revised to reflect the information contained in this update as applicable. Provider operations manuals are available electronically in the Provider Library on Health Net's provider portal at [provider.healthnetcalifornia.com](http://provider.healthnetcalifornia.com) > *Provider Library* under Quick Links, or go directly to [providerlibrary.healthnetcalifornia.com](http://providerlibrary.healthnetcalifornia.com).

Providers are encouraged to access the provider portal online at [provider.healthnetcalifornia.com](http://provider.healthnetcalifornia.com) for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, contact the Health Net Medi-Cal Provider Services Center within 60 days at 800-675-6110.

<sup>1</sup> Information taken or derived from DHCS APL 22-025, *Responsibilities for Annual Cognitive Health Assessment for Eligible Members 65 Years of Age or Older*. [www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-025.pdf](http://www.dhcs.ca.gov/formsandpubs/Documents/MMCDAPLsandPolicyLetters/APL2022/APL22-025.pdf).

<sup>2</sup> Information taken or derived from the Medi-Cal Provider Manual at <https://files.medi-cal.ca.gov/pubsdoco/publications/masters-mtp/part2/eval.pdf>.