From the Pharmacy Unit...

Prescriber List
A list showing active Nevada Medicaid and Nevada Check Up prescribers and their ID numbers is now available online at http://nevada.fhsc.com (select “Prescriber List” from the “Pharmacy” menu). Please refer to the list frequently, as it will be updated monthly.

If you have any questions regarding the list, please contact the First Health Services Technical Call Center at (800) 505-9185 or faxing the request to (800) 229-3928. Pharmacy PA forms are available at http://nevada.fhsc.com (select “Prescriber List” from the “Pharmacy” menu).

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Clinical Prior Authorization (PA) Edits
Specific details as well as updates to Clinical PA Edits can be found at the following Division of Health Care Financing and Policy (DHCFP) website: http://www.dhcfp.state.nv.us/ (click on “Medicaid Manuals,” select “Chapter 1200-Prescription Services (Rx)” and then scroll down to “Appendix A”).

The prescriber or pharmacy may request prior authorization by calling the First Health Services Clinical Call Center at (800) 505-9185 or faxing the request to (800) 229-3928. Pharmacy PA forms are available at http://nevada.fhsc.com (select “Pharmacy PA” from the “Pharmacy” menu).

Important note: These dates apply to date of receipt at First Health Services, not the date of service and not the date the claims are mailed.

CMS-1500: Providers may use either the current (12/90) version or the new (08/05) version Jan. 2, 2007, through April 1, 2007. The new (08/05) version is required for claims received at First Health Services on or after April 2, 2007.


New claim form instructions for the CMS-1500 (08/05) and the 2006 ADA have been posted at https://medicaid.nv.gov (select “Billing Manual” from the “Providers” menu). The new UB-04 instructions will be posted soon.

Information that the Centers for Medicare & Medicaid Services (CMS) distributes via its website and to State Medicaid programs regarding the National Provider Identifier (NPI) contains two slogans: “NPI: Get It. Share It” and “Getting an NPI is free – not having one can be costly.” Both of these slogans serve to remind providers that it is essential to act now to obtain an NPI to be ready to use it in 2007.

Get It
NPIs are free and are assigned by an enumerato on behalf of CMS. Health care providers can apply for their NPI in one of three ways:
1. Log on to the National Plan and Provider Enumeration System (NPPES) and apply online at https://nppes.cms.hhs.gov/NPPES/Welcome.do; or
2. Agree to have an Electronic File Interchange Organization (EFIO) submit application data on the provider’s behalf (i.e., through a bulk enumeration process) if an EFIO requests their permission to do so; or
3. Obtain a copy of the paper NPI Application/Update Form (CMS-10114) and mail the completed, signed application to the NPI Enumerator. The form is available only upon request through the NPI Enumerator through the following methods:
   - Phone: (800) 465-3203 or TTY 1-800-692-2326
   - E-mail: customerservice@npienumeratort.com
   - Mail: NPI Enumerator, P.O. Box 6509, Fargo, ND 58108-6059

If you have questions concerning the NPI application, call (800) 465-3203.

Share It
To comply with the NPI Final Rule, the State of Nevada Division of Health Care Financing and Policy (DHCFP) requires that all NPI-eligible providers furnish their NPI and Taxonomy Code to First Health Services no later than May 1, 2007. Please return the questionnaire that has been mailed to providers who have not yet reported their NPI, or complete and mail the Provider Information Change Form (FH-33) posted at https://medicaid.nv.gov.
Nevada Medicaid News

NPI: Get It. Share It. Use It…

Not Having One Can Be Costly…

An NPI will be required on all electronic and paper claims received at First Health Services or on or after May 23, 2007. It’s an NPI Taxonomy information is not received by First Health Services and not included on Nevada Medicaid and Nevada Check Up claims submitted for payment, First Health Services will be unable to process the claims and they will be denied.

NPI Central

For providers’ convenience and reference, First Health Services has placed a link titled “NPI Central” on the homepage of the Nevada Medicaid website (https://medicaid.nv.gov) that furnishes access to them: any pieces of information posted on the website regarding NPI. The items include frequently questioned topics, web announcements, and newsletter articles that contain answers and resources for NPI issues. Please refer to the most current items for accurate date and information.

For a my other questions, please contact First Health Services’ Provider Enrollment Unit at (775) 638-3472.

Quarterly Update on Claims Paid

Nevada Medicaid and Nevada Check Up paid providers $273,757,904 in claims during the three-month period of July, August and September 2006. Nearly 100 percent of current claims continue to be adjudicated within 30 days. The DHCFP and First Health Services thank you for participating in Nevada Medicaid and Nevada Check Up.

A Message from DHCFP Regarding Prevention

Medicaid would like to invite you to join us as we strive to heighten the awareness of breast cancer prevention and encourage early detection and treatment of breast cancer.

Mammography screenings are a woman’s best chance for detecting breast cancer early. Medicaid provides coverage for mammography screenings, along with yearly gynecologic exams, including breast examinations. Medicaid also encourages women to practice regular self-breast exams. One of our main goals is to prevent the disease from developing or present serious complications of the disease. Early detection is the key.

DHCFP Awards New Managed Care Organization (MCO) Contracts

The Division of Health Care Financing and Policy (DHCFP) awarded Health Plan of Nevada and Anthem BCBS PP (Partnership Plan) contracts to provide Medicaid and Nevada Check Up services to Nevada since 1987. With your support, transition to the new MCOs has been smooth and successful.

Nearly 100 percent of current claims continue to be adjudicated within 30 days. The DHCFP and First Health Services thank you for your continued participation in Nevada Medicaid and Nevada Check Up.

Some Remember for Billing Staff

Verify Recipient Eligibility

Recipients must be eligible for Nevada Medicaid and Nevada Check Up benefits before you start delivering services. You or your billing service must have access to the e-mail address has been updated to renotpl@hmsy.com.

PCG Merges with Health Management Systems (HMS)

As of Sep 2006, HCA Management Systems (HMS) merged with PCG to become a co company under HMS. T he same third party liability (TPL) team that served the State of Nevada under PCG continues to provide TPL services as members of the HMS team.

Confidentiality of client’s information is not compromised. PCG’s Business Lines Unit (775) 684-3692, or (800) 962-8074, or Anthem BCBS PP (Partnership Plan) phone numbers are: (800) 962-8074.

If you have a question about the new MCOs, please call the DHCFP Business Lines Unit at (775) 684-3692.

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Nevada Medicaid News

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The Division of Health Care Financing and Policy (DHCFP)’s awarded Health Managed Care Plans (HMOs), TANF/CHAP and Nevada Check Up recipients in urban Washoe and urban Clark counties.

Health Plan of Nevada and Anthem BCBS PP began providing all regular Managed Care Organization (MCO) services, including dental, to recipients on Nov. 1, 2006. First Health Services Corporation continues to administer prior authorization services and provider reimbursements for Fee for Service (FFS) recipients.

If you have any questions about the new MCOs, please call the DHCFP Business Line at (775) 684-3692. With your support, transition to the new MCOs has been smooth and successful.

If Nevada Medicaid recipients have questions about a Managed Care Organization’s benefit plan or provider network, please refer them to the following:

- Health Plan of Nevada: (800) 962-8074
- Anthem BCBS PP (Partnership Plan): (866) 474-6138

If recipients have questions about Medicaid eligibility, please refer them to one of the following:

- Nevada Medicaid
- Health Management Solutions
- Public Consulting Group

Further information can be found at the following websites:

- Nevada Medicaid: www.nvhealthplan.com
- Health Management Solutions: hms.com
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- Nevada Medicaid Check Up: www.nvhealthplan.com/CheckUp

Some Reminders for Billing Staff

Paper CMS-1500 Claim Forms

When submitting claims for payment on a paper CMS-1500 form, please be sure that the bar code area in the top right corner of the claim form is clear of any writing, printing, attachments, stickers or staples. The top right corner of the paper form is now used by First Health Services to image and process claims. Providers are encouraged to order and submit CMS-1500 forms that are printed with the bar code.

TIP for Dental Billers

When billing for a temporary flipper (temporary partial), use the following procedure codes:

- D820 for Interim partial denture (maxillary), includes any necessary claps and rests.
- D821 for Interim partial denture (mandibular), includes any necessary claps and rests.

When claiming for MHSC, the “flipper” must meet the criteria specified in the Nevada Medicaid Services Manual (MMS) Chapter 1003.5A.

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**Fall 2006 Volume 3, Issue 4**

### Updated Timetable for New Claim Forms for 2007

The claim forms in use today to bill Nevada Medicaid will be updated as follows:

- **CMS-1500** is being revised for implementation in 2007.
- **UB**:
  - UB-92, ADA 1999 version 2.000a is set to go out at the end of this year; the new UB-04 version will be available in January 2007.
  - UB-04 form is in use through May 22, 2007.
  - UB-04 is required for claims received at First Health Services on or after May 23, 2007.

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