



Rhode Island Medicaid Program

# PROVIDER *update*

Volume 284

September, 2016

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### RI Medicaid Provider Revalidation



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for more information*



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Rhode Island Medicaid Program

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September, 2016 Volume 284

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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



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*Attention: All Providers*

## New Integrated Eligibility System

On September 13, Rhode Island will launch a new integrated eligibility system to improve the way we deliver health and human services benefits to Rhode Islanders and their families. Through a single application, clients will be able to be considered for health coverage and programs like food assistance, cash assistance, long-term services and supports, and other programs all at the same time. The new eligibility system will allow for much more efficient electronic sharing of information across health and human services programs, improving the experience for both beneficiaries and health care providers.



**Transition Period**

From September 8-12, 2016, the State will be moving data from its old eligibility system to the new one. During this time period, new Medicaid eligibility will not be able to be determined, except under very special circumstances. Existing Medicaid beneficiary information should not be impacted, and will be available through the Healthcare Portal and the Point of Service (POS) pharmacy system.

Starting on September 13, newly-eligible clients who applied during the transition days, will have retro-active coverage to September 1 in Medicaid fee for service. Medicaid Managed Care enrollment will not be impacted.

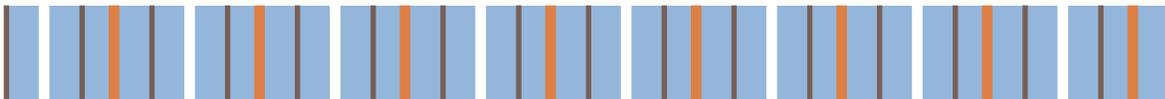
**For more information**

For more information about the new system, visit the EOHHS website, [click here](#).  
For a list of programs included in the new system, [click here](#).  
For RI New Integrated Eligibility System Frequently Asked Questions document, [click here](#).

Webinars were held on August 30 and 31 to help providers learn about the new system.

There are two more opportunities to participate:  
[Tuesday, September 6th 10:00-11:00 AM](#)  
[Wednesday, September 7th, 1:00-2:00 PM](#)

**To register for one of the webinar sessions, click on the preferred date above to RSVP.  
Please include your name and your facility name in the email.**



*Attention: All Providers*  
**Member ID Conversion**

In September, 2016, RI Medicaid will convert member ID numbers, currently 9 digit social security numbers, to a randomly generated ten digit ID number. With the volume of cards to be distributed, new ID cards will be sent to beneficiaries in waves, beginning in October, 2016.

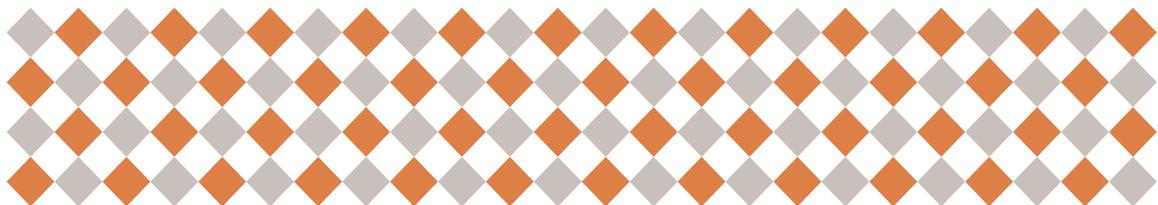
Providers may still enter the social security number in the Healthcare Portal when verifying eligibility. When the eligibility response is returned, the new number will be listed for the beneficiary's ID.

**Enter Social Security Number if new member ID unavailable.**

**Make note of new 10 digit ID number from eligibility response.**

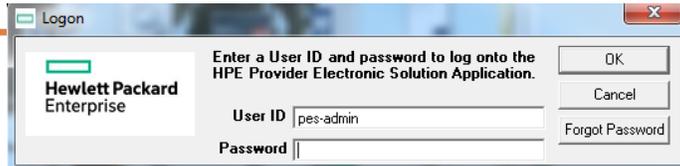
Plan Name	Effective From Date	Effective To Date	Base Deductible	Message
Categorical and Fee for Service	08/15/2012	08/15/2012	\$0.00	Message Text

Providers should make note of the new ID number, as well as request that the beneficiary produce the new card when it arrives. There will be a dual window for claims processing, during which either the 9 digit or 10 digit ID will be accepted. Providers will be notified of the date when the dual processing for claims will end, and only the new 10 digit ID will be accepted.



*Attention: PES Users***Mandatory Upgrade of Provider Electronic Solutions (PES)**

Providers must always verify that they are using the most recent version of PES to ensure that claims adjudicate appropriately.



Upgrades must be done sequentially, or risk corruption of your database.

The current version of PES is 2.09. However, if you have not installed Version 2.08, that must be done prior to installing the 2.09 upgrade.

Version 2.08 contains the required changes due to UHIP implementation. This includes the expanded field for the new 10 digit MID.

Providers should perform this upgrade as soon as possible.

[Click here to access PES upgrades](#)

*Attention: All Trading Partners***Member ID Conversion and X12 Transactions**

With member ID conversion, the MID field will be increased to 10 digits in all X12 files.

Trading Partners must ensure that they have the ability to download files such as the 271 and the 835 with the expanded MID field.

Non-PES users who want information on testing should send an email to:  
[riediservices@hpe.com](mailto:riediservices@hpe.com).

You will be contacted to discuss a testing plan.

## Revalidation of RI Medicaid Providers



OHHS and Hewlett Packard Enterprise are revalidating Provider Enrollment information for the next group of enrolled Medicaid providers that are active and have submitted a claim in the past year.

**The provider types in the next wave of Revalidation are as follows:**

Dentist	Podiatrist
Optometrist	Optician
Skilled Nursing	Licensed Therapist
Chiropractor	Freestanding Dialysis
Rural Health Clinic	Indian Health Service
Children’s Behavioral Health Group	Local Education Association
Early Intervention	Substance Abuse Rehab
CMHC/Rehab Option	Severely Disabled Pediatric Home Care
BHDDH Behavioral Health Group	Department of Children, Youth and Families
Personal Care Aide/Assistant	Other Therapies/Hippotherapy
Comprehensive Lead Center	Home/Center Based Therapeutic Svs
Cedar Center	Rlte Share Copay Providers
Co-Located Connect Care Choice	BHDDH DD Agencies
Nurse Anesthetist	Licensed Dietician/Nutritionist

The Provider Enrollment Unit will soon outreach to the above groups of providers. Providers will receive two letters for the re-validation process. The first letter contains a pre-determined Tracking ID. The second letter contains the password information. Providers are asked to log into the [Provider Enrollment Portal](#) with this Tracking ID and Password to verify the information that is currently in the Medicaid Management Information System within 35 days of the notification letter. Watch for more details in upcoming issues of the *Provider Update*.

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>

Step by step instructions are available on the EOHHS website to guide providers through the revalidation process.

[Revalidation Instructions](#)

**If you do not receive your letters or 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: DME Providers*

## Personal Emergency Response Systems, Home Modifications, and Specialized Supplies & Medical Equipment for Rhody Health Partners and Options

Effective July 1, 2016, personal emergency response systems (PERS), home modifications, and specialized supplies and equipment will be in-plan for Rhody Health Options and Rhody Health Partners. Claims for dates of service 7/1/2016 and after must be submitted to the appropriate managed care plan based on the beneficiary's enrollment.

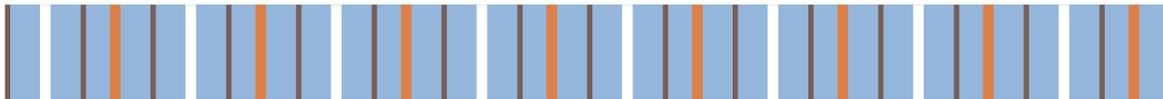
Examples of procedure codes included in this change are:

- S5160** Emergency Response System: Installation and Testing
- S5161** Emergency Response System; Service Fee, Per Month
- S5165** Home Modifications; Per Service
- T2028** Specialized Supply, Not Otherwise Specified, Waiver
- T2029** Specialized Medical Equipment, Not Otherwise Specified, Waiver

Please contact the appropriate managed care plan for billing and code information.

Neighborhood Health Plan : 401-459-6000

United Healthcare: 877-842-3210



*Attention: DME Providers*

## Durable Medical Equipment Provider Manual



The revised Durable Medical Equipment (DME) Provider Reference Manual is now posted to the website.

The manual is now in PDF format to make it easier for providers to download and print a copy for reference.

[To access the DME Provider Reference Manual  
Click Here](#)

**Attention Providers:****Home Health Final Rule (2348-F)**

CMS has released details of the Home Health Final Rule (2348-F), including Medicaid face-to-face requirements for home health services, policy changes, and clarifications related to home health and Durable Medical Equipment. EOHHS will continue to inform and educate providers over the upcoming months. Rhode Island expects to come into compliance by July 1, 2017.

To view informational slides from CMS,  
[Click Here](#)



## Enrolling in Neighborhood INTEGRITY, the New Medicare-Medicaid Plan

The Rhode Island Medicaid Program began sending enrollment letters to eligible individuals who have both Medicare and Medicaid in early June 2016. **During the week of August 29**, people with Medicare and Medicaid who are in the following groups may receive passive enrollment letters from the State (if they currently are enrolled in Neighborhood UNITY and Original Medicare):

1. Nursing home residents/ 30-day notice
2. Individuals living in the community who receive Long-Term Services and Supports (LTSS)/ 60-day notice
3. Individuals living in the community (no LTSS)/ 60-day notice

All of these individuals have both Medicare and Medicaid. If a person does not want to enroll in Neighborhood INTEGRITY, the Medicare-Medicaid Plan, they would need to call the Enrollment Line at 1-844-602-3469 to cancel or 'opt-out' of automatic enrollment prior to their effective enrollment date.

**For more information:**

**Neighborhood INTEGRITY, Member Services-** 1-844-812-6896, TTY 711; For information on network providers, drug formulary, and covered benefits.

**The POINT/Medicare-Medicaid Counselors-** (401) 462-4444, TTY 711; For help deciding whether to enroll in the new plan or another Medicare plan.

**MMP Enrollment Line-** 1-844-602-3469, TTY 711; For basic information on the plan and for enrolling, disenrolling, or opting out.

EOHHS website <http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/ICPhase2.aspx>  
Neighborhood website <https://www.nhpri.org/Medicare-Medicaid.aspx>

# Enrolling in Neighborhood INTEGRITY, the New Medicare-Medicaid Plan Verifying Eligibility in the Healthcare Portal

Enrollment in Neighborhood INTEGRITY can be viewed in the Healthcare Portal when verifying eligibility for a beneficiary.

In the Eligibility Verification Response, the provider can view enrollment in two sections: TPL Details or Premium Payment Details by expanding each section. Beneficiaries enrolled in Neighborhood INTEGRITY will display as "CMS Demonstration" .

Benefit Plan Details				
Plan Name	Effective From Date	Effective To Date	Base Deductible	Message
Categorically Needy Services	07/01/2016	08/19/2016	\$0.00	Limitations apply to Vision and Dental services
DEA Assisted Living	07/01/2016	08/19/2016	\$0.00	Refer to DEA policy for covered services

Service Type Code Details - Covered				
Medicare Details				
TPL Details				
Carrier Name	Policy Number	Coverage	Effective From Date	Effective To Date
NEIGHBORHOOD HEALTH PLAN OF RI - CMS DEMO		CMS Demonstration	08/01/2016	08/19/2016

Premium Payment Details			
Carrier Name	Effective From Date	Effective To Date	
CMS Demonstration	08/01/2016	08/19/2016	

Neighborhood INTEGRITY

Neighborhood INTEGRITY



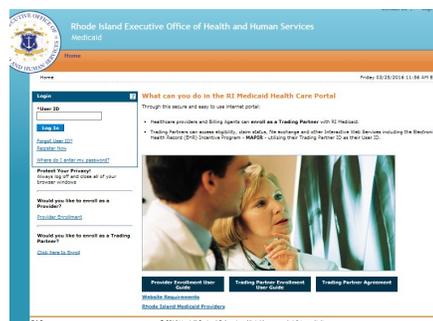
## Attention: Home Care Providers Submission of Claims

837 claim files created in the EVV system must be submitted using the Upload function in the Healthcare Portal .

**Beginning October 1, all claims MUST be created in the Sandata billing module and submitted through the Healthcare Portal.**

Providers were encouraged to participate in a webinar for Home Care Providers explaining the process for claim submission through the Healthcare Portal.

If you were unable to attend either of the two sessions, the presentation slides are available on the Provider Training and Education page of the EOHHHS website. The slides include instructions for submission of claims.



[To access the training slides, click here.](#)

## Pharmacy Spotlight

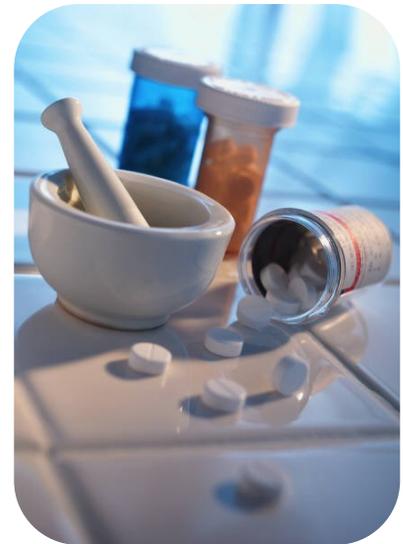
### *Meeting Schedule:*

Pharmacy & Therapeutics Committee  
Drug Utilization Review Board

#### 2016 Meeting Dates

September 13

December 13



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

**Date:** September 13, 2016

**Registration:** 7:30 AM

**Meeting:** 8:00 AM

**Location:** Hewlett Packard Enterprise  
301 Metro Center Blvd.,  
Suite 203  
Warwick, RI 02886

[Click here for agenda](#)

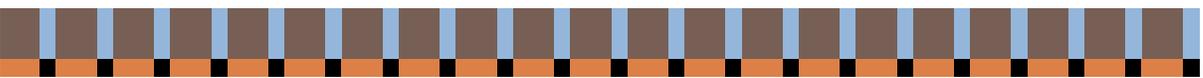
The next meeting of the  
Drug Utilization Review (DUR) Board  
is scheduled for:

**Date:** September 13, 2016

**Meeting:** 10:30 AM

**Location:** Hewlett Packard Enterprise  
301 Metro Center Blvd.,  
Suite 203  
Warwick, RI 02886

[Click here for agenda](#)



## Pharmacy Spotlight

### Medicaid Rebateable Drug Manufacturer Reminder

Only those drug products that are manufactured by pharmaceutical companies that have signed a rebate agreement with CMS pursuant to the Omnibus Budget Reconciliation Act of 1990 will be reimbursed. Please check the CMS website below to be sure the NDC submitted is from a pharmaceutical company that has signed a rebate agreement.

<https://www.medicaid.gov/medicaid-chip-program-information/by-topics/benefits/prescription-drugs/medicaid-drug-rebate-program.html>

## Pharmacy Spotlight

### Refillable Medication

#### *Q and A*



**Q.** How many refills are allowed?

**A.** The original prescription plus a maximum of 5 refills (except where Federal or State law prohibits).

**Q.** Are early refills allowed?

**A.** It is the responsibility of the pharmacist not to refill any prescriptions when it is apparent to him/her that at least 85% of the previous prescription has not been utilized in accordance with the prescriber's directions. (See the [November 2015 Provider Update](#) for instructions regarding DUR Alerts which include Early Refills)

**Q.** What category of medication is not refillable and requires a new written prescription at all times (with the exception of emergencies)?

**A.** All drugs classified in the current Federal Schedule II.

**Q.** What is the maximum Days Supply allowed for non-maintenance medication?

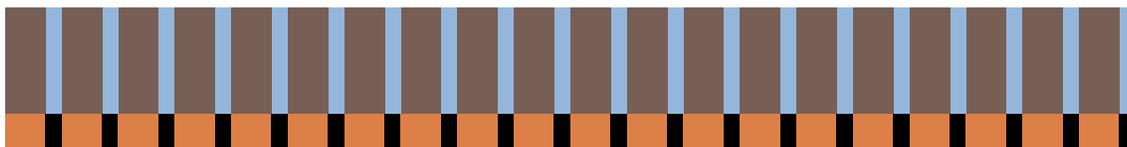
**A.** All non-maintenance medication is limited to a 30-day supply.

**Q.** Are there rules regarding the Days Supply for maintenance medication?

**A.** Yes. The original prescription may be dispensed in the quantity that the prescribing provider indicates on the prescription. Refills must be dispensed in quantities of 100.

**Q.** Are there any medications that must be dispensed in quantities 100?

**A.** Yes, digoxin, vitamins, hematinics and nitroglycerin (excluding patches).



## Pharmacy Spotlight

### RI Medicaid Pharmacy Cost of Dispensing Survey



Last week, pharmacies enrolled in RI Medicaid Fee-for-Service received a letter from the Medicaid Director, Anya Rader Wallack, regarding the upcoming cost of dispensing survey.

[Please click here to view the letter](#)

Myers and Stauffer LC has been engaged through the New England States Consortium Systems Organization (NESCSO) to perform the pharmacy cost of dispensing survey.

Informational meetings regarding the Medicaid Pharmacy Cost of Dispensing Survey are scheduled for pharmacies to learn more about this survey. The results will be used to evaluate the Medicaid pharmacy reimbursement methodology.

Surveyed pharmacies are invited to attend one of the informational meetings.  
[Attendance at the webinar sessions requires a reservation.](#)

Please call or email Myers and Stauffer for a reservation and for further meeting details:

Myers and Stauffer

by phone:

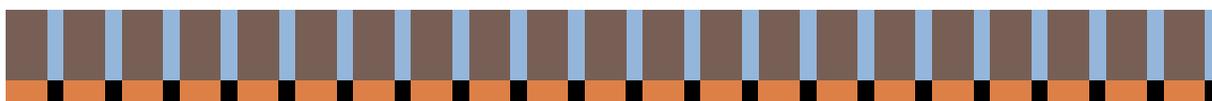
1-800-374-6858

or by email:

[Disp\\_survey@mslc.com](mailto:Disp_survey@mslc.com)

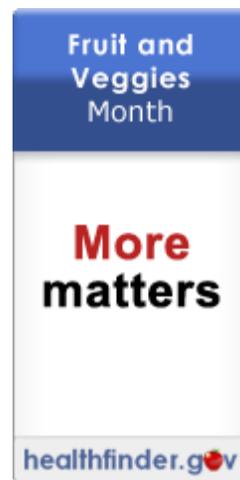
#### Schedule of Informational Meetings (via telephone and internet)

Date	Time (Eastern)
Tuesday, September 13	8:00 AM
Thursday, September 15	4:00 PM
Tuesday, September 20	7:00 PM
Wednesday, September 21	10:00 AM



## Fruits & Veggies—More Matters Month

*Produce for Better Health Foundation*



Eating fruits and vegetables has many health benefits. People who eat a healthy, balanced diet with plenty of fruits and vegetables can help lower their risk for:

- Some types of cancer
- Heart disease, including heart attack and stroke
- Type 2 diabetes
- High blood pressure
- Obesity

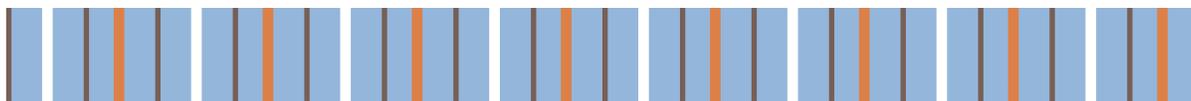
However, many people don't eat enough fruits and vegetables.

- Fewer than 1 in 4 adults eat the recommended amount of fruits every day.
- Fewer than 1 in 7 adults eat the recommended amount of vegetables every day.

Communities, health professionals, businesses, and families can work together to encourage people to eat more fruits and vegetables.

The Office of Disease Prevention and Health Promotion with the US Department of Health and Human Services published a tool kit with ideas for spreading the word.

[To access the toolkit, click here](#)



## September is National Childhood Obesity Awareness Month

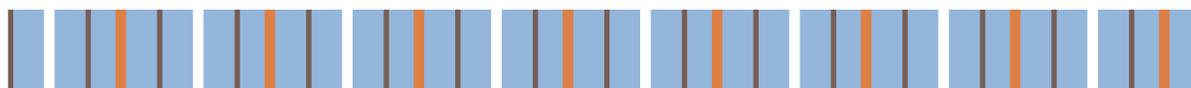
*American College of Sports Medicine*



One in 3 children in the United States are overweight or obese. Childhood obesity puts kids at risk for health problems that were once seen only in adults, like type 2 diabetes, high blood pressure, and heart disease.

The good news? Childhood obesity can be prevented. Communities, health professionals, and families can work together to create opportunities for kids to eat healthier and get more active.

Help spread the word.  
[Click here for resources and full toolkit.](#)





## Meaningful Use

- Have you looked at your Meaningful Use (MU) Dashboard to see if you are meeting the 10 MU Objectives?
- Do you have your MU Dashboard set up to run the correct reports?
- Did you know that some EHR MU Dashboards don't display the measures in the same wording as outlined in MU Modified Stage 2, 2015 – 2017?
- Have you scheduled your annual Security Risk Assessment yet? Don't wait for the last minute or your privacy and security vendor may not be able to help you before the end of Dec 2016
- 2016 is the last year to apply for the RI Medicaid EHR Incentive program
- March 30, 2017 – is the deadline to submit 2016 RI Medicaid EHR Incentive applications

Our highly skilled Relationship Managers are experts at Meaningful Use. Call us today to see how we can help you meet your Meaningful Use goals, *free of charge for a limited time*

Phone: 1-888-858-4815  
Email: [CurrentCare@riqi.org](mailto:CurrentCare@riqi.org)

## Transforming Clinical Practice Initiative (TCPI)

*CMS's Quality Payment Program is around the corner – are you ready?*

The Medicare Access and Chip Reauthorization Act of 2015 (MACRA), which has been introduced as the Quality Payment Program (QPP), begins evaluating Eligible Providers in 2017. Clinicians will be measured on the value and the quality of care they provide and can participate in the QPP by following one of two paths:

- Merit-based Incentive Payment System (MIPS)
- Alternative Payment Model (APM)

The Transforming Clinical Practice Initiative (TCPI) is an opportunity for clinicians to receive individualized technical assistance in preparation for these new reimbursement models. This individualized support provides education, coaching and mentoring to all members of the practice team as well as quality improvement tools and training, and peer-to-peer learning.

Why else should you participate? Because doing so will earn your practice points towards your MIPS score and the support from RIQI is available for no fee thanks to a grant from the Centers for Medicare & Medicaid Services (CMS).

Let our trained staff help you navigate these changes and help you to focus on what's important – providing the best patient care. Call us at 888-858-4815 or email us at: [info@riqi.org](mailto:info@riqi.org).



## If You Already Use CurrentCare...

*-Get free, personalized assistance at your desk*

- Do you make phone calls on a regular basis to get patient information such as labs and diagnostic reports?
- Do you find yourself logging into multiple systems to get various information?
- Do you want to learn more about how CurrentCare can help simplify your day-to-day practice?

Contact our program support team at [CurrentCare@riqi.org](mailto:CurrentCare@riqi.org) or 888.858.4815, Option 3 and schedule a utilization session! This service is offered at no fee thanks to a federal grant from the Office of the National Coordinator for Health Information Technology (ONC).



## Webinar: Hot HIPAA Topics – HIPAA Compliance Update with Linn Freedman

Friday, October 14<sup>th</sup> 7:30 – 9:00 AM

[Register Here](#)

RIQI's Annual HIPAA Training webinar with Linn Freedman is **free of charge** to all practices who have signed a participation agreement in any of our grant-sponsored programs or currently receive health IT consulting services, including all Medicaid providers.

### Description

This is a live Webinar presentation with industry leading privacy and security attorney Linn Foster Freedman of Robinson & Cole LLP. Linn will focus her presentation on hot topics related to privacy and security and HIPAA compliance including how your practice can proactively mitigate risks often encountered in the healthcare industry.

Please join us as we speak with Linn about current activities with data breaches and Rhode Island's new data breach law, issues with mobile devices and emails, and HIPAA compliance and enforcement. After the presentation, we will gladly open up the session for Q&A with attendees.

This session will also offer certification to fulfill the annual HIPAA training requirement. Certificates will be sent to attendees after the session.

### About Linn Freedman

*Linn Freedman, Partner at Robinson & Cole, practices in data privacy and security law, and complex litigation. She is a member of the firm's Business Litigation group and chairs its Data Privacy + Security Team. She currently serves as general counsel to the Rhode Island Quality Institute. Ms. Freedman focuses her practice on compliance with all state and federal privacy and security laws and regulations, as well as emergency data breach response and mitigation. She counsels clients on state and federal data privacy and security investigations and data breaches. To view the latest news about privacy and security matters, read Linn's blog:*

[www.dataprivacyandsecurityinsider.com](http://www.dataprivacyandsecurityinsider.com).

## RI Medicaid EHR Incentive Program Update



### Word on the Street: CMS Issues a New Proposed Rule

CMS has issued a new proposed rule in which providers will attest 90-days of meaningful use for Program Year 2016. However this is not final, and those providers scheduled to perform and attest for a full year of meaningful use, should plan to attest for the full year until the proposed rule is final.

Click on this CMS [Press Release](#) to learn more about the proposed changes to the CMS program and feel free to email [ohhs.ehrincentive@ohhs.ri.gov](mailto:ohhs.ehrincentive@ohhs.ri.gov) with any RI Medicaid EHR Incentive program questions.

### Calling all Medicaid Physicians, Nurse Practitioners, Certified Nurse Midwives and Dentists!



#### 2016 Is the Last Year to Participate and Earn Annual Incentives

Since Program Year 2015 recently closed, please inform your colleagues that Program Year 2016 is the last year providers can begin to participate in the RI Medicaid EHR Incentive program. Providers who do not apply by the 2016 program year will not be allowed to earn future year EHR Incentives. Up to \$63,750 of annual incentives can be earned by eligible providers who demonstrate meaningful use of certified EHR until the program sunsets in 2021.

Also note that on the first year Medicaid EHR Incentive applications, eligible providers can attest to AIU (Adopt, Implement or Upgrade) of their certified electronic health record technology (CEHRT) and earn the first year's incentive of \$21,250 or \$14,167. In the following years providers can attest to meaningful use to earn the remaining annual Medicaid EHR Incentive.

Hurry up and get on board and click [here](#) for more information about the requirements for the program and how you can earn a Medicaid EHR Incentive with your certified EHR! For those providers who have participated in past years and may have skipped years, you can continue to participate until 2021. Contact us by [email](#) for any questions you may have.

### MAPIR Upload Accepts Excel Files

The 5.7 MAPIR upgrade allows providers to upload Excel files! Previous MAPIR versions allowed users to upload PDF files only which posed problems in the past. If you have a file that is in Excel, we will gladly accept it in that format especially if it is a patient volume listing that you need to provide.

MAPIR still has a 2MB file size limit and will not accept any file larger than that amount. With PDF files, we recommend that you split up your file in 10 page increments and upload them separately. Email us at [ohhs.ehrincentive@ohhs.ri.gov](mailto:ohhs.ehrincentive@ohhs.ri.gov) with any uploading questions you may have and we'll be glad to assist you.