Ambulance Services

Ambulance services are a covered benefit for recipients under North Dakota Medicaid. However, ambulance services should only be used in cases of a medical emergency when any other means of transportation would not be indicated. An ambulance should be called when there is a sudden medical emergency, your health is in serious danger and you cannot be safely transported in a car or taxi. A life threatening condition does not include refills on medications, menstrual cramps, chronic pain and headaches including migraines, colds, minor cuts, or an upset stomach. In the event of an urgent “after-hour’s” medical situation, if no other means of transportation is available, recipients are authorized to be transported by a Medicaid enrolled taxi provider to the medical facility.

Coordinated Services Program

The Coordinated Services Program (CSP) was developed by North Dakota Medicaid to assist persons who may be unintentionally misusing program benefits and to ensure the continuity and quality of care for recipients. When deciding if someone meets the criteria to be placed on the CSP, the following areas are examples of what is taken into consideration:

- Use of multiple providers and clinics;
- Early prescription refills;
- Use of multiple pharmacies;
- Trips to the emergency room (ER) for services other than emergent care. Examples of non-emergent care include, refills of medication, chronic pain, headaches including migraines, constipation, or menstrual cramps;
- Use of multiple controlled drugs; and
- Prescriptions obtained from multiple providers.

If emergency room services are obtained under false representation of the reported illness or injury, Medicaid will not pay for the service. These charges will become the patient’s responsibility, and the recipient will receive a bill from the provider.

Primary Care Providers and the New MMIS System

As you have probably heard, North Dakota is getting a new Medicaid Management Information System (MMIS). It is important through the transition from the old system to the new system, to continue to see your Primary Care Provider (PCP) and to keep your eligibility worker informed of any changes.

If your doctor or provider is having trouble finding your Primary Care Provider information, please refer them to your eligibility worker who will be able to give them the information they need. If they are unable to reach your eligibility worker or your eligibility worker has questions, please call Medical Services at 701-328-4123.
WIC is a program for pregnant women; breastfeeding women; infants; and children younger than five and is available in all counties in North Dakota. WIC offers healthy food for proper growth and development and helps families choose healthier ways of eating.

WIC is a federal nutrition program that provides:

- Nutrition information, counseling and support
- Breastfeeding information and support
- Nutritious foods
- Health screenings
- Referrals to other services

To be eligible for WIC you must meet financial eligibility criteria, and be either: pregnant; breastfeeding; a new mother; or a parent, guardian or caretaker who has an infant or child younger than five years of age. The WIC Staff will provide a nutritional health risk, which is determined by checking height, weight and iron count, and having the applicant fill out a diet and medical history.

For information or to find the nearest WIC office, please call 1-800-472-2286 or go to http://www.ndhealth.gov/wic.

### Removal of Contraceptive Implants & IUDs

A reminder to female recipients that utilize Paragard™, Mirena™ or Nexplanon™ for contraception: North Dakota Medicaid will not pay for the removal of these devices prior to the devices’ expiration date, except in the case where the device has moved and is no longer effective, or the recipient suffers severe side effects. If the device is removed to regain fertility, or due to spotting, cramping or acne (common side effects), the cost of the removal will not be paid for by North Dakota Medicaid and the recipient will be responsible for payment to the provider.

### Cervical Cancer is Preventable

According to the Centers for Disease Control (CDC), more than 12,000 women get cervical cancer every year. Up to 93% of cervical cancers are preventable. Human papillomavirus (HPV) vaccination helps prevent infection with the HPV types that cause most cervical cancers. The Papanicolaou (Pap) test screens for abnormal cells that may develop into cancer and the HPV test screens for the HPV virus that causes these cell changes. Even though screening works, 10% of women in the US in 2012 reported they had not been screened in the last 5 years. Every visit to doctors and nurses is an opportunity to discuss cervical cancer prevention. No woman should die of cervical cancer.

**Doctors, nurses, and health systems can:**

- Help women understand what screening tests are best for them and when they should get screened.
- Screen or refer all women as recommended at any visit.
- Make sure patients get their screening results and the right follow-up care quickly.
- Use reminder-recall systems to help doctors, nurses, and patients remember when screening and HPV vaccination are due.
- Strongly recommend that preteens and teens get vaccinated against HPV.

More information can be found by visiting [http://www.cdc.gov/vitalsigns/cervical-cancer/](http://www.cdc.gov/vitalsigns/cervical-cancer/)

http://www.nd.gov/dhs/services