



HIPAA-Compliant Referral Condition Codes

CHILD AND TEEN CHECKUPS (C&TC) FACT SHEET FOR PRIMARY CARE PROVIDERS

HIPAA-compliant referral codes are required on every C&TC visit claim to identify when a child is referred for appropriate evaluation, diagnosis, and treatment.

C&TC standards

General

Documentation of a two-character HIPAA-compliant referral condition code ("referral code") is required on all C&TC visit claims. Even when you identify no referral for further evaluation or follow-up, include a referral code on the claim.

Use referral codes to ensure that any C&TC screening that reveals a health concern leads to appropriate evaluation, diagnosis, and treatment.

Choose from four referral codes:

- ST: New diagnosis or treatment service requested.
- S2: Continue current services or treatment.
- AV: Referral was recommended, but it was refused or declined by the patient/family.
- **NU**: No referral provided.

Refer to the <u>C&TC HIPAA Compliant Referral</u>
<u>Condition Codes</u> in the Minnesota Health
Care Programs Provider Manual for more
information

Personnel

Coding staff or the licensed health care professional who provided the C&TC service may select and document the referral code: physician, nurse practitioner, physician assistant, or registered or public health nurse (RN, PHN) who has completed the C&TC Comprehensive Screening training through the Minnesota Department of Health.

Documentation

It is required to enter one of the four HIPAA-compliant referral condition codes on the claim for a complete C&TC visit.

Refer to the <u>C&TC Provider Documentation</u> <u>Forms</u> for documentation examples or to use as a template with your electronic medical record.

Procedure

Select a referral code based on the outcome of the C&TC visit. Make a referral for follow-up with the same provider or to a different provider if a condition is identified that requires more follow-up or evaluation.

Choose a referral code based on whether:

- It is a first-time referral for that condition (ST).
- It is a referral for a previously identified condition (S2).
- The patient or family declines the referral (AV).
- No referral is made (NU).

If both a new condition and a previously identified condition require a referral, use the ST code to identify the referral for a new condition

Importance of referral codes

Referral codes serve two purposes:

- Documenting that concerns receive appropriate diagnosis, management, and treatment.
- Signaling outreach staff to offer followup support to the family.

In Minnesota, the Department of Human Services contracts with Integrated Health Partnerships, county health boards, and tribal agencies to provide C&TC outreach services to individuals eligible for C&TC health services. C&TC coordinators and outreach staff receive follow-up referral codes monthly through a claims-related data system. The C&TC outreach staff provide follow-up on referral codes to help families with children younger than age 11 access health care services, including assistance with transportation, interpreters, and other needs.

This support does not replace medical care coordination services. C&TC outreach staff only receive the referral codes in the data system; they do not receive any health information related to the referral.

Resources

Minnesota Department of Human Services

- <u>C&TC Schedule of Age-Related</u>
 <u>Screening Standards</u>
- Minnesota Health Care Programs
 (MHCP) Provider Manual C&TC Section
- Child and Teen Checkups (C&TC) Health Insurance Portability and Accountability Act (HIPAA) Referral Coding Information

Minnesota Department of Health

Child and Teen Checkups (C&TC)

For more information

The Child and Teen Checkups (C&TC) program is administered through a partnership between the Minnesota Department of Human Services and the Minnesota Department of Health.

For questions about this fact sheet or to obtain this information in a different format, call 651-201-3650 or email health.childteencheckups@state.mn.us.

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Resource links

- C&TC HIPAA Compliant Referral Condition Codes (https://www.dhs.state.mn.us/main/idcplg ?IdcService=GET DYNAMIC CONVERSION& RevisionSelectionMethod=LatestReleased& dDocName=dhs16 150092#hipaa)
- <u>C&TC Provider Documentation Forms</u>
 (https://mn.gov/dhs/partners-and-providers/policies-procedures/minnesota-health-care-programs/provider/types/ctc-resources)
- C&TC Schedule of Age-Related Screening <u>Standards</u>
 (https://edocs.dhs.state.mn.us/lfserver/Pub lic/DHS-3379-ENG)
- Minnesota Health Care Programs (MHCP) Provider Manual - C&TC Section (http://www.dhs.state.mn.us/main/idcplg?I dcService=GET_DYNAMIC_CONVERSION&R evisionSelectionMethod=LatestReleased&d DocName=dhs16_150092)
- Child and Teen Checkups (C&TC) Health
 Insurance Portability and Accountability Act
 (HIPAA) Referral Coding Information
 (https://edocs.dhs.state.mn.us/lfserver/Public/DHS-3277-ENG)
- Child and Teen Checkups (C&TC)
 (https://www.health.state.mn.us/people/c
 hildrenyouth/ctc/index.html)