



HHSC UNIFORM MANAGED CARE MANUAL STAR KIDS Geo-Mapping Report Instructions	CHAPTER	PAGE
	5.14.12	1 of 5
	EFFECTIVE DATE	
		September 1, 2016
		Version 2.0

DOCUMENT HISTORY LOG

STATUS ¹	DOCUMENT REVISION ²	EFFECTIVE DATE	DESCRIPTION ³
Baseline	2.0	September 1, 2016	Initial version Uniform Managed Care Manual Chapter 5.14.12, "STAR Kids Geo-Mapping Report Instructions." This chapter applies to contract issued as a result of HHSC RFP number 529-13-0071.

¹ Status should be represented as "Baseline" for initial issuances, "Revision" for changes to the Baseline version, and "Cancellation" for withdrawn versions.

² Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., "1.2" refers to the first version of the document and the second revision.

³ Brief description of the changes to the document made in the revision.



HHSC UNIFORM MANAGED CARE MANUAL	CHAPTER	PAGE
	5.14.12	2 of 5
STAR KIDS Geo-Mapping Report Instructions	EFFECTIVE DATE	
	September 1, 2016	
Version 2.0		

I. Applicability of Chapter

This chapter applies to Managed Care Organizations (MCOs) participating in the STAR Kids Program (The term “MCO” includes health maintenance organizations (HMOs), exclusive provider organizations (EPOs), insurers, and any other entities licensed or approved by the Texas Department of Insurance. MCOs participating in the demonstration may also be referred to as Medicare-Medicaid Plans (MMPs) in this chapter.

All MCOs must submit a Geo-Mapping Report (UMCM Chapter 5.14.11) for each Service Area in accordance with the instructions below.

II. Objective

MCOs contracting with the State of Texas to provide comprehensive health care services to qualified Program recipients must submit the Geo-Mapping Report in accordance with the Contract for services between HHSC and the MCO, and in accordance with the instructions below. Ad Hoc reports may be requested by HHSC as needed.

III. General

The Geo-mapping Report must be completed using the template provided by HHSC. Each MCO is required to submit one report that includes all Service Areas by plan code.

All shaded data fields in the Geo-Mapping Report represent fields where data input is required. All data fields not shaded represent cell-referenced data or calculations.

HHSC will provide the Geo-mapping Report to the MCOs in an electronic format. Spreadsheet integrity is critical to the automated compilation of this data. MCOs may not alter the file name, worksheet name, existing cell locations, or the format of the data in the cells. MCOs may not add or delete any columns or rows to the spreadsheet.

MCOs may submit UMCM Chapter 5.15 Special Exception Request for geo-access standards that are not met.

IV. Naming Convention and Submission

MCOs must choose one plan code for the deliverable name and submission.



HHSC UNIFORM MANAGED CARE MANUAL	CHAPTER	PAGE
	5.14.12	3 of 5
STAR KIDS Geo-Mapping Report Instructions	EFFECTIVE DATE	
	September 1, 2016	
Version 2.0		

V. Geo-Mapping Report

The Geo-Mapping Report will provide HHSC with information on member access to care by provider. The Geo-Mapping Report must be submitted quarterly by the last day of the month following the report period.

VI. Data Entry Instructions

Please follow the instructions for each of the tabs in the workbook listed below. Each row should contain geo-access measures for one plan code. MCOs are required to populate the data in the CHILD tab in Excel. Geo-access measurements must range between 0 and 100%, formatted as a percentage with two decimal places. HHSC interprets 0% as no access to a provider type. If there are no members residing in non-urban counties it is appropriate to use "N/A" rather than zero for measures related to outpatient behavioral health.

MCOs must report an aggregated geo-access calculation for each provider type that includes only the allowed provider specialty codes, in accordance with the MAXIMUS JIP.

Report Elements

The following instructions apply to each section/column of the tabs.

1. MCO Information

- **Plan Code**
 - Select a plan code from the drop down for each row. After the plan code is selected, MCO program and Service Area will be automatically populated.
- **MCO, Program, and Service Area**
 - Do not enter any data, data will auto populate based on Plan Code.

2. Member Population

- Enrollment is based on the 834 eligibility file sent to the MCOs on the last month of the quarter.
- Consistent with the managed care contracts, children include members who are 20 years of age and younger. Child status is based on the member's age as of the first day of the last month in the reporting period.
- MCOs must use the county designations provided by HHSC for medical and dental geo-access provided in UMCM Chapter 5.14.7.



HHSC UNIFORM MANAGED CARE MANUAL	CHAPTER	PAGE
	5.14.12	4 of 5
	EFFECTIVE DATE	
STAR KIDS Geo-Mapping Report Instructions	September 1, 2016	
	Version 2.0	

- Do not include dual eligible members in calculations.

3. Provider Network

- Include providers who are actively contracted in the MCO's network as of the last day of the reporting period.
- The type of providers included in the reports are different for child and adult populations.

A. PCP

- Primary care provider is defined consistent with the managed care contracts.
- MCO may include only the following provider types or specialties (PT or PS) in PCP geo-access calculations:
 - Federally Qualified Health Center – PT 46
 - Rural Health Center (Independent and Hospital) – PT 78, 79
- MCOs may also include the following provider types in combination with the following provider specialty types (PS):
 - Physician Assistant/Nurse Practitioner/Clinical Nurse Specialist – PT 10
 - Physician (D.O, M.D.). – PT 19, 20
 - Physician Group (D.O., M.D.) – PT 21, 22
 - AND
 - Family Practice/General Practice – PS 8
 - Gynecology (D.O.) – PS 9
 - Internal Medicine – PS 11
 - OB/GYN (D.O., M.D.) – PS 15, 16
 - Pediatrics - PS 37
 - Multispecialty Clinic – PS 70
 - Nurse/Nurse Midwife – PS 75
 - Certified Nurse Specialist – N1
 - Nurse Practitioner – PA

B. OB/GYN

- OB/GYN, D.O- PS 15
- OB/GYN, M.D.– PS 16
- Gynecology, D.O. - PS 09

C. Orthopedic Surgeon

- PS 20

D. ENT

- Otorhinolaryngologist (ENT) - PS 04
- Eyes, ears, nose, and throat (E.E.N.T.), D.O. – PS 17



HHSC UNIFORM MANAGED CARE MANUAL	CHAPTER	PAGE
	5.14.12	5 of 5
	EFFECTIVE DATE	
STAR KIDS Geo-Mapping Report Instructions	September 1, 2016	
	Version 2.0	

E. Outpatient behavioral health provider

- represents an aggregated geo-access calculation and may only include the following provider types:
 - Chemical Dependency Treatment Facility (DSHS Certified) – PT 08
 - Psychiatrist (M.D. or D.O.) – PT 26, 27
 - Licensed Clinical Social Worker (LCSW) – PT 18 & 40
 - Licensed Professional Counselor (LPC) – PT 16
 - Licensed Marriage and Family Therapist (LMFT) – PT 16
 - Licensed psychologist – PT 31
 - Psychologist Group – PT 97
 - Multispecialty Clinic licensed to bill MH Rehab and MH TCM - PS 47

F. Acute Care Hospital

- Hospital, short and long term – PT 60
- Hospital, private full care – PT 61
- Hospital, private – PT 62
- Psychiatric – PT 64
- Rehabilitation – PT 65

G. Cardiovascular Disease Specialist

- PS 6

H. General Surgeon

- PS 2

I. Urologist

- PS 34

J. Ophthalmologist

- PS 18

K. Nursing Home

- Nursing Home – PT 47
- Nursing Home – PT 80