

Public Notice ND Medicaid Program

Most North Dakota Medicaid providers (listed below) will receive a four percent inflationary increase in reimbursement effective for dates of services July 1, 2013 as authorized and appropriated by the 2013 Legislative Assembly. The four percent inflationary increase is estimated to cost \$7.7 million for a 12-month period. Providers receiving the \$1 per hour wage/fee schedule increase will receive a three percent inflationary increase, which is estimated to cost \$11.3 million for a 12-month period.

Fee schedules for services are on the Department of Human Services web site at: <http://www.nd.gov/dhs/services/medicalserv/medicaid/provider-fee-schedules.html>

The following Medicaid providers/services are provided an inflationary increase.

- Home Health Services
- Chiropractic Services
- Providers of Services through the ND 1915(c) Medicaid Waivers
- Rehabilitative Services
- Personal Care Services (Community Services and Basic Care Facilities)
- Intermediate Care Facilities
- Durable Medical Equipment Suppliers
- Anesthesia
- Ambulance Services
- Clinic Services
- Targeted Case Management Services
- Rural Health Clinics and Federally Qualified Health Centers using an Alternate Payment Methodology
- Inpatient and Outpatient Hospital Services (PPS, Per Diem, and Long-Term Care)
- Psychiatric Residential Treatment Facilities
- Non-Emergency Medical Transportation
- Providers reimbursed from the Professional Services Fee Schedule
- Dental Services

In addition to the above inflationary increases, there will also be the following provider rate changes, effective on or after July 1, 2013:

An increase in the rate paid for Disease Management Services is estimated to cost approximately \$50,800 for the 12-month period.

An increase in the rate paid for the Program for All Inclusive Care of the Elderly (PACE) is estimated to cost \$.2 million for the 12-month period.

North Dakota Medicaid providers of services to individuals with Developmental Disabilities will receive rate enhancements, which includes those authorized and appropriated by the 2013 Legislative Assembly. The rate enhancements are estimated to cost \$4.4 million for a 12-month period. The rate enhancements are a result of six different funding targets identified by the Legislative Assembly to receive additional funding. The six areas are: (1) Children with Intense Medical Needs, (2) Children with

Challenging Behavioral Needs, (3) Children who are Severely Medically Fragile, (4) Individuals residing in Family Homes with Intense Medical Needs, (5) Individuals residing in Adult Residential settings with Intense Medical Needs, and (6) Providers who serve clients with Critical Needs.

In accordance with the requirements of the Affordable Care Act, the North Dakota Medicaid program will be submitting a state plan amendment to add hospice services for children as a covered service. This is estimated to cost approximately \$59,400 for a 12-month period.

The encounter rate for rural health clinics will be increased to the level paid by Medicare. This change is estimated to cost approximately \$1 million for a 12-month period.

Employees of long-term care providers will receive a \$1.00 per hour wage/fee increase. This includes staff of nursing homes, basic care facilities, intermediate care facilities and qualified service providers who provide care to individuals receiving personal care and Medicaid waiver services. This change is estimated to cost approximately \$26.8 million for a 12-month period.

A supplemental payment will be established for critical access hospitals; the estimated cost is \$.6 million for the 12-month period.

Rates for transportation providers will be increased. The estimated cost for a 12-month period is \$28,580. Also, North Dakota Medicaid will reimburse two base-rates for non-emergency transportation by wheelchair van and stretcher van. The estimated cost for a 12-month period is \$60,300.

North Dakota Medicaid is expecting to add two new dental codes for coverage. The codes are D0190 Screening of a patient and D0191 Assessment of a patient. The estimated cost to cover these codes for a 12-month period cannot be determined.

Effective on or after August 1, 2013 North Dakota Medicaid will pursue third-party payments from intended parents for Medicaid-eligible women who serve as a gestational carrier. The potential recovered costs are unknown.

Effective on or after August 1, 2013, ND Medicaid will be implementing the following editing into the claims processing payment system:

- Data Validation Editing for Procedure Codes – this module validates that the procedure code was current and valid on the date of service billed
- Invalid Procedure Code to Modifier Code Editing – this module validates the modifier billed with the procedure code is a valid combination
- National Coverage Determination (NCD) 190.15 – *Blood Counts*. This NCD documents medically necessary complete blood counts. The NCD and its contents can be viewed at: http://www.cms.gov/medicare-coverage-database/details/ncd-details.aspx?NCDId=61&ncdver=1&DocID=190.15&list_type=ncd&bc=gAAAAgAAAAAA%3d%3d&.

Effective on or after October 1, 2013 the North Dakota Medicaid program will allow physician assistants to serve as primary care providers. There is no expected cost for this change.

Comments can be sent to and viewed at: Medical Services Division Room 309, ND Department of Human Services, 600 E Boulevard Ave Dept 325, Bismarck, ND 58505-0250. Questions may be directed to the local county social service office, or individuals may contact the ND Medicaid Program at 1-800-755-2604.