

Information for Primary Care Providers

South Carolina Department of Social Services, Office of Child Health and Well-Being needs your help to meet the health care needs for children in foster care.

Initial Well Child Visits

When a child first comes in to foster care, the child must receive a well child visit within 30 days. Ideally, children should have a well child visit within seven days of entering care.

TIP: Select Health will reimburse a provider for an initial well check visit when a foster child changes in to another service area even if a recent well check visit has been completed by another provider.

After-Visit Summaries

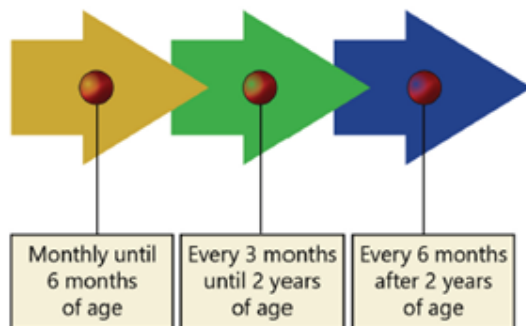
Once a child has had a well child visit, SCDSS needs information on what follow up care the child needs. It may be a referral to a specialist, additional testing, or return visits.

To help with follow up on children in foster care's health care needs, send after-visit summaries or dictation notes from the well check visit on the specific date of service.

childhealth@dss.sc.gov

These after-visit summaries will be forwarded to a DSS Regional Nurse Coordinator after being received in this mailbox.

Well Child Visits Required Schedule



Ongoing Well Child Visits

After the initial visit, all children must receive follow up well child visits based on their age and guidelines for children in foster care. This schedule is based on the American Academy of Pediatrics guidelines for children in Foster Care.

TIP: Did you know that if a child comes in for a sick visit and is also due for a well child visit, you can combine both visits? Effective July 1, 2019, SCDHHS, issued a Medicaid Bulletin that states that well child visits on the same day as sick-child visits for beneficiaries from birth to age 21 can be billed using modifier "25."

Upstate Region

WellbeingUpstate@dss.sc.gov
Fax 864-282-4278

Midlands Region

WellbeingMidlands@dss.sc.gov
Fax 803-734-2863

Lowcountry Region

WellbeingLowCountry@dss.sc.gov
843-953-2561

Pee Dee Region

WellBeingPeeDee@dss.sc.gov
Fax 843-519-0840

Key Elements of the After-Visit Summary (AVS) document include:

- Date of assessment
- Health history, chronic health diagnoses/ ICD-10 codes
- Identification of acute or chronic health conditions
- Medications
- Allergies and reaction
- Physical exam findings including growth/vital signs
- Immunizations
- Development/behavioral screening (as needed)
- Lab tests (as needed)
- Hearing/vision
- Dental Needs
- Developmental, school needs, and functioning, and cognitive functioning
- Relationship issues (foster family, birth family, etc.)
- Behavioral or emotional issues that may have arisen
- Treatment needs requiring follow up
- Future scheduled appointments

TIP: *If you currently do not generate after-visit summaries, or need assistance in creating a health summary, reach out to the Foster Care Support Clinic at MUSC at (843) 876-7023.*



Select Health Care Coordination

In July 2019, Select Health created a unit of dedicated nurse care managers and care connectors for children in foster care.

This Select staff can assist in providing care coordination needs such as finding a primary doctor or specialist, assisting with medication management and mediations needs through pharmacy, helping to make appointments, and follow up on any appointments, referrals or resources given. Select Health Care Coordination answers questions, help navigate the insurance side, and educate on any physical or mental health conditions.

For questions or to reach the Select Health Foster Care team-

Please call First Choice Member Services at 888-276-2020 and press Option #3

TIP: If a patient who is in foster care was denied a service or procedure that you determined was needed, DSS staff can assist with denial appeals. Please reach out to DSS Office of Child Health and Well-Being.

Please ask the foster parent for the child's **DSS Health and Education Passport**, this document has valuable information.

Thanks for everything you do to care for foster children and vulnerable adults.



Beginning July 1, 2020, SCDHHS will reimburse for prolonged evaluation and management services before or after directed patient care when initiating a patient-provider relationship with a child in foster care. This effort is aimed at providing reimbursement for the non-direct care activities associated with an initial visit, such as record collection and coordination with various providers and state agencies.

Claims for this service should be billed with Current Procedural Terminology (CPT) code 99358 ("Prolonged evaluation and management service before and/or after direct patient care") with a modifier of "UA," which is defined as "initial visit with patient in foster care." This code should be submitted along with the appropriate evaluation and management or well-visit code for the direct patient care component.