North Dakota Medicaid Provider Newsletter

September 2019
Welcome to the North Dakota Medicaid Provider Newsletter.

Welcome to the new version of the North Dakota Medicaid Provider Newsletter. We hope this newsletter provides you important information about the North Dakota Medicaid Program. If you have any suggestions for future articles, please send your ideas to dhsmed@nd.gov.

In this edition, learn about:

- Elimination of copayments
- Timely filing of claims
- Provider licensing requirements
- Program integrity education resources
- Provider enrollment requests and other topics
Thank you for being a North Dakota Medicaid Provider.
North Dakota Medicaid announces the elimination of copayments

Copayments will be eliminated for North Dakota Medicaid members beginning on October 1, 2019. North Dakota Medicaid members should
not be charged any copayments for services and prescriptions received on or after October 1.

This change applies to both traditional Medicaid and Medicaid Expansion members. Children’s Health Insurance Program (CHIP) members will continue to have copayments applied to services and prescriptions until Dec. 31, 2019. For services and prescriptions provided to CHIP members on or after Jan. 1, 2020, no copayments should be charged.

For services and prescriptions provided to traditional North Dakota Medicaid members on or after October 1, copayment amounts will no longer be deducted from a provider’s claim reimbursement.

“This change removes the burden of providers needing to collect copayments from North Dakota Medicaid and Medicaid Expansion members,” said Caprice Knapp, Medical Services Division director.

Send any questions to dhsmed@nd.gov.
Timely Filing for Claims

North Dakota Medicaid has a one year timely filing limit. This means you must be an enrolled provider and submit claims for services provided within one year of the date of service rendered. Claims submitted more than one year after the date of service will be denied for lack of timely filing. This is a federal rule.
Provider Licensing Requirements

All providers must have a valid license, certification, accreditation or registration according to North Dakota state laws and regulations at the time services are provided.
A provider's license must be effective on or before the effective date of enrollment in North Dakota Medicaid. Be aware that most licensing boards do not report gaps in licensing on their websites. Most boards only show the initial effective date and the current expiration date.

It is a provider’s responsibility to ensure their license is active at the time a service is rendered. North Dakota Medicaid may recover any paid claim with a date of service while a license is inactive.
Verifying enrollment for North Dakota Medicaid providers

Facilities are encouraged to determine if a provider (group or individual) is enrolled with North Dakota Medicaid before submitting a
new Medicaid provider application.

If you have the provider’s National Provider Identifier (NPI), you can search the group provider list or the individual provider list. If the provider’s NPI is on either list, the provider is enrolled.

There may be instances where a provider was enrolled, but their enrollment is no longer active. These providers will not show up on either lists.

If a provider indicates that they have been enrolled with North Dakota Medicaid at some point since October 2015, send an email to dhsenrollment@nd.gov and include the provider’s name and NPI. Staff will research the provider’s status. Do not use this option to determine the enrollment status of new providers.

Search the lists before completing an application. If a provider is enrolled, do not submit a new application.

- If an affiliation to a group is needed, submit the Request to Add an Affiliation Form. An affiliation is required when a billing provider adds new staff that will be providing services for the billing group.
- If a new taxonomy is needed, submit the Request to Add/Change Taxonomy Form.
- If the provider is inactive, submit the Activation/Reactivation Checklist.
Processing provider enrollment requests

Revalidations, enrollments, affiliations, taxonomy code change requests or termination requests are completed in the order of receipt by North Dakota Medicaid. Please do not send emails requesting the status of submitted paperwork.
**Enrollment:** North Dakota Medicaid processes online enrollments once all the required documentation is received. If a provider submits an online application, but does not provide any supporting documentation, that application will remain in pending status. Applications submitted but abandoned (no documentation was submitted) are cancelled after 180 days. North Dakota Medicaid only processes applications once all required information is submitted. If a provider has submitted incomplete documentation, staff will inform the provider of what is missing. Providers must resubmit **ALL** required documentation along with the missing information. Incomplete enrollment documents are not retained by staff.

When North Dakota Medicaid receives everything that is needed to process the application, the status will change from pending to in process. A system-generated welcome letter will be sent to the mailing address of the enrolled provider once North Dakota Medicaid approves the enrollment.

**Revalidations:** If the revalidation documentation is received before the provider’s revalidation due date, their enrollment will not be terminated. Providers may continue billing. Once the revalidation has been completed, a courtesy email will be sent.

**Affiliation Requests:** Once an affiliation request has been processed, a courtesy email is sent that includes the affiliation effective date. Retain a copy for your records as the email is the only correspondence that will be sent.

**Termination Requests:** North Dakota Medicaid does not send an email to a facility once a provider’s termination request is completed.
All terminations should be submitted as soon as you know a provider is leaving your organization.

**Taxonomy Code Requests**: Submit a request to add or change taxonomy and include the effective date. North Dakota Medicaid will send a courtesy email informing you when the request has been completed.

Verification of completed requests can be viewed by a facility’s organization administrators and any staff assigned user access to the different areas of Medicaid Management Information System (MMIS).

For additional information, refer to the Provider Enrollment FAQ.

Send provider enrollment questions to dhsenrollment@nd.gov.
Education and training resources for Medicaid program integrity

The Centers for Medicare and Medicaid Services has a wealth of program integrity resources to educate providers, Medicaid members
and other stakeholders in promoting best practices and awareness of Medicaid fraud, waste and abuse.

There are several resources available including infographics, print and electronic media, provider-specific toolkits, train-the-trainer guides, webinars, videos, podcasts and other innovative strategies.

Follow the Center for Program Integrity on Twitter at #MedicaidIntegrity.
Third Party Liability reminder

It is important for providers to get information about a North Dakota Medicaid member’s health care coverage from the member, the member’s representative, the county social service office, or through the information provided on the Medicaid remittance advice.
Providers should obtain an assignment of benefits from the member to ensure direct payment from the third-party payer. For Medicaid purposes, health insurance is defined as any third-party benefit that is available to the eligible Medicaid member for medical treatment and related services.

Billing North Dakota Medicaid and another third-party payer for the same service at the same time is a violation of Medicaid rules. Medicaid is the payer of last resort and can only be billed after the third party has paid its legal liability.

Claims that a third party is liable for will be adjusted and recovered. In some instances, North Dakota Medicaid will pay and chase claims for certain conditions. However, providers are expected to take every reasonable attempt to pursue payment from the liable party before billing North Dakota Medicaid.

If the liable third party pays the claim in full after North Dakota Medicaid pays, providers are expected to adjust the claim billed to North Dakota Medicaid to ensure proper repayment to North Dakota Medicaid.

Questions regarding third party liability may be directed to MedicaidTPL@nd.gov.
Human Services contracts with Noridian Healthcare Solutions for North Dakota Medicaid Call Center
The North Dakota Department of Human Services has contracted with Noridian Healthcare Solutions to operate its North Dakota Medicaid Call Center effective Oct. 1, 2019.

Medicaid providers and members can continue contacting the North Dakota Medicaid Call Center toll-free at 877-328-7098, 711 (TTY) or mmisinfo@nd.gov with Medicaid-related questions.

“The department has been evaluating its core services and exploring efficiencies that can help us provide even better customer service to the people we serve,” said Chris Jones, the department’s executive director. “The call center is important. I’m confident Noridian’s experience in running similar call centers and their knowledge of the Medicaid program will meet the needs of our Medicaid providers and members.”
Local and National Coverage Determinations

North Dakota Medicaid applies medical necessity editing to claims according to the following Local Coverage Determinations (LCDs) published by Noridian Healthcare Solutions, LLC, and National
Coverage Determinations (NCDs) published by the Centers for Medicare and Medicaid Services.

North Dakota Medicaid does not recognize Advance Beneficiary Notices (ABNs). Any services included in an LCD or NCD listed below that do not follow the LCD/NCD requirements will be denied as a contractual obligation for not meeting medical necessity.

**LCD ID and Description**

- **L33979** - Benign Skin Lesion Removal (Excludes Actinic Keratosis, and Mohs)
- **L34040** - Polysomnography and Other Sleep Studies
- **L34051** - Vitamin D Assay Testing
- **L34074** - Immune Globulin Intravenous (IVIg)
- **L34076** - Injections – Tendon, Ligament, Ganglion Cyst, Tunnel Syndromes and Morton’s Neuroma
- **L34199** - Treatment of Ulcers & Symptomatic Hyperkeratoses
- **L34980** - Lumbar Epidural Injections
- **L34995** - Facet Joint Injections, Medial Branch Blocks, and Facet Joint Radiofrequency Neurotomy
- **L35172** - Botulinum Toxin Types A and B
- **L35175** - MRI and CT Scans of the Head and Neck
- **L36312** - MoIDX: CYP2C19, CYP2D6, CYP2C9, and WK0RC1 Genetic Testing
- **L37549** - Chest X-Ray Policy
NCD ID and Description

- **20.29** - Hyperbaric Oxygen Therapy
- **50.3** - Cochlear Implantation
- **190.12** - Urine Culture, Bacterial
- **190.13** - Human Immunodeficiency Virus (HIV) Testing (Prognosis Including Monitoring)
- **190.14** - Human Immunodeficiency Virus (HIV) Testing (Diagnosis)
- **190.15** - Blood Counts
- **190.16** - Partial Thromboplastin Time (PTT)
- **190.17** - Prothrombin Time (PT)
- **190.18** - Serum Iron Studies
- **190.19** - Collagen Crosslinks, any Method
- **190.20** - Blood Glucose Testing
- **190.21** - Glycated Hemoglobin/Glycated Protein
- **190.22** - Thyroid Testing
- **190.23** - Lipid Testing
- **190.24** - Digoxin Therapeutic Drug Assay
- **190.25** - Alfa-fetoprotein
- **190.26** - Carcinoembryonic Antigen
- **190.27** - Human Chorionic Gonadotropin
- **190.28** - Tumor Antigen by Immunoassay – CA 125
- **190.29** - Tumor Antigen by Immunoassay – CA 15-3/CA 27 29
- **190.30** - Tumor Antigen by Immunoassay – CA 19-9
- **190.31** - Prostate Specific Antigen
- **190.32** - Gamma Glutamyl Transferase
- **190.33** - Hepatitis Panel / Acute Hepatitis Panel
- **190.34** - Fecal Occult Blood Test
Information about North Dakota Medicaid covered benefits

Cochlear Implantations
Effective September 1, 2019, North Dakota Medicaid will be following the National Coverage Determinations for Cochlear Implantation (50.3). Contact Sara at sregner@nd.gov with any questions.

**Dentures**

North Dakota Medicaid allows one denture or partial denture every five years with prior authorization approval.

North Dakota Medicaid requires radiographs to be sent with the prior authorization for all dentures and partial dentures to determine medical necessity of the tooth extractions.

North Dakota Medicaid will only reimburse medically necessary extractions. All extractions deemed not medically necessary will be denied.

**Coverage for Tobacco Cessation Counseling**

Tobacco cessation counseling is a covered service only with a pregnancy diagnosis. Refer to the coding guideline for detailed information.
The North Dakota Department of Human Services will host a series of community meetings to gather input on the development and implementation of a new Medicaid 1915(i) state plan amendment to expand home and community-based behavioral health services for children and adults.

Public Meeting Schedule

**Bismarck**: Monday, Sept. 23, 1:30 to 3 p.m. and 6 to 7:30 p.m. - Bismarck Public Library, 515 N. Fifth St., Conference Room B
**Fargo:** Tuesday, Sept. 24, 1 to 2:30 p.m. and 2:30 to 4 p.m. - Fargo Main Public Library, 102 Third St. N., Community Room

**Grand Forks:** Wednesday, Sept. 25, Noon to 1:30 p.m. and 2 to 3:30 p.m. - Grand Forks Public Library, 2110 Library Circle, Conference Room

**Minot:** Thursday, Sept. 26, Noon to 1:30 p.m. and 6 to 7:30 p.m. - Minot Public Library, 516 Second Ave. S.W., North Meeting Room

**Dickinson:** Tuesday, Oct. 1, 1 to 2:30 p.m. Mountain Time - West River Community Center, 2004 Fairway St., Dickinson, Meeting Room 1

A Williston meeting will be added at a later date.

People with disabilities who need accommodations to participate in a meeting should contact Bianca Bell in the department’s Behavioral Health Division at 701-328-8958, toll-free 800-755-2719, 711 (TTY) or bhbell@nd.gov.

During the 2019 legislative session, North Dakota lawmakers authorized the department to create a
Medicaid 1915(i) state plan amendment, which will allow North Dakota Medicaid to pay for additional home and community-based services to support individuals with mental health conditions, substance use disorders and/or brain injuries.
Upcoming Medical Services Division public meetings

Money Follows the Person Stakeholders Meetings

- Thursday, Oct. 3, 1 to 4 p.m.
- Tuesday, Nov. 19, 1 to 4 p.m.
- Pioneer Room, Judicial Wing, State Capitol
Medicaid Medical Advisory Committee Meeting

- Thursday, Dec. 5, 1 to 4:30 p.m. Central Time
- Pioneer Room, State Capitol, Bismarck

You are invited to attend the upcoming Main Street ND Summit and the Recovery Reinvented event in Bismarck.
Bookmark the North Dakota Medicaid provider update web page and check for periodic updates.

Credits:
ND Tourism