



Public Notice

ND Medicaid Program

Effective for dates of service on or after November 1, 2018, ND Medicaid will be clarifying coverage for Over the Counter (OTC) drugs. The clarifications are being initiated as a result of certain polyethylene glycol products no longer being available via prescription. The estimated impact for a 12-month period is approximately \$70,000.

Effective for dates of service on or after November 1, 2018, ND Medicaid will be adding *Specialty Transport for Ambulances A0434 code* to the Ambulance Fee Schedule. The estimated impact for a 12-month period is less than \$25,000.

Effective for dates of service on or after November 1, 2018, ND Medicaid will be allowing enrolled Taxis who provide non-emergency medical transportation to claim both a per trip rate and mileage, if the trip is in excess of fifteen miles (one way). The estimated impact for a 12-month period is approximately \$15,000.

Effective for dates of service on or after November 1, 2018, ND Medicaid will amend the state plan to modify the payment methodology for lodging to limit the amount paid by ND Medicaid to the lesser of the hotel rate or the maximum established as of January 1 of each year by the General Services Administration. The estimated impact for a 12-month period is approximately \$35,500.

Effective for dates of service on or after November 1, 2018, ND Medicaid will amend the state plan to clarify reimbursement methodology for the payment of vaccines. There is no estimated impact for the clarification.

Effective for dates of service on or after November 1, 2018, payments to non-tribal governmental providers for targeted case management for individuals with a serious mental illness or serious emotional disturbance will be adjusted in accordance with state plan authority to pay these providers based on the cost of delivery the service. The updated cost information will result in an increase of no more than 4.0% and is estimated to cost approximately \$64,000 for the 12-month period.

Effective for dates of service on or after November 1, 2018, ND Medicaid will amend the state plan to add substance use disorder (SUD) treatment to the Other Licensed Practitioners section. This change will also ensure SUD treatment programs are licensed through the Department's Behavioral Health Division. The amendment will also provide needed clarification in the difference between substance use disorder treatment and partial hospitalization psychiatric services to ensure division staff and providers understand the services and requirements. This change is not expected to have a fiscal impact as this is a clarification of covered services.

Effective for dates of service on or after November 1, 2018, ND Medicaid will amend the state plan to update and clarify the services covered under Rehabilitation Services and the providers who can enroll to render those services. The amendment will also require an update to the reimbursement methodology page for behavioral health services provided at Federally Qualified Health Centers (FQHC), which will specifically list behavioral health providers who can render services at FQHCs. The amendments are intended to provide clarification and are not expected to have a fiscal impact.

Effective for dates of service on or after December 1, 2018, ND Medicaid will amend the state plan to allow Tribal 638 programs to elect to enroll with Medicaid as a Federally Qualified Health Center. Guidance provided by the Centers for Medicare and Medicaid Services in 2017 indicated state plan authority for services provided outside of the four walls of a Tribal 638 clinic was necessary to continue to fund such services through Medicaid. The amendment will ensure the ND Medicaid program has the authority to make payment for services outside of the four walls; however, as those services are currently provided, there is no estimated fiscal impact for the upcoming 12-month period.

ND Medicaid follows the National Correct Coding Initiative (NCCI) Edits. These edits were developed by the Centers for Medicare and Medicaid Services (CMS) based on coding conventions defined in the American Medical Association's Correct Procedure Terminology Manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practices, and a review of current coding practices. CMS annually updates the National Correct Coding Initiative Coding Policy Manual.

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

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.