



PROVIDER *bulletin*

March 2, 2020

Re: Proposition 56 Directed Payments for Adverse Childhood Experiences Screening Services (ACEs), APL 19-018

Dear Provider:

Assembly Bill (AB) 74 allocates Proposition 56 funding for provider training to conduct trauma screenings as well as the evaluation of trauma screening for children and adults. Effective January 1, 2020, Network Providers may bill the appropriate CPT code to be eligible for directed payments for conducting the age appropriate trauma screening.

ACEs screening evaluates children and adults for trauma which occurred from ages 0 to 18. There are age appropriate screening tools available; the ACEs questionnaire for adult members 18 years and older and Pediatric ACEs and Related Life-events Screener (PEARLS) for patients under the age of 18, which can be found at <https://www.acesaware.org/screen/screening-for-adverse-childhood-experiences/>.

Effective July 1, 2020, training will be mandatory for Network Providers to be eligible for directed payments for the trauma screening services (Medicare Part B dually eligible patients are excluded). The DHCS will provide ACEs training for providers, and their staff, both in-person and online. The online training will take approximately two hours to complete. For additional details regarding the training please visit <https://www.acesaware.org>.

ACEs screenings may be conducted as many times as deemed medically necessary. For adult members, only one screening per lifetime will be reimbursable. One screening, per member, per year, will be reimbursable for patients under the age of 18.

To be eligible for the identified reimbursement providers must:

- ❖ Be included on the DHCS' list of providers who have completed the trauma-informed training
- ❖ Use the age appropriate screening tool
- ❖ Maintain documentation and make readily available upon request the following:
 - Screening tool used
 - Screening was reviewed and documentation of the results

- Discussion with member or member's family regarding appropriate medical action
- ❖ Bill with the appropriate CPT code
 - G9919: Screening performed – results positive and provision of recommendations provided. This code is billed when the patient's ACE score is 4 or greater.
 - G9920: Screening performed – results negative. This code is billed with the patient's ACE score is 0-3.

Payment will be made 90 calendar days from the date of receipt of the clean claim or accepted encounter which meets the criteria outlined above. General claim processing rules apply.

Additional information regarding APL 19-018, Proposition 56 Directed Payments for Adverse Childhood Experiences Screening Services, is available on the State of California – Health and Human Services Agency, Department of Health Care Services website.

Providers wishing to file a grievance as a result of payment or process issues related to APL 19-018, or for any additional questions, please contact your Provider Relations Representative at 661-664-5000.

Melissa Lopez
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