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Rhode Island Medicaid Program

# PROVIDER *update*

Volume 309

October, 2018

## *THIS MONTH'S FEATURED ARTICLES*

**Attention:**

***Dental Providers***

***Information regarding  
scaling and root  
planing on Page 7***

***See page 9***

**Important Update**

Ordering, Prescribing,  
Referring (OPR) Provider

***See page 11***

***Billing Administration  
for  
Flu Vaccinations***





For quick access  
to an article, click  
on the title.

**RI Medicaid  
Customer Service  
Help Desk for  
Providers**

Available Monday—Friday  
8:00 AM-5:00 PM  
(401) 784-8100  
for local and  
long distance calls  
(800) 964-6211  
for in-state toll calls



**Rhode Island Medicaid Program**

# PROVIDERupdate

*October, 2018 Volume 309*

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## Eligibility Search on the Healthcare Portal

### Healthcare Portal Eligibility Search

The Executive Office of Health and Human Services has made modifications to the eligibility function on the Healthcare Portal. The eligibility function will now display 2 months of prospective eligibility on the HC portal.

The Effective To date cannot be more than 2 months into the future. For formatting purposes, please review the example of dates displayed below.

Date range may be 12 months prior to today through the end of the current date, with a maximum 3-month date span.

\*Effective From Date<sup>9</sup>

06/11/2018



Effective To Date<sup>9</sup>

08/11/2018



Eligibility must still be checked on the date the service is provided.

### Disclaimer

Provider understands the prospective eligibility date is not a guarantee of future eligibility. Also, the prospective eligibility, does not guarantee payment for services. Eligibility must be rechecked on the date of service.

## Patient Share on the Healthcare Portal

The Health Care Portal is used to access business actions with RI Medicaid such as verifying eligibility, accessing RA, checking claims, prior authorizations and is now also available to view patient share (cost of care).

From the user's home page, you will have access to Patient Share in the orange bar across the top of the page if you already had access to Eligibility and Claims Search.

To begin the search the user must enter the member's ID, Start Date and End Date. Then choose the Share Type (Assisted Living, Home Care, Nursing Home, Hospice, Pace, Shared Living) from the drop down list. The date range may be 12 months prior to today and up to 2 months in the future, with a maximum of a 3 month date span.

Home Care members can receive services from more than one provider for the same period of time. The single home care value displayed on the web is the amount for that period of time and is not specific to a provider.

## All Providers

If you use email to contact individuals at DXC Technology, please note that the old @hpe.com extension will not forward to your intended contact's email box after September 30, 2018.

Please begin using the person's DXC email address by replacing @hpe.com with @dxc.com as soon as possible.



## Healthcare Portal Reference Guides

If you are a new to Rhode Island Medicaid and need assistance enrolling as a Trading Partner for the Healthcare Portal then check out [Self Paced Users Guides](#) on the EOHHS website.

If you are you a new or current user that needs assistance navigating the Healthcare Portal then check out the [Quick Reference Guides](#) on the EOHHS website.



## Managing your Trading Partner ID

### Transfer of Trading Partner/Master User Privileges for the Health Care Portal

If your Trading Partner Administrator is preparing to leave their current role of managing the HC Portal the Master User can complete a One Time Transfer of their privileges to the Health Care Portal by taking the following steps.

- Login to the portal select "Profile" on the home page and update the email on file to the **new email user's** address.
- Update the answers to the current security questions to be generic answers. Ex; Apple, baseball, etc.
- Change the password to a generic password (passwords can only be updated once a day). Ex; Pass2018
- Give the new questions with generic answers to the new Admin.
- The new Admin/User can now login with the above information and update to reflect their personal information.

## RI Medicaid EHR Incentive Program Update

### Start Submitting 2018 Applications

Our MAPIR system is now available to accept 2018 EHR Incentive applications. Our MAPIR system was upgraded to version 6.1 which allows providers to attest to meaningful use in accordance to the 2018 program rules approved by CMS earlier this year.

Please take note regarding your 2018 attestation. If you are attesting for providers who are in program years 3-6, they will be required to attest their CQM measures for a full-year while the meaningful use objective attestation is for any 90-day period in 2018. Therefore, you will need to wait until the year is finished before you can attest for program year 3-6 applications. On the other hand, if you need to attest for a program year 2 application, that is attesting to meaningful use for the first time, you can now submit these applications and attest both meaningful use and CQM data for 90-days.

In either case providers can attest to Stage 2 or 3 meaningful use objectives and feel free to click [here](#) to learn more about the meaningful use reporting requirements. In addition, you can click [here](#) to understand 2018 CQM reporting requirements. We recognize that each year has some new differences, so please feel free contact us with any questions you may have at [ohhs.ehrincentive@ohhs.ri.gov](mailto:ohhs.ehrincentive@ohhs.ri.gov).



### *Attending Provider Requirement*

#### **Attending Providers-Hospice, Inpatient, Nursing Home, Outpatient, Professional and Home Health**

The Rhode Island Medicaid program would like to remind providers that the Attending Provider field on claims is a required field. Any attending provider listed on a claim must be enrolled/registered with RI Medicaid.

Hospice, Inpatient, Nursing Home, Outpatient, Professional and Home Health providers are required to submit with an attending provider on all claims.

**RI Medicaid will begin editing claims for attending provider information in October 2018. The exact date is still to be determined. After the confirmed date, claims submitted without an attending provider or with a provider not enrolled/registered with RI Medicaid will deny.**

Manual (paper) claim form instructions for placement of the attending provider information can be found [here](#) on the EOHHS website. Attending provider loop and segment information for X12 transactions can be found [here](#).

If you have questions please contact customer service at 401-784-8100 and for in-state toll calls, 800-964-6211.

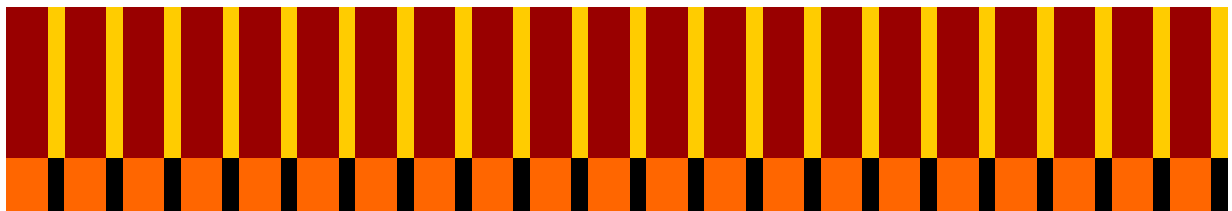
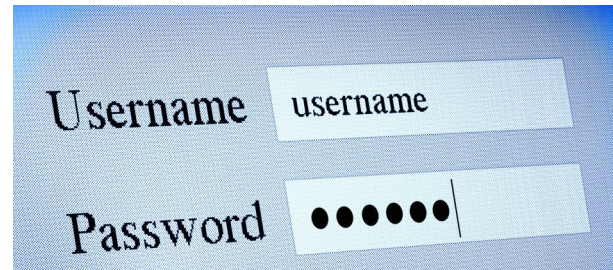
## Provider Electronic Solutions Software (PES) Users

Are you ready to do your Medicaid billing but have forgotten your password to the PES billing software?

Have you entered your password too many times?

During these times, when you don't know your password to access the PES software, the Provider Representative Team can provide you with a temporary password.

Instructions for resetting your [PES password](#) can be found on the EOHHS website.



## All Provider Electronic Solutions Software (PES) Users

We are presently running PES version 2.10. There are two ways you can check which version you are on:



- Upon logging in to the software the current version will be displayed.
- Once you have logged in to the software select "Help" and "About" from across the top toolbar and the current version will be displayed

Please remember upgrades must be done in sequential order, or risk corruption of your database. Providers can retrieve Upgrades from the [EOHHS website](#).

If you should need assistance with your upgrade, please email [RI EDI Services](#).

## Attention: Dental Providers

Providers have requested additional information regarding scaling and root planing and the following notes are provided:

D4346, scaling in the presence of generalized moderate or severe gingival inflammation-full mouth, after oral evaluation, is indicated when there is radiographic/photographic calculus, and generally pockets are 5 mm or less.

D4341: requires periodontal charting indicating abnormal pocket depths in multiple sites, and at least one of the following is present:

- Radiographic evidence of **root surface** calculus; or
- Radiographic evidence of noticeable loss of bone support

Documentation needed for procedures:

Radiographs-full mouth series radiographs taken within the last 4 years in addition to more recent radiographs. Bite-wing radiographs alone are not adequate for review.

Complete periodontal charting with six-point probing. Periodontal Screening and Recording (PSR) is not to be used instead of a full-mouth charting.

Periodontal diagnosis

Please be advised that scaling and root planing should be reserved for situations where it will have significant impact and where a conventional prophylaxis, using a cavitron or other sonic scaler thoroughly in a subgingival fashion, is unlikely to provide significant impact. It is expected that conventional prophylaxis involve some subgingival scaling with either scalers or cavitron or other sonic scaler. Hard or difficult cleanings should not be submitted as scaling and root planing.

Services will likely be approved in cases of vertical, infrabony defects, in which it is anticipated that improvement will result. Cases are more likely to be approved when the etiologic factor is mineralized deposits as opposed to pocketing due to factors not associated with deposits, for example, tilted teeth (pseudopockets) or poorly contoured restorations.

Teeth must have a good prognosis and be part of an overall treatment plan with predictable prognosis.

Providers may perform a conventional prophylaxis while waiting for authorization. Expectation is that two quadrants should be performed at each visit.

# DENTAL CARE



## Happy Halloween!







# October is National Breast Cancer Awareness Month



## What Is Beyond The Shock?

*Beyond The Shock* is a free, comprehensive, online guide to understanding breast cancer. It is a resource for women who have been diagnosed with breast cancer, a place for loved ones to gain a better understanding of the disease, and a tool for doctors to share information.

**For more breast cancer resources,  
visit <https://www.nationalbreastcancer.org>.**





## Pharmacy Spotlight

### Meeting Schedule:

#### Pharmacy and Therapeutics Committee

#### Drug Utilization Review Board



The next meeting of the  
Pharmacy & Therapeutics Committee (P&T)  
is scheduled for:

**Date:** December 11, 2018

**Registration:** 7:30 AM

**Meeting:** 8:00 AM

**Location:** DXC Technology

301 Metro Center Blvd.,  
Suite 203

Warwick, RI 02886

[Click here for agenda](#)

The next meeting of the  
Drug Utilization Review (DUR) Board  
is scheduled for:

**Date:** December 11, 2018

**Meeting:** 10:30 AM

**Location:** DXC Technology

301 Metro Center Blvd.,  
Suite 203

Warwick, RI 02886

[Click here for agenda](#)

#### 2019 Meeting Dates:

April 9, 2019

June 3, 2019

September 10, 2019

December 17, 2019



#### Important Update - Ordering, **Prescribing**, Referring (OPR) Provider

##### What is happening?

RI Fee for Service (FFS) Medicaid began requiring that this information be submitted on affected claims on October 1, 2015, to ensure all orders, **prescriptions** or referral for items or services for Medicaid beneficiaries originate from appropriately licensed practitioners who have not been excluded from Medicare or Medicaid. It is the responsibility of the RI FFS Medicaid provider rendering the service to obtain the NPI of the Ordering, **Prescribing**, and Referring Provider (OPR) and confirm that the OPR provider is enrolled in the RI FFS Medicaid Program.

Effective Monday, October 1<sup>st</sup>, 2018 pharmacy claims will deny if the **prescriber** is not enrolled with RI Medicaid.

##### Why is this happening?

The Affordable Care Act (ACA) regulation at 42 CFR 455.410 requires ordering, **prescribing** or referring providers be enrolled in the Medicaid Program. The OPR requirement is for both the following scenarios:

- The claim is primary to RI FFS Medicaid.
- The claim is secondary to RI FFS Medicaid.

##### What message will the pharmacy receive if the provider is not enrolled?

The claim will deny stating "Prescribing Provider Ineligible on Date of Service".

##### Where can a prescriber enroll?

Providers interested in enrolling as a "billing" provider or an "OPR (non-billing)" provider can follow this link:

<https://www.riproviderportal.org> to complete the online process. A digital signature is required. User guides for both types of enrollment, "billing" or "OPR (non-billing)" are available through the same link.

##### Where can I look to see if a prescriber is enrolled?

There is a search function on the EOHHS website at

<http://www.eohhs.ri.gov/Consumer/ProviderSearch.aspx>.

##### What options are there for prescribers?

If you are a prescriber, check your enrollment status. If you are currently enrolled as a RI FFS Medicaid Provider, you are all set! If you are not enrolled, you can:

- Enroll as a "billing" provider.
  - Providers that submit claims for services rendered.
  - Providers are then eligible for reimbursement from RI FFS Medicaid.
- Enroll as an "ordering, **prescribing** or referring" provider
  - Providers are not eligible for RI FFS Medicaid reimbursement.
  - Providers can "order, **prescribe** or refer" services.
  - Limited information is required for enrolling as an "OPR" provider

##### Questions?

Please contact the Medicaid FFS Provider Customer Service Help Desk at 401-784-8100.

## Preferred Drug List (PDL) Updates

The following are two new classes of drugs managed on the Preferred Drug List (PDL) effective October 2018.

<b><u>Otic Anti-Infectives &amp; Anesthetics</u></b> <b><u>Preferred</u></b> acetic acid <b><u>Non-Preferred</u></b> acetic acid HC	<b><u>Otic, Anti-Inflammatories</u></b> <b><u>Preferred</u></b> Dermotic <b><u>Non-Preferred</u></b> fluocinolone 0.01% oil
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The following drugs changed status on the RI Medicaid Fee-for-Service Preferred Drug List (PDL) effective October 2018.

<b><u>Bladder Relaxant Preparations</u></b> <b><u>Non-Preferred</u></b> Enablex	<b><u>Ophthalmics, Anti-Inflammatories</u></b> <b><u>Non-Preferred</u></b> prednisolone acetate
<b><u>Stimulants and Related Agents</u></b> <b><u>Non-Preferred</u></b> Procentra	

<http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/Pharmacy.aspx>



### *Attention: RI Medicaid Drug Prior Authorization Forms*

The RI Medicaid prior authorization (PA) program includes a Preferred Drug List (PDL) where Non-Preferred agents require a PA. Please be sure to use the [Prior Authorization for a Non-Preferred Drug](#) form not the General PA Form when requesting a Non-Preferred agent. There are also other drugs or classes of drugs that require clinical PAs. Some drugs have a specific PA form with unique criteria relevant to that drug.

To ensure a quick turnaround time for your PA request please check the list of forms and select the form most appropriate for the drug you are requesting. Using the correct form first, means you will not have to waste your time doing it a second time and delay needed medication for a patient.

Forms for prior authorization approval are available at the [EOHHS Website](#)



### **Need information about tobacco cessation?**

The Tobacco Cessation Medicaid Benefits Matrix is now available at the [Department of Health](#).

## Attention: Professional Providers:

### Billing Administration Codes for Vaccines

RI Medicaid does not reimburse for state supplied vaccines. RI Medicaid will reimburse for the administration of the vaccines.



#### Procedure

90460	Immunization administration through 18 years via any route, with counseling by physician
90461	Immunization administration through 18 years via any route, each additional vaccine

#### Codes

Vaccines with multiple components are considered as one unit. For example, procedure code 90696 (DTap, Tetanus, Acellular Pertussis, Polio) has four components; However it is considered as one unit and will be reimbursed as one unit.

If multiple vaccines are given, RI Medicaid will reimburse multiple administrations. For example: procedure codes 90748 (Hepatitis B), 90680 (Rotavirus vaccine), and 90670 (Pneumococcal Vaccine) are single components and can be reimbursed using one unit of procedure code 90460 for the first injection and procedure code 90461 for any subsequent injections. (Please note: An administration code is allowed for every injection performed.) These claims must be sent for review on the CMS1500 paper form to :

DXC Technology  
Attention: Karen Murphy  
P.O. Box 2010  
Warwick, RI 02887

If you have any questions, please contact Karen Murphy at 401-784-8004  
or by email: [karen.murphy3@dx.com](mailto:karen.murphy3@dx.com)

### The Flu Season

While seasonal influenza (flu) viruses are detected year-round in the United States, flu viruses are most common during the fall and winter. The exact timing and duration of flu seasons can vary, but influenza activity often begins to increase in October. Most of the time flu activity peaks between December and February, although activity can last as late as May.

## IMPORTANT INFORMATION ABOUT NEIGHBORHOOD UNITY/RHODY HEALTH OPTIONS



The **Neighborhood UNITY/Rhody Health Options program** for adults with Medicare and Medicaid and Medicaid-only coverage will be ending on September 30, 2018. Approximately 11,000 beneficiaries enrolled in Neighborhood UNITY administered by Neighborhood Health Plan of Rhode Island will be enrolled in Medicaid Fee-For-Service (FFS) effective October 1, 2018 for their Long-Term Services and Supports benefits and other Medicaid covered services.

Please note:

- The Neighborhood INTEGRITY program will not change.
- Medicare Part A, Part B, and Part D covered services will not change.

Medicaid funded services, such as long-term services and supports (home care, assisted living, Meals on Wheels) and adult day services, behavioral health services and Durable Medical Equipment, will be reimbursed under Medicaid Fee-for-Service (FFS) for dates of service beginning October 1, 2018.

### Continuity of Care Period

To ensure continuity of care, most Medicaid funded services for Neighborhood UNITY members authorized by Neighborhood Health Plan of Rhode Island will be covered in Medicaid FFS from October 1, 2018 – June 30, 2019.

### Provider Credentialing

If you are currently providing services to Neighborhood UNITY beneficiaries and you are not currently credentialed with RI Medicaid, please complete the enrollment process. Information on the enrollment process can be found here: <http://www.eohhs.ri.gov/ProvidersPartners/ProviderEnrollment.aspx>

**FOR MORE INFORMATION**, please call the RI Medicaid Provider Call Center at 401-784-8100.

We've established a dedicated Call Center for consumer calls:

**RHO Transition Call Center, 1-844-749-8323, Monday – Friday, 8:00 am – 6:00 pm.**

For urgent requests or problems, the Call Center can expedite information to EOHHS for resolution. Neighborhood UNITY members received information in the mail in August and September about this change.

For more information, please see the EOHHS website:

<http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/RHOTransition.aspx>

<http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/RHOTransition/ProviderInformation.aspx>

<http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/RHOTransition/MemberLettersFAQs.aspx>

## Continuing Education Opportunities for Health Professionals

The following programs are made possible with funding by the RI Medicaid Health System Transformation Project.

\*\*\*\*\*

### URI Continuing Education Conference

#### ***Building a Culture of Health: Tackling Key Social Determinants to Promote Wellness in RI***

From income and education to neighborhood and social bias, social determinants of health impact patients every day. Participants in this interprofessional continuing education program, sponsored by the URI Academic Health Collaborative, will be able to identify the key social determinants that impact patient health in Rhode Island, learn how these factors play a role across health care fields, and explain how a health assessment tool can be used to improve clinical outcomes and patient and staff satisfaction.

The conference will feature a keynote presentation by Dr. Susan Hassmilller, Senior Adviser for Nursing, Robert Wood Johnson Foundation. Participants will have the opportunity to observe, participate and debrief a live patient simulation.

**Monday, November 5, 2018**  
**8:30 AM - 4:00 PM**  
**Crowne Plaza Hotel, Warwick, RI**

**Continuing Education Credits:** 6.0 Contact Hours (0.6 CEUs) for dietitians, dentists, nurses, pharmacists, physicians, physician assistants, psychologists, social workers, speech language pathologists.

**Cost:** \$25 includes CE credit, lunch, breaks, parking and access to social determinants health assessment tool.

For more information and to register, [click here](#).

\*\*\*\*\*

### CCRI Continuing Education Conference

#### ***Non-Opioid Pain Treatment Symposium*** **Sunday, October 28 • 1:00 - 4:00 PM** **Community College of Rhode Island - Warwick**

This continuing education symposium will feature a panel of experts who will discuss non-opioid therapies for chronic pain based upon evidence-based practice, including clinical massage therapy, acupuncture, physical therapy, occupational therapy, chiropractic care, naturopathic medicine, and cognitive behavioral therapy. For more information, [click here](#).

## Continuing Education Opportunities for Health Professionals (continued)

### *Workforce Planning for a Rapidly Changing Health Care System*

**Tuesday, October 23 · 1 - 2 PM**

Erin P. Fraher, PhD, MPP, Assistant Professor in the Department of Family Medicine at UNC-Chapel Hill, will discuss why a shift from “old school” to “new school” thinking is needed as RI moves from planning to implementing its health care workforce transformation.

This webinar will demonstrate that the efforts are not just about transforming the workforce — and will shed light on the need to redesign education, practice, payment and regulatory structures that support the workforce.

To register or to view previous webinars, [click here](#).



## Home Health Care

### Skilled Nursing Services

Skilled nursing services are reimbursable by the Medicaid Program for up to 2 occurrences per day when they are related to the care of a member who is experiencing acute or chronic periods of illness and if those services are:

- Ordered by a physician and are included in a plan of treatment established for the patient
- Required on an intermittent bases
- Reasonable and necessary for the treatment of an illness or injury

### Physical, Occupational and Speech Therapy Services

All therapy services must be prescribed by a physician and speech therapy performed by a licensed therapist. Therapy service must be services directly related to an active plan of care designed by the prescribing physician and of such a level of complexity and sophistication that the judgement, knowledge and skills of a qualified therapist are required. All therapies must be medically necessary under accepted standards of medical practice to the treatment of the patient's condition.