

Section 5

Other Child Health-Related Services

B. HEALTHCHOICE SELF-REFERRED SERVICES

These services are defined by HealthChoice regulations as services received from a provider outside the Managed Care Organization (MCO) network that **do not require a referral** from the Primary Care Provider (PCP) or pre-authorization from the MCO.¹ The MCO is financially responsible for payment to the out-of-plan providers for the following services:

- Initial medical exam for a child in State-supervised care;
- Emergency services;
- Annual diagnostic and evaluation service for HIV disease;
- Family planning services;
- Newborn's initial medical examination in a hospital;*
- Pregnancy-related services initiated prior to MCO enrollment;
- Renal dialysis provided in a Medicare certified facility;
- School-based health center services including EPSDT preventive services.

**In-plan providers who see newborns should seek reimbursement from the MCO.*

Since 2009, School-Based Health Center (SBHC) providers no longer need a contract with Managed Care Organizations (MCOs) to be reimbursed for Healthy Kids Program preventive care services as long as the SBHC provider is EPSDT certified and complies with the criteria found in the Code of Maryland Regulations (COMAR).² If a child or adolescent enrolled in Medicaid receives services in a SBHC, the center is required to send information regarding those services to the primary care provider (PCP) within three (3) business days. The *School-Based Health Center Health Visit Report Form* is used for this purpose (refer to Section 5, Addendum). If a follow-up care with the PCP is required within one (1) week and the health visit report is mailed, the SBHC should also telephone, email, or fax the health visit report to the student's MCO and PCP on the day of the SBHC visit. For assistance or questions regarding EPSDT services at SBHCs, call the **Healthy Kids Program** at **410-767-1903**.

¹ See COMAR 10.09.65.13

² See COMAR 10.09.68.