

‘Report the Care You Give – It Pays’

2011 Practitioner Incentives

	What You Need to Do – Report	What You Get – It Pays
Adolescent Well – Medi-Cal & Healthy Families – Annual Well Visit	<input type="checkbox"/> Perform an annual well-care visit for adolescents 13 – 20 years old. <ul style="list-style-type: none"> • Medi-Cal – completed CHDP PM-160 form for well-care annual visit per adolescent • Healthy Families – completed CMS (HCFA) 1500 for well-care annual visit per adolescent 	<i>An incentive of \$20.00 per electronic or paper claim you submit for each eligible member receiving an annual adolescent well care visit</i>
Prenatal Care – Medi-Cal – 1st Trimester Visit	<input type="checkbox"/> Assess pregnant Medi-Cal members within the first trimester of pregnancy <input type="checkbox"/> Submit claim with the following code indicating prenatal care: <ul style="list-style-type: none"> • Z1032 – with modifier ZL and Box 14 MUST contain the LMP 	<i>An incentive of \$100 per claim for eligible members receiving prenatal assessment occurring in the first trimester of their pregnancy</i>
Postpartum Care – Medi-Cal – w/in 21 – 56 days post delivery	<input type="checkbox"/> Assess pregnant Medi-Cal members within 21 – 56 days post delivery <input type="checkbox"/> Submit claim with the following code indicating postpartum follow-up: <ul style="list-style-type: none"> • Z1038 • 59430 	<i>An incentive of \$100 per claim for eligible members receiving postpartum assessment occurring within 21 – 56 days post delivery</i>

***Also please submit all of your encounter data ASAP!
Thanks for your assistance.***

For questions contact Gabriela Rubalcava, (619) 498-6535.