



Rhode Island Medicaid Program

PROVIDER *update*

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THIS MONTH'S FEATURED ARTICLES

RI Medicaid Provider Revalidation



See page 2 for important details



RI Medicaid ID Numbers are Changing

See page 3 for updated information



Important Information Regarding: Ordering, Prescribing And Referring Providers



See page 4 for more information

Revalidation of RI Medicaid Providers

OHHS and HP Enterprise Services are revalidating Provider Enrollment information for **one third** of the enrolled Medicaid providers that are active and have submitted a claim since January 1, 2014.



The provider types in the 2015 Revalidation are as follows:

Inpatient Facility	ICF-MR Public Facility
Outpatient Facility	ICF-MR Private Facility
Freestanding Psychiatric Hospital	Assisted Living Facility
Independent Pharmacy	Case Management
Independent Laboratory	Adult Day Care
Ambulance	Shared Living Agency
DME Supplier/Prosthetics/Orthotics	Day Habilitation
Nursing Home	Personal Choice/Habilitation Case Management
Rhode Island State Nursing Home	Self-Directed Community Service
Freestanding Ambulatory Surgical Center	Home Meal Delivery
RICLASS	Outpatient Psychiatric Facility
Hospice	Eleanor Slater Hospital

Later this spring our Provider Enrollment Team will begin outreach to the above groups of providers. Please watch your mail for more information about this revalidation process and how to access your enrollment. You will be receiving two letters for the re-validation process. The first letter will contain a pre-determined Tracking ID. The second letter will contain the password information. Providers will be asked to log into the Provider Enrollment Portal with this Tracking ID and Password to verify their information that is currently in the Medicaid Management Information System. In addition, Providers will answer disclosure questions and attest online to their statements and the Provider Agreement.

In preparation for the mailings, if you have moved your office location recently but have not notified us, please ensure that Medicaid has your most current address by completing the form here:

<http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/provcoi.pdf>

If you should have questions while completing your enrollment verification, please contact our Customer Service Help Desk at (401) 784-8100 for in-state and long distance calls or (800) 964-6211 for in-state toll calls.

Attention All Providers:

Member Identification Numbers Are Changing



Health Insurance Portability and Accountability Act (HIPAA) of 1996 known as Privacy Rule, established standards for the protection of individually identifiable health information. The Privacy Rule protects all individually identifiable health information held or transmitted by a covered entity or its business associates, in any form or media, whether electronic, paper or oral. The Privacy Rule refers to this information as protected health information (PHI).

In accordance with this Rule, Rhode Island Medicaid will be converting a recipient's Medicaid identification number from the recipients social security number to a new randomly generated 10-digit Medicaid identification number. RI Medicaid is currently targeting summer 2015 for this conversion.

This conversion will require changes to your office and the way you submit claims:

- Recipients will receive new Medicaid Cards over a 3 month time period. The cards will have documentation explaining the reason the recipient is receiving the new card.
- Provider Electronic Solutions Software will be upgraded
- Healthcare Portal will be upgraded. Additionally you will be able to obtain the new Medicaid Id on the Healthcare Portal by entering the recipient's 9 digit social security number.
- Vendors will need to upgrade 837 transactions
- Provider's internal systems may need to be upgraded to handle a 10-digit identification number

In preparation for this change, please:

- Notify recipients that the change is coming and to watch their mail for the new card which will be mailed over the span of approximately 3 months.
- Recipients will need to bring the new card to their next visit at your agency
- Contact your software vendor to ensure they are ready for the change
- Update your internal systems to be able to enter a 10 digit Medicaid ID. During the 3 months that the new identification cards are being generated, claims and prior authorizations can be submitted with either the 9 digit social security number or the new 10 digit Medicaid Id.

Please note that non-Medicaid recipients in programs such as ADAP, RIPAE, CNOM or DOC will not be receiving a new identification number. These recipients will continue to use the 9 digit identification number already assigned to them.

Please watch for more information in coming months in the Provider Update as well as on the EOHHS website (www.eohhs.ri.gov).

Ordering, Prescribing, and Referring Providers

The Affordable Care Act (ACA) requires physicians or other eligible practitioners to be enrolled in the Medicaid Program to order, prescribe and refer items or services for Medicaid beneficiaries, even when they do not submit claims to Medicaid.

RI Medicaid will be requiring this information to ensure all orders, prescriptions or referral for items or services for Medicaid beneficiaries originate from appropriately licensed practitioners who have not been excluded from Medicare or Medicaid.

It is the responsibility of the RI Medicaid provider rendering the service to obtain the NPI of the Ordering, Prescribing, Referring Provider (OPR) and confirm that the OPR provider is enrolled in the RI Medicaid Program.

Beginning this summer, claims that are submitted without the required NPI of the OPR will deny due to missing information. Claims with complete information that are processed and paid, will be subject to a post-claim review. If it is determined that the OPR is not enrolled as a RI Medicaid provider, the claim will be recouped.

This change will affect the following Provider Types:

Inpatient Claims
Outpatient Claims except:
Clinic visits (rev codes 510-519), ER visits (rev codes 450-459) and Observation (rev codes 760-769)
Pharmacy
Skilled Home Health
Independent Radiology
Independent Labs
DME
Chiropractor
Dialysis
Ambulatory Surgical Centers
Hospice

Upgrades will be necessary to HP's software Provider Electronic Solutions (PES) to accommodate these changes.

Please watch for more information in the upcoming *Provider Updates* that will include the mandatory date for these changes as well as the release date of PES. If you have any questions, please contact your provider representative directly. Contact information is found on the [Provider Representative list](#) on the EOHHS website.



Attention Dental Providers Covered and Non-Covered Services



Dental services reimbursable by the RI Medicaid Program are defined as those services allowed within policy guidelines. Reimbursable services are listed in the Dental Provider Manual. Some services are subject to frequency limitations and are noted as such. If a service is needed beyond the frequency limitation, it doesn't mean that procedure is "non-covered" and that the recipient can be charged for it.

Example: A recipient requires a panoramic x-ray on 03/01/2015. It is determined (by checking eligibility and dental history) that the recipient had a panoramic x-ray performed by another provider on 02/01/2013. Panoramic films are reimbursable once every four years.

In this case the recipient or provider should request a copy of the x-ray from the original provider for use. If the new provider believes they cannot use the former x-ray and requires a new x-ray, the provider should contact the Provider Representative for direction. The recipient cannot be charged for a new x-ray as a non-covered service due the frequency limitation.

Non-covered services are defined as those services that are not allowed per policy and not due to frequency limitations. Services not listed in the Provider Manual are not reimbursable by RI Medicaid.

Should you have questions, please contact Sandra Bates at 401-784-8022 or sandra.bates@hp.com.

Annual Provider Survey

In December, 2014, the annual Provider Survey was sent to a random sampling of RI Medicaid providers across the state. We would like to say "Thank you" to all of the providers who took the time to complete the survey and give us their feedback.



We were very pleased with the results of the survey and especially pleased that providers indicated increased satisfaction in two areas. Providers are very satisfied with the quality and relevance of the information delivered through the monthly *Provider Update*. In addition, providers are very satisfied with the frequency and effectiveness of the training sessions and webinars.

Thank you again for your valuable feedback. Your comments are appreciated and will assist us in improving our services.

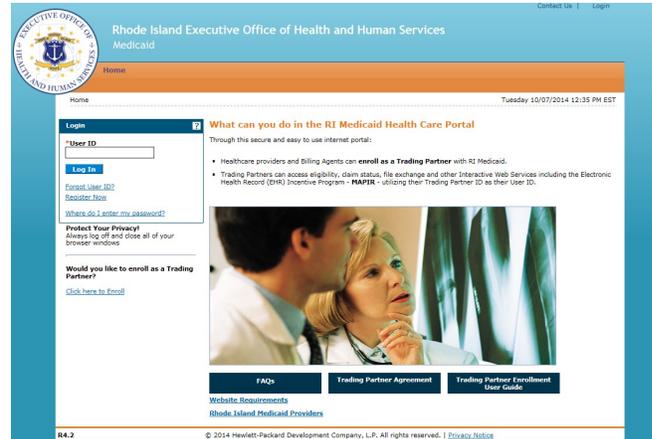
Healthcare Portal

Important Information for All Trading Partners

All Trading Partners must access information through the Healthcare Portal. **Interactive Web Services (IWS)** was decommissioned on February 16, 2015.

Trading Partners **must register** in the new Healthcare Portal to continue to access information.

[Click here](#) to access the Healthcare Portal.



For step by step instructions, use these User Guides

SELF PACED USER GUIDES AVAILABLE ON THE EOHHS WEBSITE

Self-paced user guides are available on the EOHHS website. These guides will give you step by step instructions:

- [Enrolling as a New Trading Partner](#)
- [Registering to Use the Healthcare Portal](#)
- [Using the Healthcare Portal](#)

Click the links above to access the User Guides.

To troubleshoot problems as they occur, use these Quick Reference Guides

Registration Tips

This guide will help with initial registration questions, adding delegates and password questions.

[Click here for Registration Reference Guide](#)

Access to Web Services

This guide will help you access services such as eligibility verification, remittance advice, and other business actions.

[Click here for Web Access Reference Guide](#)

835/277 Transactions

This guide explains the steps for adding a provider to the Trading Partner account for the purposes of receiving the 835/277U transactions.

[Click here for 835/277 Reference Guide](#)

Q and A



This month features new questions about the Healthcare Portal

Q: I completed my registration but I am not able to verify eligibility?

A: Trading Partners who wish to search claims and verify eligibility must add that role to their Account after registering. From the Trading Partner's homepage, select the link on the left for **MY PROFILE**.
Go to the section labeled **ROLES** and select the **ADD ROLE** button. On the screen that opens, select "Search Claims and Verify Eligibility" from the **AVAILABLE ROLES** drop down box. Enter the rest of the requested information and select submit. You should receive a pop up box telling you that you were successful.

On the top of your homepage, you will now see tabs for **Eligibility** and **Claims** in the orange tool bar on the top.

Q: I am adding delegates and I can't find the box to check, to give them access to checking Eligibility. Where do I find that?

A: You need to add that function to the Trading Partner account before you can add it to delegates. See previous question for instructions.

Q: I entered my user ID and the system is asking me challenge questions that I did not select.

A: This could be due to two things:

A) You entered an incorrect user ID

B) You have not completed the registration process. Click [here for a User Guide](#) to walk you through the process of registration.

Q: I entered all my information correctly and I am getting an identity error.

A: The information needs to match the Medicaid database exactly. Sometimes it's as simple as the placement of punctuation or an abbreviation. Contact the Customer Service Help Desk or email riediservices@hp.com to verify your information.

Q: What do I do if I need more help?

A: Our Customer Service Help Desk is available to answer questions Monday—Friday, 8:00 AM-5:00 PM. Contact the Help Desk at (401) 784-8100 for local calls and (800) 964-6211 for in state toll calls. There are also additional resources available at <http://www.eohhs.ri.gov/ProvidersPartners/HealthcarePortal.aspx>



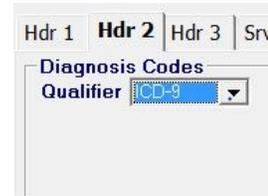
ATTENTION PES USERS! Upgrade Required

After registering in the new Healthcare Portal, PES users **must** install a PES upgrade (2.07) to ensure successful submission of claims.

Please **do not install the upgrade** until you have registered in the Healthcare Portal. In addition, be sure you are using Qualifier ICD-9. (see images at right) Using Qualifier ICD-10 will cause your submission to fail.

[Click here for upgrade](#)

Important: After installing the upgrade, please be sure that your password for the Healthcare Portal matches the password in the PES software under "Web Password". These must be in sync for successful submission of claims.



You will find this qualifier on Hdr 2 for most claims



You will find this qualifier on Hdr 3 for dental claims. Enter only if a diagnosis code is entered.



Professional Providers *Attention: All Physician Groups*

As an important reminder, please ensure that any new physician joining your group / practice is enrolled in the Rhode Island Medicaid program prior to performing any service for a Medicaid client. If the physician has not been enrolled or accepted into the program they should not perform any services for a Medicaid patient until the application process is completed.



If you have any questions please contact your provider representative,
Daphne Monroe at 401-784-8003.



Attention DME Providers: Coverage Guidelines

The coverage guidelines for disposable gloves and Intermittent Positive Pressure Breathing Devices have been updated and posted to the EOHHS website.

Providers should review updated guidelines in the DME Provider Manual.



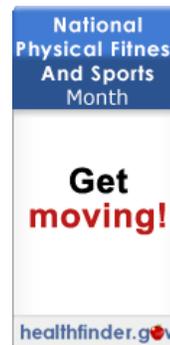
[Click here for DME Provider Manual](#)



National Physical Fitness and Sports Month

President's Council on Fitness, Sports & Nutrition

National Physical Fitness and Sports month is observed in May. Regular physical activity is important for everyone's health, and for people of all ages. For more information, click on the graphic on the right.



The President's Council on Fitness, Sports and Nutrition (<http://www.fitness.gov>) shares the following benefits of physical activity:

- **Children and Adolescents-** Physical activity can improve muscular fitness and bone and heart health.
- **Adults-** Physical activity can lower risk for heart disease, type 2 diabetes, and some types of cancer.
- **Older Adults -** Physical activity can lower the risk of falls and improve cognitive functioning (like learning and judgment skills)

A toolkit is available to access resources to encourage physical fitness.

[Click here to access the toolkit](#)



Rhode Island Quality Institute

Questions about CurrentCare?

Come on down to our Open House!

Swing on into the CurrentCare **Open House** on **May 13**, from **5 to 8 pm**! We'll give you the grand tour, answer all your burning questions about CurrentCare, provide a real-time Viewer training session and we'll even feed you! Also, all attendees will have the chance to win a free Kindle Fire!



You will have the chance to meet our team and they'll be able to help you become a pro at using CurrentCare, the ultimate tool in efficient patient care coordination.

Need even more inspiration to use CurrentCare? Dr. Lynn Ho will share her experiences using CurrentCare to help her micro-practice run as smoothly and efficiently as possible.

This event is free, but registration is required, so hit that big green button and we'll see you on May 13!



The Four Ts of Transition to ICD-10

Friday, May 8, 2015

12:00 PM-1:00 PM

[Register Here](#)

The transition from ICD-9 to ICD-10 will impact many aspects of medical practice management. Please join us for a lunchtime Webinar with national expert and certified professional coder, Nancy Enos (FACMPE, CPMA, CPC-1), for an engaging and informative presentation about ICD-10 and what your practice can do to be prepared for the change. Nancy will discuss the Four Ts of Transition to ICD-10: Timing, Training, Testing, and Technology. After the presentation, there will be time for questions and answers.

Rhode Island Quality Institute

CurrentCare Quick Bites May, June & July 2015



Join us for a new series – CurrentCare Quick Bites - a lunchtime series of short, 15-minute updates about CurrentCare. Our experts, Peggy Menna and Andrea Levesque, will present information about new and updated features and helpful tips about using CurrentCare in your practice. We'll even start at 12:15 to give you time to grab your lunch and dial in. We hope you'll join us!



Wednesday, May 6, 2015 12:15 – 12:30 PM [REGISTER HERE](#)

Topic: What Patient Data is in CurrentCare today?

You can now access over 142 different data sources in one place! Did you know that Lifespan has started sending both inpatient and ambulatory information into CurrentCare? Come learn what's been added since you were trained, and a quick overview of what's coming soon!

Wednesday, June 3, 2015 12:15 – 12:30 PM [REGISTER HERE](#)

Topic: Enrollment – Panel Analysis and Enrollment Campaign

In order to reach out to an entire patient panel, many physicians are using the Panel Analysis to determine which of their patients are still not enrolled in CurrentCare, and then reaching out to those patients via an email campaign. Tune in to see how easy it is!

Wednesday, July 8, 2015 12:15 – 12:30 PM [REGISTER HERE](#)

Topic: How to Print from the CurrentCare Viewer

The CurrentCare Viewer offers a wealth of information in various formats. Join us for a demonstration on how to print labs, pathology and imaging reports, and information in the Summary report.



Got a question you'd like us to address at any of these sessions?
Send us an email at CurrentCare@riqi.org
attention: CurrentCare Quick Bites

Pharmacy Spotlight

Meeting Schedule:

Pharmacy & Therapeutics Committee
Drug Utilization Review Board



2015 Meeting Dates

June 9
August 25
December 1

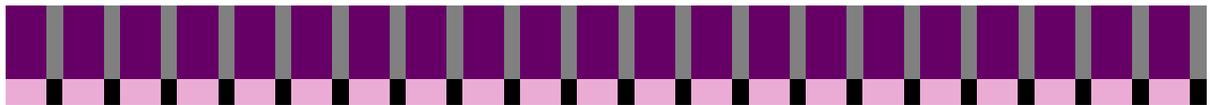


The next meeting of the
Pharmacy & Therapeutics Committee (P&T)
is scheduled for:

Date: June 9, 2015
Registration: 7:30 AM
Meeting: 8:00 AM
Location: HP Enterprises Services
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: June 9, 2015
Meeting: 10:30 AM
Location: HP Enterprises Services
301 Metro Center Blvd.,
Suite 203
Warwick, RI 02886
[Click here for agenda](#)



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



2014 EHR Incentive Program Updates



2014 EHR Incentive Flexibility Option is Now Available!

We have recently upgraded our MAPIR system to allow providers to attest 2014 EHR Incentive applications using the Flexibility Rule Option. This option allows providers, who could not upgrade their Certified Electronic Health Record Technology (CEHRT) to a 2014 certification, to attest their meaningful use measures based on a previous EHR certification version.

For more information about your options , feel free to check out the [CMS CEHRT Flexibility Rule Decision Tool](#)

2014 EHR Incentive Application Extension Granted

The deadline to submit Program Year **2014** Rhode Island Medicaid EHR Incentive applications for eligible providers has been extended to **June 30, 2015**. As previously stated, our MAPIR system now accepts Medicaid EHR Incentive applications to attest using the flexibility rule. Eligible providers (physicians, pediatricians, nurse practitioners, dentists, and certified nurse mid-wives) who do not plan to attest using the flexibility rule option can apply without using this option.

For more information, please feel free to visit our [RI Medicaid EHR Incentive website](#).

Do you have questions about the RI Medicaid EHR Incentive Program?

Visit our website by clicking [here](#)

Or

Email us at OHHS.ehrincentive@ohhs.ri.gov

Provider Training and Education *Resources for Providers*

A helpful resource for providers is available on the EOHHS webpage. From the Providers and Partners drop down list, select [Provider Training and Education](#).

This page contains both the E-Learning Center and the Provider Training Schedule.

Provider E-Learning Center

Welcome to the Provider E-Learning Center. This section will be updated with new training modules as they become available.

Self-Paced E-Learning

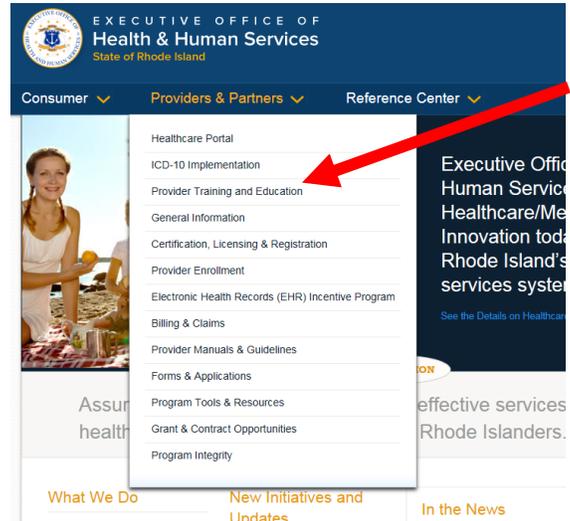
These presentations help familiarize providers with key RI Medicaid information and processes.

[Navigating the EOHHS website E-Learning](#) 

[Welcome to Medicaid - New Provider E-Learning](#) 

Provider Specific Training

[Nursing Home - Helpful Hints for Billing](#) 



The Provider Training Schedule lists upcoming events, including webinars, virtual classrooms, classroom training, and meetings.

The E-Learning Center links providers to self-paced presentations on a variety of topics.



Did You Miss the Recent Training Events? *Information is available online*

RI Medicaid hosted training sessions for providers on the following topics:

[Billing 101—Part 1
The Basics](#)

[Billing 101—Part 2
Reading Remittance Advice](#)

[Getting Ready for
ICD-10](#)

If you missed any of these trainings, the presentation slides are available on the Training and Education page of the EOHHS website.

Click on the title of the training above, to access the presentation slides.



Attention: All Providers

Record Retention and Documentation



As a reminder, all RI Medicaid providers are required to adhere to the guidance outlined in the Provider Agreement regarding record retention and documentation.

To maintain, for a minimum of ten (10) calendar years after the year of service, information and records necessary to determine the nature and extent of services rendered under the RIMAP and furnish them in the State of Rhode Island upon request by the Secretary of Health and Human Services (HHS), the RIMAP, and to the Department of Attorney General Medicaid Fraud Control Unit. Further, the provider specifically agrees to notify the Secretary of HHS and the RIMAP, within thirty-five (35) days of any agreement or transaction relating to the provider's ownership interest in any subcontractor with whom the provider has had business transactions exceeding the lesser of \$25,000 or 5% of the provider's total operating costs during the immediately preceding twelve (12) month period. In addition, the provider agrees to notify EOHHS of any significant business transactions during the 5 year period ending on the date of the request, including, but not limited to, any change of ownership or control interest of the provider, bankruptcy, mergers, and transaction which exceeds the lesser of \$25,000 or 5% of the provider's total operating costs within any twelve (12) month period, between the provider and any wholly owned supplier or between the provider and any subcontractor within thirty-five (35) days of said transaction.

[Click here to view the complete
Provider Agreement.](#)



Transition to ICD-10

Information for all Providers



Are you ready?

The implementation date for transition to ICD-10
OCTOBER 1, 2015
will soon be here.
Providers are encouraged to continue
preparation to be ready for this transition.



READINESS TIP: To be ready for the ICD-10 transition deadline of October 1, 2015, providers are encouraged to practice coding in ICD-10. When coding claims for submission with ICD-9, practice also coding the claim for ICD-10 especially for your common/high volume claims. This will help you determine if your practice or facility is ICD-10 ready!

ICD-10 Code Information

Diagnosis coding is based on the documentation in the medical record for each client. Providers must ensure that the documentation in the record is sufficiently detailed to determine the most accurate diagnosis code that represents the patient's condition. Information about ICD-10-CM (Clinical Modification) and ICD-10-PCS (Procedure Coding System) is available on the CMS ICD-10 website.

Crosswalks

RI Medicaid is unable to provide a crosswalk for converting ICD-9 to ICD-10 codes. Crosswalks are not a substitute for fully implementing ICD-10. Providers may find the CMS General Equivalence Mappings (GEMS) a helpful tool, but GEMs are not an exact crosswalk between ICD-9 and ICD-10. Current ICD-9 codes often lack the level of specificity required to determine the correct ICD-10 code, so the match may not be accurate. GEMs are not intended to replace coding based on the patient's condition.

Helpful planning tools and other resources can be found on the [CMS website](#) as well as the CMS sponsored website: [Road to 10](#).

Other Important ICD-10 Updates:

Waiver Claim Form Revision

Update for ICD-10

Important!!!

The Waiver claim form has been revised in preparation for the transition to ICD-10 on October 1, 2015. Providers should use the revised form, as the older version will not be processed and will be returned to the provider.

An ICD indicator has been added to the bottom of the claim form. At this time, the indicator that should be used is 9, indicating that ICD-9 codes are being submitted. After 10/1/2015, the indicator and the diagnosis code will be determined by date of service.

[Click here for Waiver Claim Form](#)

[Click here for Waiver Claim Form Instructions](#)



Prior Authorization

Update for ICD-10

Important!!!

As preparations continue for the transition to ICD-10, an important update to processing of Prior Authorizations is required.

System updates prohibit the processing of ICD-9 diagnosis codes on Prior Authorization forms effective 10/1/2015 or later.

Prior Authorizations with start and end dates that span the 10/1/2015 effective date of ICD-10 implementation will be processed in the following way.

- All requests that span the 10/1 date, **will be end dated on 9/30.**
- If by 9/30 the service has not been completed, or delivered, **a second prior authorization form will be required** effective on 10/1/2015, that includes an ICD-10 diagnosis code.

Providers will be notified when requests are end dated due to this ICD-10 edit.