Nevada Medicaid News

Tamper-Resistant Prescription Pads Required April 1, 2008

On Sept. 29, 2007, President George W. Bush signed a law delaying the implementation date to April 1, 2008, for the requirement that all written prescriptions for fee-for-service Medicaid recipients be written on tamper-resistant prescription pads.

Section 7002(b) of the U.S. Troop Readiness, Veterans’ Care, Katrina Recovery and Iraq Accountability Appropriations Act of 2007 requires that all written, non-electronic prescriptions for Medicaid outpatient drugs be executed on tamper-resistant pads in order for Medicaid to receive Federal Financial Participation.

The provision, originally scheduled to be implemented Oct. 1, 2007, will become effective April 1, 2008.

According to the Centers for Medicare & Medicaid Services (CMS), a prescription must contain at least one of the following three characteristics to be considered tamper-resistant on April 1, 2008:

1. One or more in-draught-recognized features designed to prevent unauthorized copying of a completed or blank prescription form;
2. One or more industry-recognized features designed to prevent the erasure or modification of information written on the prescription by the prescriber; and/or
3. One or more industry-recognized features designed to prevent the use of counterfeit prescription forms.

Effective April 1, 2008, the Nevada Medicaid Program requires the use of tamper-resistant pads that meet one of the above criteria on all non-electronic, outpatient prescriptions. No later than Oct. 1, 2008, a prescription pad must contain all of the above three characteristics to be considered tamper-resistant.

Nevada Medicaid does not recommend or endorse any particular vendor for tamper-resistant prescription pads. It is the prescriber’s responsibility to use a tamper-resistant pad that meets the CMS criteria. Nevada Medicaid requires that the prescriber contact their supplier regarding tamper-resistant pads. If you are uncertain of such supplier, please visit the California Office of the Attorney General’s website: http://www.ag.ca.gov/bne/security_prescription_printers.php.

First Quarter 2008 Volume 5, Issue 1

Training Scheduled for Pre-Admission Screening and Resident Review (PASSR)

The Division of Health Care Financing and Policy (DHCFP), First Health Services and the Division of Mental Health and Developmental Services (MHDS) invite providers to attend training for Pre-Admission Screening and Resident Review (PASSR). This training is pertinent to the following provider types: nursing facilities, acute hospitals, rehabilitation hospitals, and home health and hospice agencies.

The half-day training sessions will update providers on: policy related to PASSR; proper completion and timely submission of PASSR; and resources for Specialized Services and Services of Lesser Intensity.

Training Schedule:

- Reno: Thursday, May 8, 2008 (7:30 a.m. and 12:30 p.m.)
- Las Vegas: Thursday, May 15, 2008 (7:30 a.m. and 12:30 p.m.)
- Carson City: Thursday, May 22, 2008 (7:30 a.m.)
- Elko: (via teleconference) Thursday, May 22, 2008 (7:30 a.m.)

This training program will be submitted for continuing education credits (CEUs) for nurses, social workers and long-term care administrators.

For more information or to register, contact Pam Assis by calling (775) 684-3619 or by sending an e-mail to PASis@dchapter.org.

Full Implementation of NPI Scheduled for May 23, 2008

Nevada Medicaid/Nevada Check Up will require only National Provider Identifiers (NPIs) or Atypical Provider Identifiers (APIs) on all claims received at First Health Services on and after May 23, 2008. Provider Medicaid Numbers/legacy numbers will no longer be valid for use and NPIs/APIs must be used.

If you have not already done so, please report your NPI and Taxonomy Code(s) to First Health Services as soon as possible by completing and mailing the Provider Information Change Form (FH-33) posted at https://medicaid.nv.gov (select “Forms” from the “Providers” menu).

Contact your service center (clearinghouse) or practice management staff regarding NPI compliance if you have not already done so.

Please ask the provider for their NPI online at https://nppes.cms.hhs.gov (click on “National Provider Identifier (NPI)” and follow the instructions). A paper application may be obtained online at the same website or by calling (800) 465-3203 or TTY 1-800-692-2326.

Pharmacy Providers: NPI Required for Prescriber ID Beginning May 23, 2008

Pharmacy providers will be required to use the prescriber’s National Provider Identifier (NPI) instead of the prescriber’s Provider Medicaid Number/legacy number when entering the prescriber’s ID on claims received at First Health Services on and after May 23, 2008. Prescriber “dummy” identification numbers used in the past will no longer be accepted on claims received at First Health Services on and after May 23, 2008.

Please ask the provider for the appropriate NPI. The Centers for Medicare & Medicaid Services (CMS) has published the NPI Registry, which Pharmacy providers may access to look up a prescriber’s NPI. A link to the NPI Registry is posted at https://medicaid.nv.gov (select “Prescriber List” from the “Pharmacy” menu).

Please contact your software vendor or your corporate compliance department regarding NPI readiness.

Visit https://medicaid.nv.gov weekly for important updates and information

The 2008 Provider Training Catalog is online at http://nevada.fhsc.com
CMS Provides NPI Enumeration Misconceptions & Facts

In conversations and correspondence with health care providers, Nevada Medicaid has observed some misconceptions and facts concerning the NPI (National Provider Identifier) enumeration system. The NPI is required for any health care provider system. For more information regarding the National Plan of Systems (NPPES), visit the CMS website at https://nppes.cms.gov. For the text of the NPI Final Rule, visit http://www.cms.hhs.gov/NationalProviderIdentStand/Downloads/NPIfinalrule.pdf.

**Misconception Fact**

**NPPES does not send data to the Medicare or Medicaid provider enrollment systems.**

NPPES does not send data to Medicare or Medicaid, but instead maintains a NPI Enumerator system that allows healthcare providers to enroll in Medicare and Medicaid programs.

**NPPES sends data directly to Medicare or Medicaid claims systems.**

NPPES maintains NPI Enumerator systems that do not send claims data directly to Medicare or Medicaid. Instead, claims data is submitted through the Medicaid and Medicare claims systems.

**NPPES is a part of the Medicaid and Medicare provider enrollment systems.**

NPPES is not part of the Medicaid or Medicare provider enrollment systems. Instead, it is a stand-alone system that allows healthcare providers to enroll in Medicare and Medicaid.

**NPPES does not verify licenses or credentialing.**

NPPES verifies only information reported by healthcare providers. It does not verify licenses or credentialing information.

**Online Authorizations for Prescription Drugs**

Nevada Medicaid/Nevada Check Up provides an online way to submit prior authorization requests. (PA) requests for prescription drugs. Pharmacy Web PA allows providers to request PAs online and receive real-time approvals. Providers may still call or fax PA requests, but the advantages of using the online process include: creating a PA online and receiving authorization instantly in many cases; accessing Pharmacy Web PA 24 hours a day; receiving prompt to enter information; checking the status of the request; saving data and returning later to enter additional data; and printing a completed copy for your records.

**Physician/Outpatient-Facility Administered Drug Claims Require NDC & NDC Quantity**

Effective on claims received at First Health Services on and after Jan. 1, 2008, Nevada Medicaid now requires National Drug Codes (NDC) and NDC quantities to be included on claims for physician-/outpatient-facility administered drugs. This requirement applies to p< 0.05 across all discount terms and results in forms CM 5-1500 and UB-04 and electronic transactions 837P and 837T. tion of a claim was adjudicated. Please contact First Health Services by calling (877) 638-3472 or send an e-mail to nevadamedicaid@hsc.com. If you have questions regarding Medicaid Policy or Rates, you may contact First Health Service or other contacts. Follow the directions to find the person at DHCFP who can answer your question. You can either phone the contact person or send an e-mail.

**Nevada Medicaid Online**

Nevada Medicaid Online is a Medicare and Medicaid system. Nevada Medicaid Online is maintained by CMS for the healthcare provider community for NPI purposes, not just Medicaid and Medicare providers. The functions of the NPI Enumerator are not specific to any enrollment systems.

**Contact Information**

If you have a question concerning the manner in which a claim was adjudicated, please contact First Health Services by calling (877) 638-3472 or send an e-mail to nevadamedicaid@hsc.com. If you have questions about Medicaid Policy or Rates, you may contact First Health Service or other contacts. Follow the directions to find the person at DHCFP who can answer your question. You can either phone the contact person or send an e-mail.

**Quarterly Update on Claims Paid**

Nevada Medicaid and Nevada Check Up paid out to providers $238,504.09 in claims during the three-month period of October, November and December 2007. Nearly 100 percent of current claims continue to be adjudicated within 3 days. The DHCFP and First Health Services thank you for participating in Nevada Medicaid and Nevada Check Up.

**Recent MSM Changes**

The following chapters in the Medicaid Services Manual (MSM) were revised between December nber 2007 and February 2008.

- Chapter 300 - Pharmacy
- Chapter 370 - Rates
- Chapter 1460 - Home Health Agency
- Chapter 3300 - SURs
- Chapter 3600 - Managed Care

Any individual who enrolls in Medicaid is required to enroll in the Medicare primary payer system. Providers who do not have an NPI will not be reimbursed for services rendered to Medicare beneficiaries.

To take advantage of his second tool, place your list of NDC’s (please limit your request to 150 drugs) in an Excel spreadsheet format. Provide the 11-digit NDC as you would on the claim, i.e., without any dashes, hyphens or other punctuation. For instructions on entering leading zeros, please refer to the claim form instructions specified in Field 24A of CMS-1500 (version 08/05) or Field 45 of UB-04.

To submit your list of NDC’s via e-mail to First Health Services. In return, we will send you a list of the corresponding measure of each NDC submitted.

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**To the extent that the information contained herein is addressed, please contact First Health Services by calling (877) 638-3472 or send an e-mail to nevadamedicaid@hsc.com. If you have questions about Medicaid Policy or Rates, you may contact First Health Service or other contacts. Follow the directions to find the person at DHCFP who can answer your question. You can either phone the contact person or send an e-mail.**

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Physician/Outpatient-Facility Administered Drug Claims Require NDC & NDC Quantity

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In correspondence with health care providers, CMS has discovered misconceptions concerning the National Provider Identifier (NPI) Enumerator and the National Provider Enrollment System (NPPES). In the tables below, CMS has included some of the misconceptions and the facts that correct those misconceptions.

For more information regarding the NPPES, visit the CMS website at https://nppes.cms.hhs.gov. For the text of the NPI Final Rule, visit http://www.cms.hhs.gov/NationalProviderId/Downloads/NPIfinalrule.pdf.

Misconception Fact

NPPES does not send data to the Medicare or Medicaid provider enrollment systems or to the provider enrollment system of any health plan. The NPPES system does not function as a part of the Medicare or Medicaid provider enrollment systems.

Obtaining an NPI is required in order for a health care provider to enroll in Medicaid or Medicare; however, the NPI is not a separate entity that is enrolled in that health plan.

As defined in the NPI Final Rule, obtaining a NPI does not guarantee payment to the health care provider by any health plan. NPI assignment simplifies and enhances the uniqueness of a health care provider by allowing the health care provider to receive payment from multiple entities that may require verification of the health care provider's identity.

NPI is a Medicare and Medicaid system.
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CMS Provides NPI Enumeration Misconceptions & Facts

In c/onversations and correspondence with health care providers, CMS has discovered misconceptions concerning the NPI. In the table below, CMS has included some of the misconceptions and the facts that correct those misconceptions.

Recent MSM Changes
The following changes in the NPI Enrollment System have been made.

Nevada Medicaid News

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