

REIMBURSEMENT QUESTIONS

To find out if medical services and supplies for a specific child can be supported, contact the DSCC Regional Office in your area.

Champaign

(217) 333-6528 (Voice)
(800) 779-0889 (Toll Free)

Chicago

(312) 433-4114 (Voice)
(800) 425-1068 (Toll Free)

Chicago Home Care

(312) 433-4100 (Voice)
(800) 905-9995 (Toll Free)

Lombard

(630) 652-8900 (Voice)
(800) 924-0623 (Toll Free)

Marion

(618) 997-4396 (Voice)
(800) 451-0464 (Toll Free)

Mokena

(708) 326-4400 (Voice)
(800) 425-5454 (Toll Free)

Olney

(618) 395-8461 (Voice)
(888) 841-3232 (Toll Free)

Peoria

(309) 693-5350 (Voice)
(800) 382-8569 (Toll Free)

Rockford

(815) 987-7571 (Voice)
(800) 651-9319 (Toll Free)

St. Clair

(618) 624-0508 (Voice)
(800) 842-7204 (Toll Free)

Springfield

(217) 524-2000 (Voice)
(800) 946-8468 (Toll Free)

For detailed reimbursement rates for individual medical services, contact our Claims Service Department:

(877) 791-5170 (Toll Free)
(217) 558-0773 (Fax)

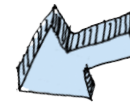
Submit Provider Billings to:

Attn: Claims Services Unit
3135 Old Jacksonville Rd.
Springfield, IL 62704-6488

Provider Portal Website

You can view and print Explanation of Provider Payments, including payment and denial information. After registering to use the website, you will have the option to access and print current and/or historical claim information on demand. To register for the provider portal go to dsc.uic.edu.

For Providers
How We Help Providers
Provider Application
Reimbursement Information
Explanation of Provider Payments
Provider Forms
Home Care Information and Resources
Tools & Resources
Provider Portal
Refer A Family



If you have any questions or problems registering to use the website, please contact DSCC at (800) 322-3722.

Visit our Website at:

dsc.uic.edu



[Facebook.com/dsc.uic.edu](https://www.facebook.com/dsc.uic.edu)

UIC SPECIALIZED CARE FOR CHILDREN

Medical Benefit Plan and Billing Guidelines for Providers



The University of Illinois at Chicago's Division of Specialized Care for Children (DSCC) supports medical services and supplies arranged and prior approved for eligible children, in accordance with DSCC's Administrative Rules and Policies.

The following DSCC Benefit Plan offers examples of the medical services we cover, but it's not all-inclusive. Call if you have questions.

BENEFIT PLAN

Hospital Services

- Inpatient Care and Services (room, board & ancillary care)
- Outpatient Care (23-hour observation care, surgery & ER)

Durable Medical Equipment and Medical Supplies

- Medical Equipment (orthotics, prosthetics, & specialized equipment)
- Ramps/Lifts/Chairs
- Disposable Medical Supplies
- Hearing Aids (maximum dollar per hearing aid)
- Hearing Aid Supplies
- Eyeglasses and Frames

DSCC pays up to the contractual amount or the provider's quoted amount, whichever is less.

Physician Services

- Office and Clinic Visits
- Hospital Visits
- Surgery
- Anesthesia Services
- Dental

Services must be part of the treatment plan for an eligible condition or needed to support the treatment plan.

Other Services

- Laboratory and Radiology Services
- Physical, Speech & Occupational Therapy
- Prescription Drugs
- Orthodontics
- Nutrition Services

BILLING GUIDELINES

DSCC's reimbursement rates are reviewed annually based on regional and national fee surveys, and Resource Based Relative Value Schedule (RBRVS) data. DSCC pays a maximum dollar benefit per year for approved medical services.

All Providers

- Billings for all services and supplies are submitted with dates of service and appropriate ICD-10 diagnostic codes.
- In addition, Current Procedural Terminology (CPT) codes, HCPCS National Level II codes, American Dental Association (ADA) codes, or National Drug Codes (NDC) are required on billings for respective services.
- Billings for approved services are submitted on a standard CMS 1500, UB04, or other approved billing form.
- Billings for approved services must be received by DSCC no later than 18 months from service date.
- Payments for children with insurance benefits will not be made until insurance has paid or rejected the charge(s). An Explanation of Benefits (EOB) must accompany the provider's bill.
- Health care providers that accept a Prior Approval or payment to provide medical services, equipment or supplies from Specialized Care for Children must agree not to seek further payment from the child or child's family beyond the amounts available from third party payers and/or DSCC.

Hospital Services

Charges for inpatient services are submitted on the UB04 billing form. An itemized statement, including CPT codes, must accompany the hospital's UB04 billing form for all outpatient services.

Anesthesia Services

Charges for anesthesia are billed using CPT surgical procedure codes or 5-digit anesthesia procedure codes.



Durable Medical Equipment and Medical Supplies

An itemized statement is submitted identifying the HCPCS National Level II codes in addition to the quantities provided.

Therapy Services

Charges for physical, speech and occupational therapy services are billed using CPT codes.

Prescription Drugs

The NDC number, prescription (RX) number, quantity and name of individual with prescriptive authority, including their Drug Enforcement Administration (DEA) number.