

ATTENTION: Child Health and Disability Prevention (CHDP) Program Providers

Effective July 1, 2017, Partnership HealthPlan of California (PHC), in accordance with state and HIPAA standards, will be transitioning from the two-character CHDP billing code on the PM160 form to the CPT-4 national codes on the CMS-1500 form, the standard 837 electronic claims format, or the UB04 form.

All CHDP claims with a date of service on or after July 1, 2017, will be required to be completed in any of the three following formats: through the 837 standard electronic claims file format, by paper with the CMS-1500 form, or the UB04 form. CHDP claims with a date of service prior to and including June 30, 2017, will still need to be completed on the PM160 forms (either electronically or on paper).

Providers have until October 1, 2017, to transmit electronic PM160 data via eCHDP for dates of service June 30, 2017, and earlier. After October 1, 2017, all CHDP services must be on the paper PM160 information only form.

Any PM160 forms received with dates of service on or after July 1, 2017, will be returned to the provider as the PM160 form will be considered an invalid form for submission.

This transition to the CMS-1500 form on July 1, 2017, will include laboratory services and all other CHDP services.

IMPORTANT: For all dates of service prior to and including June 30, 2017, providers **MUST** continue to use PM160 forms

 NOTE: As standard with PHC billing policy, providers have 12 months to submit a claim from the date of service.

PHC will offer opportunities for provider education on the new billing requirements in the coming months. Please contact your PHC Provider Representative with questions on date and times.

For additional information:

- CHDP Gateway to Health Coverage: March 2017; Bulletin 149 Click Here
- CHDP Billing Transition FAQs Click Here
- CHDP Look Ahead (Nov. 2017) Click Here
- CHDP HIPAA Code Conversion and Claim Form Transition Phase II Click Here