Special Bulletin: Review of Durable Medical Equipment Rates

Friday, December 21, 2018
NC Medicaid has been reviewing the Medicaid Durable Medical Equipment rates to comply with the new Centers for Medicare and Medicaid Upper Payment Limit requirements. While further review is needed, NC Medicaid wanted to publish this bulletin to provide a status update.

More

Special Bulletin: Optical Services Covered for Adult Medicaid Beneficiaries Effective Jan. 1, 2019

Thursday, December 20, 2018
Effective Jan. 1, 2019, optical services shall be covered for adult Medicaid beneficiaries in accordance with S. L. 2018-97, Part III, Section 11H.13.(c). However, Centers for Medicare and Medicaid Services (CMS) approval of the corresponding State Plan Amendment is pending.

More

The Affiliation Edit: What It Is and How to Prevent It

Tuesday, December 4, 2018
This edit is in place to ensure billing providers are affiliated with the rendering (individual) providers for whom they are billing to prevent inaccurate payment or fraud.

More
Cemiplimab-rwlc Injection, for Intravenous Use (Libtayo®) HCPCS Code J9999: Billing Guidelines

Tuesday, December 4, 2018
Effective with date of service Oct. 8, 2018, North Carolina Medicaid and NC Health Choice programs cover cemiplimab-rwlc injection, for intravenous use (Libtayo) for use in the Physician Administered Drug Program when billed with HCPCS code J9999 - Not Otherwise Classified, Antineoplastic Drugs.

More

Errors on Provider Records in NCTracks

Tuesday, December 4, 2018
Enrollment applications submitted with incorrect data including name, social security number and date of birth result in application denials and withdrawals. As a result, providers must submit new applications and pay any applicable fees.

More

Proposed Clinical Coverage Policies for Public Comment

Tuesday, December 4, 2018
As of Dec. 1, 2018, there are no NC Medicaid policies posted for public comment.

More
Policy Clarification for Out-of-state Providers

Tuesday, December 4, 2018
Out-of-state providers, including border-area providers, must be enrolled in Medicare or their home-state Medicaid program to enroll in North Carolina Medicaid and NC Health Choice programs.

More

Money Follows the Person Project Update and Application Change

Tuesday, December 4, 2018
The Money Follows the Person Demonstration Project (MFP) team is preparing for the 2019-2023 Medicaid Transition Period and has updated its application for the coming year.

More

Summary of New or Amended Clinical Coverage Policies Posted Since Nov. 1, 2018

Tuesday, December 4, 2018
The following new or amended Medicaid and NC Health Choice clinical coverage policies were posted since Nov. 1, 2018.

More

Change In Scope of Services (CISS) Policy

Tuesday, December 4, 2018
In accordance with the North Carolina’s Medicaid State Plan, Federally Qualified Health Centers and Rural Health Centers may request a rate adjustment due to change in scope of services.

More
Telephonic Evaluation and Management is Again Being Offered for the 2018-2019 Influenza Season

Tuesday, December 4, 2018
In response to the anticipated higher than normal number of influenza cases this coming season, effective December 1, 2018, North Carolina Medicaid is offering telephonic evaluation and management services to beneficiaries who are actively experiencing flu-like symptoms.

More

Clinical Coverage Policy (CCP) 1-H, Telemedicine and Telepsychiatry

Tuesday, December 4, 2018
System changes have been completed to allow non-psychiatric Nurse Practitioners and Physician Assistants to receive reimbursement for CPT codes 90791 – Psychiatric Diagnostic Evaluation and 90792 – Psychiatric Diagnostic Evaluation with Medical Services when provided via telemedicine/telepsychiatry.

More

Preadmission Screening Resident Review (PASRR) Program Update

Tuesday, December 4, 2018
This article talks about the new help desk number for PASRR, the new fax number for PASRR-related documents and uploading PASRR-related documents to NCMUST.

More
Hospital Outpatient Claims Audits Resume

Tuesday, December 4, 2018
NC Medicaid has instructed Health Management System (HMS) to resume audits of hospital outpatient claims. These reviews are commencing now, as the claims adjustment reason code issue has been resolved.

More

Diagnosis Codes Being Added to Exemption List for the Annual Office Visit Limit

Tuesday, December 4, 2018
Medicaid has designated specific ICD-10-CM diagnosis codes that do not count toward the annual visit limitation. These codes are reviewed regularly and updated as appropriate.

More

Mogamulizumab-kpkc Injection, for Intravenous Use (Poteligeo®) HCPCS Code J9999: Billing Guidelines

Tuesday, December 4, 2018

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