

# Provider Bulletin

These bulletins are how we communicate procedures, reminders and other information to our valued Magellan Complete Care providers. Please take the time to read the information and share with your colleagues and staff. You can also find this information on [www.MCCofFL.com](http://www.MCCofFL.com).

## MCC of FL's Evaluation and Management (E&M) services coding program

Magellan Complete Care of Florida (MCC of FL) values the level of service you provide to our members and we're committed to implementing programs that support nationally recognized coding policies and practices.

Effective April 1, 2021, MCC of FL will be implementing an Evaluation and Management (E&M) coding program to evaluate and review high level E&M services.

Providers are expected to report E&M services in accordance with the American Medical Association's (AMA) CPT Manual and the Centers for Medicare and Medicaid Services' (CMS) guidelines for billing E&M service codes under Documentation Guidelines for Evaluation and Management. Levels of service for E&M codes are based primarily on either medical decision making or time spent with the member.

### Program Details:

- Claims will be evaluated to determine the appropriateness of high level E&M services.
- Based on the evaluation, MCC of FL may adjust the claim during the adjudication process to more accurately reflect the typical level of service required to treat the reported condition.
- The claim will be paid at the adjusted level with the following new remittance code on the Explanation of Payment indicated as:
- **E&M code not supported by dx/services; priced w/lower rate**

### What you can do:

- Carefully document each service provided according to CMS guidelines which can be viewed online at <http://www.cms.gov>.
- If you do not agree with a payment determination, you have the right to file an appeal by submitting the portion of the medical record that supports additional reimbursement by following MCC of FL's provider grievance process.

**Appealed claims should be sent to:**

Magellan Complete Care of Florida  
Provider Appeals Department  
P.O. Box 1005  
Maryland Heights, MO 63043

Please note: Office notes documenting the E&M services rendered, including complete history, time spent with the member and complexity of medical decision making must be included with the appeal.

- Appealed claims that substantiate the provision of a higher E&M level of service will be adjusted and reimbursed at the incremental amount. Those that do not substantiate a higher level will not be adjusted.

The goal of the Evaluation and Management (E&M) services coding program is to ensure coding accuracy and implement fair, widely recognized and transparent payment policies.

If you have any questions, please Provider Services at 1-800-327-8613.