

Checklist for Child Medical Evaluation (CME) Reporting

Upon an allegation of child abuse / neglect, child welfare/county department of social services may request a CME as a part of the assessment/investigative process. A CME is a specific outpatient medical consultation performed by a qualified medical expert (MD, NP or PA) rostered with the NC Child Medical Evaluation Program. The purpose of the CME is to assist with determining the most appropriate medical diagnoses and treatment plan for a child when it is suspected that a child is being abused or neglected by a parent or other caretaker.

Date of Service: _____

Child's name: _____

DSS Case Number (SIS or Common Name Data Service (CNDS)):

Claim Type: Medicaid as Primary Insurance: Yes No:

Medicaid Identification Number (MID) (If child has Medicaid): _____

Prepaid Health Plan (PHP): _____

Complete the following if Medicaid is the Primary Insurance:

By submitting this claim into NC Tracks, I certify that all **components of the bundled service** (including, the reason for referral, an interview with DSS worker, an interview from the non-offending caregiver, a physical exam of the child, any related phone calls, a review of outside medical records, recommendations and treatment plan for the child and family, and an impression and summary of concerns, if applicable. An interview with the child, if the child is greater than 3 years of age, if appropriate. Laboratory testing and radiology studies may be required, if applicable.) **for CME reporting have been completed** for the above-named beneficiary. I have verified that on this date of service the beneficiary is covered by **Medicaid only**.

Child Medical Evaluation Program (CMEP) Provider National Provider Identifier (NPI): _____

Providers Printed Name: _____

Providers Signature: _____

Questions regarding claims should be submitted to (please provide address/email): _____

CMEP Staff Verification performed by Print Name: _____

CMEP Staff Signature: _____