





---

SECTION 150

**STD SCREENING CLINIC SERVICES**

Effective 12-23-09

---

supervision if required, may provide STD Screening Clinic Services within the scope of that license.

150.06-2 Member Records

There shall be a clinical record for each member which shall include, but not necessarily be limited to:

- A. The member's name, address, date of birth and MaineCare ID number;
- B. The member's medical and social history, including immunization records, as appropriate;
- C. Findings from a physical exam, as appropriate;
- D. Tests ordered, performed and the test results;
- E. Treatment, counseling, or follow-up care including date provided;
- F. Dates scheduled for follow-up appointments;
- G. Medications and/or supplies dispensed or prescribed;
- H. Recommendations for and referral to other sources of care;
- I. Progress notes identifying services provided.

Entries are required for each date of service billed and must include the name, title and signature of the service provider.

150.06-3 Program Integrity

See Chapter I of the MaineCare Benefits Manual.

150.07 **REIMBURSEMENT**

In accordance with Chapter I of the MaineCare Benefits Manual, it is the responsibility of the provider to seek payment from any other source that is available for payment of the rendered service prior to billing MaineCare.

The maximum amount of payment of services rendered shall be the lowest of the following:

- A. The provider's usual and customary charge.
- B. The amount listed in the MaineCare Benefits Manual, Section 150, Chapter III, "Allowances for STD Clinic Services."
- C. The amount allowed by Medicare Part B, when the service is covered.

150.08 **BILLING INSTRUCTIONS**

Billing must be accomplished in accordance with the Department's billing requirements,"Billing Instructions for CMS 1500 Claim Form" located on the following website:  
[http://www.maine.gov/dhhs/oms/providerfiles/billing\\_instructions.html](http://www.maine.gov/dhhs/oms/providerfiles/billing_instructions.html).