Rhode Island Medicaid Program

Provider Update

Volume 331   **August 2020**

THIS MONTH'S FEATURED ARTICLES

Please Note!

State offices and DXC will be closed Monday August 10, 2020 in observance of Victory Day.

SUBSCRIBE

To Subscribe or update your email address Send an email to: riproviderservices@dxc.com or click the subscribe button above.

Please put "Subscribe" in the subject line of your email.

In addition to the *Provider Update,* you will also receive any updates that relate to the services you provide.

Provider Update

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

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<u>Attention All Providers</u>

CMS Has Extended the Medicaid and CHIP Provider Relief Fund Deadline to August 3

The U.S. Department of Health and Human Services (HHS), announced that it is extending the Medicaid and CHIP Provider Relief Fund distribution provider application **deadline to apply to August 3, 2020.**

In June, HHS announced the opening of the application period and plans to distribute approximately $15 billion to eligible providers that participate in state Medicaid and CHIP programs who had not yet received a payment from the $50 billion General Distribution.

Provider Relief funds can help cover expenses and loss revenue related to COVID-19. If you have not done so, please make every effort to apply. For eligibility requirements and explanation of the application process please see the attached fact sheet. Additional information can also be found at HHS - CARES Act Provider Relief Fund.

If you have attempted to apply and had difficulties with the portal functionality, be aware the issues have been resolved.

Thank you for all that you are doing for Rhode Island Medicaid beneficiaries.

Attention Clearing Houses, Billing Agencies, and Providers

A Reminder on How to Manage your Covered Providers:

ERA Received by Clearinghouse/Vendors

Providers who have moved their business to a new clearinghouse/vendor will need to contact the original clearinghouse/vendor to be removed as a covered provider before the new enrollment can be completed. The provider must contact the existing clearinghouse/vendor and ask them to remove their association.

The original clearinghouse/vendor should log into the Healthcare Portal. Under the Covered Provider section of the Trading Partner Profile screen, access the details for a specific provider by either   clicking Display Covered Providers, which will   display all, or search for a specific provider using the Provider ID and ID Type.

Select the plus sign (+) next to the NPI of the specific provider. Uncheck the boxes for the 835 and 277 and select the save button.

Once this is completed, the new clearinghouse/vendor may complete the process to add the covered provider and select the 835/277 transactions. They will then complete the ERA enrollment form.

Note: To ensure continuous receipt of the 837/277U, the new billing entity must add the provider as a covered provider and complete the ERA enrollment form before the cut-off date of the financial cycle.

Medicaid Guidelines for ADA Code D9410

D9410* House call / Extended Care Facility Call

Includes nursing home visits, long-term care facilities, hospice sites, institutions, etc. Report in addition to reporting appropriate procedure codes for actual services performed.

*The D9410-House/Extended Care Facility Call procedure code must be billed with a reimbursable Medicaid service and cannot be billed alone.

Mobile services provided by fee-for–service providers to nursing home residents may only be reimbursed for one visit per day, per facility, per provider. Providers may not bill the D9410-House/ Extended Care Facility Call for each recipient seen during a single nursing home visit even when a reimbursable Medicaid Service is being rendered to multiple recipients.

For each nursing home visit, please add the D9410 to ONE claim being billed for a reimbursable service. Mobile dental providers who bill fee-for–service cannot bill the D9410 for nursing home visits related to procedures whose payment is considered all-inclusive (i.e. impressions, try-in, adjustments, related to the fabrication of dentures.)

Attention All Trading Partners, PES Users, and Automated Script Users

X12 Transaction Testing has been Completed

Trading Partners were requested to test the new translator system by uploading 837 files and reviewing the acknowledgment reports. Phase II testing was completed last month.

We anticipate the new translator system to be implemented mid to late August.

If you're a Script User, here is the link for the Standard Companion Guide Web Interface. Please make sure to insert the production link to your script. Also, please look for email blast for exact date of implementation.

If you're a PES software user, please remember to review your acknowledgment reports for rejected claims. Due to expected high volume of submissions, there could be a delay in those re-ports. If you do not see the acknowledgment reports after one hour from submission, please email riediservices@dxc.com or your provider rep. Make sure to include your trading partner ID and file tracking number.

As we approach the mid to late August timeline, we will send out an email blast confirming our implementation.

If you should have any concerns or questions, do not hesitate to email riediservices@dxc.com.
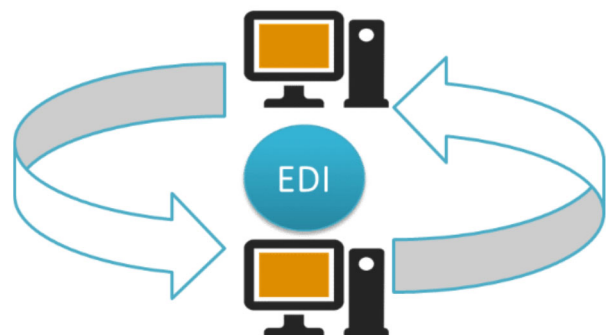
FYI:

The application fee
to enroll as a Medicaid provider is $595.00
as of January 1, 2020.

However, please note that all enrollment
application fees are waived during the Covid-19
Health Crisis

*See more information regarding providers
who may be subject to application fees here.*

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: September 15, 2020
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: September 15, 2020
Meeting: 10:30 AM
Location: DXC Technology
301 Metro Center Blvd., Suite 203
Warwick, RI 02886

Click here for agenda

2020 Meeting Dates:
September 15, 2020
December 15, 2020

To view the Preferred Drug List (PDL), please check the RI EOHHS Website:

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

Pharmacy Spotlight cont.

Drug Utilization Review (DUR) Alerts and Override Codes

Effective June 2020 RI FFS Medicaid has added the following drug/drug combinations to the DUR Alert edit.

- **Opioids (Extended Release)/Benzodiazepine**
- **Opioids (Immediate Release)/Benzodiazepine**
- **Opioids (Extended Release)/Antipsychotic**
- **SLT Opioids (Immediate Release)/Antipsychotic**

Please continue to follow the procedure below to override DUR Alerts when necessary.

Early Refill (ER), Therapeutic Duplication (TD) and Drug-Drug Interaction (DD) Alerts

If a claim for a refill is submitted before 85% of the prior prescription is used that claim will deny. If a claim is for a drug within therapeutic duplication alert categories that claim will deny.

If a claim is submitted for a recipient whose claim history includes an interacting drug and the date of service of the current claim is within the interaction time of the earlier drug, the claim will deny.

To override these denials, the pharmacist submitting a claim through POS must initiate a DUR Alert Override using valid intervention and outcome response codes. The ER override code cannot be used for a vacation fill.

Valid intervention and outcome codes must be entered in order for the claim to be paid. These codes are selected based on the pharmacist's professional judgment and assessment, and may involve contacting the prescriber to obtain more information before a code is used.

Reason For Service Code (Alerts)	Result of Service Code (Outcome)	Professional Service Code (Interventions)
DD = Drug-Drug Interaction ER = Early Refill TD = Therapeutic Duplication	1C = Filled, With Different Dose 1D = Filled, with Different Directions 1E = Filled, With Different Drug 1G = Filled, With Prescriber Approval 3C = Discontinued Drug 3D = Regimen Changed 3E = Therapy Changed 3H = Follow-up/ Report	M0 = Prescriber consulted MR = Medication review PH = Patient medication history PM = Patient monitoring P0 = Patient consulted

f no code has been entered, or if an invalid outcome and intervention code is used, the claims will remain denied and no payment will be made.

Please note: Those wishing to override an alert must do so within 3 days of receipt of the denial. Providers trying to over-ride an alert beyond the 3 day time period will receive a message of "no corresponding claim; please resubmit".

Please Note: The correct code for a lost or stolen prescription is 3H

Pharmacy Spotlight cont.— Preferred Drug List

The following are three new classes of drugs managed on the RI Medicaid Fee-for-Service Preferred Drug List (PDL) effective July 2020.

Glucagon Agents - Preferred	Glucagon Agents Non-Preferred	Potassium Binders Preferred	
Baqsimi	diazoxide suspension	Lokelma	
Glucagon	Glucagon emergency kit (Fresenius)	sodium polystyrene sulfonate	
Glucagon emergency kit (Lilly)	Gvoke Hypopen	**Non-Preferred**	
Proglycem suspension	Gvoke syringe	Veltassa	

HIV/AIDS Preferred			
Aptivus capsule	Evotaz	Norvir solution	fumarate
Aptivus solution	fosamprenavir calcium	Norvir tablet	Tivicay
atazanavir sulfate	Fuzeon	Odefsey	Triumeq
Atripla	Genvoya	Pifeltro	Trizivir
Biktarvy	Intelence	Prezcobix	Truvada
Cimduo	Invirase tablets	Prezista	Tybost
Combivir	Isentress HD	Prezista suspension	Videx solution
Complera	Isentress powder pack	Rescriptor	Viracept
Crixivan	Isentress tab chew	Reyataz capsule	Viramune suspension
Delstrigo	Juluca	Reyataz powder pack	Viramune XR
Descovy	Kaletra solution	ritonavir tablet	Viread powder
didanosine capsule	Kaletra tablet	Selzentry solution	Viread tablet
Dovato	lamivudine solution	Selzentry tablet	Ziagen solution
Edurant	lamivudine tablet	stavudine capsule	Ziagen tablet
efavirenz capsule	lamivudine-zidovudine	Stribild	zidovudine capsule
efavirenz tablet	Lexiva suspension	Sustiva capsule	zidovudine syrup
Emtriva capsule	Lexiva tablet	Sustiva tablet	zidovudine tablet
Emtriva solution	lopinavir-ritonavir solution	Symfi	
Epivir solution	nevirapine ER	Symfi Lo	**Non-Preferred**
Epivir tablet	nevirapine suspension	Symtuza	Trogarzo
	nevirapine tablet	Temxys	
	Norvir powder pack	tenofovir disoproxl	

The following drugs changed status on the RI Medicaid Fee-for-Service Preferred Drug List (PDL) effective July 2020.

Antimigraine Agents, Other Changed status to Preferred	Antimigraine, Triptans Changed status to Non-Preferred	Ulcerative Colitis Changed status to Preferred
Ajovy	Relpax	Lialda
Ajovy Autoinjector		Pentasa
Nurtec ODT		**Changed status to Non-Preferred**
Changed status to Non-Preferred		Apriso
Emgality Syringe 100 MG		mesalamine (Delzicol)
		mesalamine (AG) (Delzicol)
		mesalamine (Lialda)
		mesalamine (AG) (Lialda)
Bone Resorption Suppression and Related Agents **Changed status to Preferred**	**GI Motility, Chronic** **Changed status to Non-Preferred**	**Phosphate Binders** **Changed status to Preferred**
ibandronate	Lotronex	sevelamer carbonate tablet (AG) (Renagel)
		sevelamer carbonate tablet (Renagel)
		Changed status to Non-Preferred
		Renagel
		Renvela tablet
Hypoglycemics, Insulins, Short-Acting **Changed status to Preferred**	**Hypoglycemics, SGLT2** **Changed status to Preferred**	
Humalog cartridge	Invokamet	
Humalog Junior Kwikpen	Xigduo XR	
Humulin 70/30 pen		

To view the entire Preferred Drug List please check the Rhode Island EOHHS Website at:
http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/Pharmacy.aspx

Please Note!

Providers can access the Healthcare Portal directly, without going through the EOHHS website, by going to this address:

https://www.riproviderportal.org/HCP/Default.aspx?alias=www.riproviderportal.org/hcp/provider

Procedure Code X1000

Effective May 22, 2020, Medicaid is removing Procedure Code X1000 from its fee schedule. The code should no longer be used for billing. This COVID-related code was not approved for Federal match by CMS. Providers should continue to use traditional E&M codes for COVID telehealth.

Click here to view the **UPDATED** RI Medicaid memo
regarding telehealth and COVID-19.

NURSING HOMES,
ASSISTED LIVING, AND HOSPICE PROVIDERS

Payment Delivery for Interim Payments

Due to the ongoing COVID-19 State of Emergency, <u>Interim payments will continue to be automatically deposited into the bank account associated with your DXC MMIS account</u>.

This will alleviate the need for in-person visits to the DXC office.

The next system payment will be deposited into the bank account directly, in line with the financial calendar on August 14, 2020.

DXC will securely mail the member information to providers detailing which client and date of service the payment is for.

We will continue to communicate with providers on any changes.

Prior Authorization Requirements During Covid-19 Crisis

Prior Authorizations previously extended to July 31, 2020 will be extended through October 31, 2020 to allow additional time for services to be delivered. No action is required by providers. The changes have been applied systematically.

Also note that the Prior Authorization requirements are now waived for all services <u>except the following:</u>

- Pharmacy
- Hospice inpatient
- Orthodontic treatment
- Wheelchair and accessories
- Specialized supply
- Home modifications
- Private duty nursing
- Personal care services

All claims billed with the services above will still require prior authorization.

*_Prior authorization requests for manually priced DME items should continue to be submitted as usual. These include items that fall under codes such as A9999, E1399 and K0108._

Should you have questions please contact the Customer Service Help Desk at (401) 784-8100 for local and long-distance calls (800) 964-6211 for in-state toll calls.

COVID-19 Personal Protective Equipment Surcharges

EOHHS has received complaints and other communications from consumers concerning reopened practices charging patients fees for costs related to personal protective equipment (PPE) and the infection control recommendations from the CDC due to the COVID-19 public health emergency. EOHHS is sending this communication as an alert that such practices should not be occurring by providers for covered Medicaid services.

Rhode Island Medicaid balance-billing rules, and HMO balance billing prohibitions, and MCO contracts prohibit charging plan beneficiaries administrative fees or fees inherent in the delivery of covered services.

Providers need to be aware of the limitations placed by Medicaid, Medicare, HMOs, and Health Benefit Plans etc. on billing patients certain fees.

Provider practices should not be billing/collecting fees to increased costs associated from COVID (i.e. PPE surcharges). Unless otherwise stipulated, the Medicaid Program reimbursement is considered payment in full. The provider is not permitted to seek further payment from the beneficiary in excess of the Medicaid Program rate. This includes the billing of a beneficiary resulting from a denied claim for any reason other than eligibility. In general, beneficiaries of RI Medicaid cannot be billed for any covered service or missed appointment.

We strongly encourage MCOs to remind providers regarding charging Medicaid members additional fees related to covered services.

EVV Updates
Home Care and Personal Care agencies

The Electronic Visit Verification (EVV) soft launch for EOHHS commenced April 20, 2020. The soft launch gives providers and staff time to get used to the new system in real time. This time prepares us to be in compliance with federal law effective January 1, 2021. Please ensure that you have signed up for the appropriate training based on the system you will be using (Either a Third-Party Vendor or the Sandata SAMS system). Please visit the EOHHS EVV website for all updates and information related to EVV.
http://www.eohhs.ri.gov/ProvidersPartners/ElectronicVisitVerification(EVV).aspx

FOR PROVIDERS USING THE SANDATA SAMS SYSTEM (CLOSED SYSTEM):
Independent (Self-Paced) Web-Based Training: This online, self-paced training method allows participants to access online, role-specific training materials independently. The materials are available 24-hours a day, seven days a week for the life of the program. Independent Web-based Training is a great resource as a training refresher and for those that have already completed training and only need to complete the Sandata Mobile Connect (SMC) training.

Duration: Self-paced.

Participation: There is no limit on the number of agency employees that can participate in web-based training. Registration Link:
https://www.sandatalearn.com?KeyName=RIEOHHSEVV

FOR PROVIDERS USING A THIRD-PARTY OR ALTERNATE EVV SYSTEM (OPEN SYSTEM):
Agency providers may choose to use their own, third-party ("Alternate") EVV system. Agency providers may use an Alternate EVV system if they meet the business requirements and data collection specifications found in the following documents located on the RI-EOHHS EVV website:
http://www.eohhs.ri.gov/ProvidersPartners/ElectronicVisitVerification(EVV).aspx

If you plan to use an Alternate EVV system, please contact Sandata to initiate the certification process to link your current system to the RI-EOHHS Aggregator. The Sandata Alternate EVV support team can be reached by email at
RIAltEVV@sandata.com . Please note this email address is strictly for Alternate EVV inquiries. Additionally, initial contact with the Sandata Alternate EVV support team should be made by the providers and they should have their vendor contact information readily available, as it will be requested.

EVV Updates
Home Care and Personal Care agencies-cont.

In a follow-up to the April communication regarding an update to the Mobile Visit Verification (MVV) application, Rhode Island Executive Office of Health and Human Services (EOHHS) is pleased to announce that all providers who are currently using the MVV application have been upgraded to the Sandata Mobile Connect (SMC) application which is available on the Google Play or Apple Store.

All Electronic Visit Verification (EVV) service providers are encouraged to start transitioning their MVV users to the SMC application as soon as possible. Later this year, EOHHS will be adding new Client Verification functionality and Spanish translation for the Rhode Island program which will only be available on the SMC application. By September 1st, all providers who use the mobile app for visit data capture must use the SMC application to take ad-vantage of the benefits and avoid exceptions which will occur when Client Verification is not captured after a visit.

For more details on the new SMC app and the transition, please visit the EOHHS EVV webpage at: **http://www.eohhs.ri.gov/ProvidersPartners/ElectronicVisitVerification (EVV).aspx**

Hospice Providers

The below procedure codes for hospice services have been updated retro to 10/01/2019. Please begin billing at the new rates in order to be reimbursed at the higher rates for these procedure codes.

Description	Procedure Code	Effective 7/1/19-9/30/19	Effective 10/1/19
Continuous Home Care Per Hour	T2043	$50.40	$59.61
Inpatient Respite Per Day	T2044	$225.22	$483.02
General Inpatient Care	T2045	$920.81	$1044.78

All previously paid claims for these procedure codes with dates of service on and after 10/1/2019 will be reprocessed to pay at the updated rate.

You can expect to see the claims that are impacted by the mass adjustment on the 8/14/2020 remittance .

ATTENTION HOME CARE PROVIDERS

By August 10, 2020 existing members that are actively enrolled in the Preventive Community Services waiver will be transitioned to a new program name. The program will appear on the Health Care Portal as "Medicaid Preventive Services". The services that a member is eligible for today under Preventive Community Services will remain the same. The home care procedure codes and the base Medicaid allowed amount will remain as follows:

- S5125 U1 Combined Homemaker/Personal Care per 15 minutes $5.43

- S5130 Homemaker Service per 15 minutes $5.26

- T1001 Nursing Assessment/Evaluation $98.04

The same prior authorization that are needed today will still be required under the new program Medicaid Preventive Services. Existing clients *do not* need new prior authorizations.

If a Medicaid member is seeking preventive services, please reach out to Preventive@RIPIN.org for enrollment assistance. If you have questions about active members, please contact the DHS LTSS Unit at (401) 415-8455 or DHS.LTSS@dhs.ri.gov

DME Providers—Commode Guidelines

Effective 7-13-20 the commode guidelines have been streamlined to the following:

A commode is covered when medically necessary and ordered by a prescribing provider. Duplicate devices for multiple bathrooms are not covered.

Prior authorization requirements for codes E0170-E0171 have been removed.

State FY 2021
Claims Payment and Processing Schedule

SFY 2021 Financial Calendar

Month	LTC Claims due at Noon	EMC Claims due by 5:00 p.m.	EFT Payment
July		7/3/2020	7/10/2020
	7/9/2020	7/10/2020	7/17/2020
		7/24/2020	7/31/2020
August	8/6/2020	8/7/2020	8/14/2020
		8/21/2020	8/28/2020
September	9/3/2020	9/4/2020	9/11/2020
		9/18/2020	9/25/2020
October		10/2/2020	10/9/2020
	10/8/2020	10/9/2020	10/16/2020
		10/23/2020	10/30/2020
November		11/6/2020	11/13/2020
	11/12/2020	11/13/2020	11/20/2020
		11/27/2020	12/4/2020
December	12/10/2020	12/11/2020	12/18/2020
		12/24/2020	12/31/2020
January	1/7/2021	1/8/2021	1/15/2021
		1/22/2021	1/29/2021
February	2/4/2021	2/5/2021	2/12/2021
		2/19/2021	2/26/2021
March	3/4/2021	3/5/2021	3/12/2021
		3/19/2021	3/26/2021
April		4/2/2021	4/9/2021
	4/8/2021	4/9/2021	4/16/2021
		4/23/2021	4/30/2021
May	5/6/2021	5/7/2021	5/14/2021
		5/21/2021	5/28/2021
June	6/3/2021	6/4/2021	6/11/2021
		6/18/2021	6/25/2021
July		7/2/2021	7/9/2021
	7/8/2021	7/9/2021	7/16/2021
		7/23/2021	7/30/2021

View the SFY 2021 Payment and Processing Schedule on the EOHHS website
http://www.eohhs.ri.gov/ProvidersPartners/
Billingamp;Claims/PaymentandProcessingSchedule.aspx

Notable Dates in August

⇒ **August is Back to School Month**

⇒ **August is National Eye Exam Month**

⇒ **August is National Catfish Month**

⇒ **August is National Summer Sun Safety Month**

⇒ **Fri Aug 7—National Lighthouse Day**

⇒ **Wed Aug 19—World Humanitarian Day**