**Rhode Island Medicaid Program**

**PROVIDER update**

**Volume 285**

**October, 2016**

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**THIS MONTH’S FEATURED ARTICLES**

**New Integrated Eligibility System**

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**RI Medicaid Member ID Conversion**

Member ID numbers have changed!

See page 4 for important information

**RI Medicaid Provider Revalidation**

See page 6 for more information

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Send an email to:
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or click the subscribe button above.

Please put "Subscribe" in the subject line of your email.

In addition to the Provider Update, you will also receive any updates that relate to the services you provide.
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Attention: All Providers

New Integrated Eligibility System

On September 13, Rhode Island launched a new integrated eligibility system to improve the way the State delivers health and human services benefits to Rhode Islanders and their families. Through a single application, clients are 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 allows for much more efficient electronic sharing of information across health and human services programs, improving the experience for both beneficiaries and health care providers.

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.

Webinars were held to help providers learn about the new system.
To view the presentation slides, click here.

Reminders for Providers:

- Member IDs have changed. For more information read the article on page 4.
- PES users must upgrade software. For more information, see page 5.
- Trading Partners using X12 transactions must ensure that the MID field can accommodate 10 digits on submission, and that you have the ability to download X12 transactions with the expanded MID field. For more information, see article on page 5.
Attention: All Providers

Member ID Conversion

RI Medicaid converted member ID numbers from 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 this month.

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.

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.

For providers who use the 270/271 transaction to verify eligibility:
- If a social security number is submitted on the 270, the 271 will return the social security number.
- If the new MID is submitted, the MID will be returned. This will remain during the dual processing window.
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.

As a reminder, providers who use the 270/271 transaction to verify eligibility, may submit either the social security number or the new MID. If the SS number is submitted, the 271 will return back the social security number. If the new MID is submitted, the MID will be returned. This will remain during the dual processing window.

Non-PES users who want information on testing should send an email to: 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:

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

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](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.
Pharmacy Spotlight

**Meeting Schedule:**
Pharmacy & Therapeutics Committee
Drug Utilization Review Board

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

**Pharmacy Spotlight**

The following drugs changed status on the RI Medicaid Fee-for-Service Preferred Drug List (PDL) effective September 26, 2016

<table>
<thead>
<tr>
<th>Alzheimer’s Agents</th>
<th>Antiparkinson’s Agents</th>
</tr>
</thead>
<tbody>
<tr>
<td>donepezil ODT changed status to preferred</td>
<td>amantadine capsule changed status to preferred</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Atypical Antipsychotics</th>
<th>BPH Treatments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abilify tablet changed status to preferred</td>
<td>alfuzosin changed status to preferred</td>
</tr>
<tr>
<td>Abilify Maintena changed status to preferred</td>
<td></td>
</tr>
<tr>
<td>Aristada changed status to preferred</td>
<td></td>
</tr>
<tr>
<td>Invega Trinza changed status to preferred</td>
<td></td>
</tr>
<tr>
<td>Fanapt changed status to preferred</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Analgesics, Narcotics Long Acting</th>
<th>Ophthalmic Antibiotics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Butrans changed status to preferred</td>
<td>Ocuflox changed status to preferred</td>
</tr>
<tr>
<td>Embeda changed status to preferred</td>
<td>ofloxacin changed status to non-preferred</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Opiate Dependence Treatments</th>
<th>Stimulants and Related Agents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Narcan spray changed status to preferred</td>
<td>Adzenys XR ODT changed status to preferred</td>
</tr>
<tr>
<td></td>
<td>guanfacine ER changed status to preferred</td>
</tr>
<tr>
<td></td>
<td>Kapvay changed status to preferred</td>
</tr>
</tbody>
</table>

To view the entire Preferred Drug List please check the Rhode Island EOHHS Website at:
http://www.eohhs.ri.gov/ProvidersPartners/GeneralInformation/ProviderDirectories/Pharmacy.aspx

**RI Medicaid Pharmacy Cost of Dispensing Survey**

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. Myers and Stauffer LC has been engaged through the New England States Consortium Systems Organization (NESCO) to perform the pharmacy cost of dispensing survey. Informational meetings regarding the Medicaid Pharmacy Cost of Dispensing Survey were held for pharmacies to learn more about this survey. The results will be used to evaluate the Medicaid pharmacy reimbursement methodology.

Please click here to view the letter
Pharmacy Spotlight
Pharmacies and Vaccines

Q Can pharmacies bill for administering vaccines?

A No. Billing for administration of vaccines is submitted through the medical side of the Medicaid Program.

Attention Professional Providers:
Billing Administration Codes
For Vaccines

RI Medicaid does not reimburse for state supplied vaccines.
RI Medicaid will reimburse for the administration of the vaccines.

Procedure Codes

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>90460</td>
<td>Immunization administration through 18 years via any route, with counseling by physician</td>
</tr>
<tr>
<td>90461</td>
<td>Immunization administration through 18 years via any route, each additional vaccine</td>
</tr>
</tbody>
</table>

Vaccines with multiple components are considered as one unit. For example, procedure code 90696 (DTap, Tetanus, Acellular Pertussis, Polio) has four components; However it is considered as one unit and will be reimbursed as one unit.

If multiple vaccines are given, RI Medicaid will reimburse multiple administrations. For example: procedure codes 90748 (Hepatitis B), 90680 (Rotavirus vaccine), and 90670 (Pneumococcal Vaccine) are single components and can be reimbursed using one unit of procedure code 90460 for the first injection and procedure code 90461 for any subsequent injections. (Please note: An administration code is allowed for every injection performed.)

These claims must be sent for review on the CMS1500 paper form to:
Hewlett Packard Enterprise
Attention: Karen Murphy
P.O. Box 2010
Warwick, RI 02887

If you have any questions, please contact Karen Murphy at 401-784-8004 or by email: karen.murphy3@hpe.com
Enrolling in INTEGRITY, the New Medicare-Medicaid Plan

The Rhode Island Medicaid Program will be sending enrollment letters to eligible individuals who have both Medicare and Medicaid during the last week of September. People with Medicare and Medicaid who are in the following groups have the option to enroll in INTEGRITY for their Medicare and Medicaid benefits. Please note that people who receive the letter need to call the Enrollment Line at 1-844-602-3469 if they’d like to cancel or ‘opt-out’ of automatic enrollment.

Enrollment letters will be sent to:
- People who have Medicare and Medicaid and live in the community (at home, in an assisted living residence or group home) who receive Long-Term Services and Supports and people who live in the community but don’t receive LTSS. This is a 30-day reminder notice; individuals’ effective enrollment start date is November 1, 2016. Individuals receiving this notice live in all counties in Rhode Island except Providence County.
- People who have Medicare and Medicaid and live in the community (at home, in an assisted living residence or group home) but don’t receive Long-Term Services and Supports. This is a 60-day notice; individuals’ effective enrollment start date is December 1, 2016. All individuals receiving this notice live in Providence, Pawtucket or Cranston.

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. |
| **RIPIN Healthcare Advocate** | 1-855-747-3224, TTY 711; for help with appeals and problem solving. |

EOHHS will be offering Provider Office Hours starting in October 2016 for providers who would like updates or have specific questions on the Medicare-Medicaid Plan. The dates for October are: Oct 4 at 6 pm (audio, web-based meeting) and Oct 20 at 10 am at Cranston Public Library, Sockanosset Cross Rd., Cranston. Please RSVP to ohhs.integratedcare@ohhs.ri.gov if you are interested in attending.

EOHHS website [http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/ICIPhase2.aspx](http://www.eohhs.ri.gov/Initiatives/IntegratedCareInitiative/ICIPhase2.aspx)
Neighborhood website [https://www.nhpri.org/Medicare-Medicaid.aspx](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”.

**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 EOHHS website. The slides include instructions for submission of claims.

To access the training slides, click here.
Meaningful Use Reminders

- If you are participating in the EHR Incentive program, you and your staff need to participate in an annual HIPAA training. If you haven’t done so already, please register below for Hot HIPAA Topics with Linn Freedman.

- 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. To learn more about the importance of Security Risk Assessments, please view the webinar that we hosted on August 19th: Security Risk Assessments – What You Need to Know. Presenters were Don Nokes from NetCenergy and Sue Dettling from RIQI.

If you have questions or need help with Meaningful Use, contact us today to see how we can help you meet your Meaningful Use goals.*

*Due to a contract with RI’s Executive Office of Health & Human Services, MU consultation is available at no charge to Medicaid providers, and for a reasonable fee to Medicare providers.

Phone: 1-888-858-4815
Email: CurrentCare@riqi.org

Webinar: Hot HIPAA Topics – HIPAA Compliance Update with Linn Freedman
Friday, October 14th  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.
HIPAA Compliance Update with Linn Freedman—Continued

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.

Now Available: New CurrentCare Guidebook

We’ve updated our CurrentCare Guidebook – take a look here: http://www.CurrentCareRI.org/Guidebook
The Guidebook lists over 440 data sources that are sending patient health information, which you can access through the CurrentCare Viewer including labs, medications, and problem lists.

Contact our program support team at CurrentCare@riqi.org or 888.858.4815, Option 3 for information on how you can gain access to CurrentCare services – many offered at no cost thanks to a federal grant from the Office of the National Coordinator for Health Information Technology (ONC).

Do You Already Use CurrentCare Viewer to Improve Quality and Care?
Participate in our Rally Contest and your team could win a $100 Panera Bread gift card. Click here for details.

Transforming Clinical Practice Initiative (TCPI)

The Transforming Clinical Practice Initiative (TCPI) continues to positively impact the Rhode Island provider community. So far 1,200 clinicians have signed up to get hands-on assistance with practice transformation and preparing for new Medicare payment models. Most of these clinician are specialists from various disciplines including: Emergency Physicians, Surgeons, and Radiologists. RIQI is planning to convene collaboratives to work together to increase quality of care and improve patient outcomes. In bringing various clinicians together in a collaborative environment, we can work together to solve some of our most pressing health care system issues.

For information about how you can participate in this program and receive consulting services free-of-charge, please call us at 888-858-4815 or email us at: info@riqi.org.
RI Medicaid  EHR Incentive Program Update

Want to learn more about Security Risk Assessments?

Last month the Rhode Island Quality Institute (RIQI) and Centricity provided a Security Risk Assessment webinar. If you want to understand what is involved with an SRA and you missed the webinar, you are welcome to listen and view it here. It’s a nice way to learn about HIPAA compliance for your practice.

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 with any RI Medicaid EHR Incentive program questions.

2016 Is the Last Year to Participate and Earn Annual Incentives

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

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 with any uploading questions you may have and we’ll be glad to assist you.
Breast Cancer Awareness Month

American Cancer Society

In October, Breast Cancer Awareness month is observed nationally. Breast Cancer is the second most common kind of cancer in women. About 1 in 8 women born today in the United States will get breast cancer at some point.

The good news is that many women can survive breast cancer if it’s found and treated early.

The American Cancer Society offers information on their website, including:
- Breast Cancer information for patients
- Breast Cancer research
- Programs and services for people with Breast Cancer
- Ways to get involved

In addition, the Healthfinder.gov website offers downloadable resources for providers.

Resources for Providers

Program Integrity: Self-Audit Toolkits

CMS Resources

The Centers for Medicare and Medicaid Services (CMS) website contains informational materials for all healthcare professionals. The Program Integrity section of the website contains materials that are presented as guidelines intended to educate physicians and other healthcare professionals on the importance of self-audit practices.

The website contains booklets and factsheets as resources for self-audits, as well as provider specific toolkits, including toolkits for behavioral health, home and community based services, hospice care, personal care, and nursing homes, among others. Other more general toolkits are also available.
Attention: Hospice Providers

Hospice Rates Effective 10/1/2016

<table>
<thead>
<tr>
<th>Procedure Code</th>
<th>Description</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>T2042</td>
<td>Hospice Routine Home Care Days 1-60</td>
<td>$190.80</td>
</tr>
<tr>
<td>T2042</td>
<td>Hospice Routine Home Care Days 61+</td>
<td>$150.01</td>
</tr>
<tr>
<td>T2043</td>
<td>Hospice Continuous Home Care per hour</td>
<td>$40.21</td>
</tr>
<tr>
<td>T2044</td>
<td>Hospice Inpatient Respite Care</td>
<td>$179.97</td>
</tr>
<tr>
<td>T2045</td>
<td>Hospice General Inpatient Care</td>
<td>$734.94</td>
</tr>
<tr>
<td>Service Intensity Add-On G0155</td>
<td>Services of clinical social worker in home health or hospice setting, each 15 minutes</td>
<td>$10.05</td>
</tr>
<tr>
<td>Service Intensity Add-On G0299</td>
<td>Direct Skilled nursing services of a registered nurse in the home hospice or hospice setting, each 15 minutes</td>
<td>$10.05</td>
</tr>
</tbody>
</table>

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