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Review Resources for Current Novel Coronavirus (COVID-19) Public Health Emergency Information

Providers are reminded that multiple resources offer current information and instructions regarding the Novel Coronavirus (COVID-19) Public Health Emergency. The following resources will also provide updates regarding the unwinding of the Public Health Emergency.

- The Division of Health Care Financing and Policy (DHCFP) has created a webpage at http://dhcfp.nv.gov/covid19/ to answer frequently asked questions and to share information and resources pertaining to the status of COVID-19 and its impact on Nevada Medicaid recipients and providers. The webpage provides the Nevada Medicaid Response to Novel Coronavirus (COVID-19), as well as many useful links for recipients and providers.
- Multiple web announcements have been posted on the provider website
 at https://www.medicaid.nv.gov. Providers may view all COVID-19
 related web announcements by selecting the "COVID-19" category from
 the drop-down list on the Announcements/Newsletters webpage. The
 full list of COVID-related announcements will appear for providers to
 review.
- Valuable information is also available in the three COVID-19 billing guides: 1) COVID-19 General Billing Guide; 2) COVID-19 Community-Based Testing & Vaccination Billing Guide; and 3) Provider Type 22 Dentist: COVID-19 Vaccination Administration Claim Reimbursement Guide. All Nevada Medicaid Fee-for-Service billing guides, including the three related to COVID-19, can be found on the Providers/Claims Billing Information webpage at: https://www.medicaid.nv.gov/providers/BillingInfo.aspx. The COVID-19 Billing Guides section is located at the top of the webpage.
- A Member Outreach page is available with resources related to COVID-19 that providers and partners can distribute to members. The Member Outreach page is available at: https://dhcfp.nv.gov/Pgms/CPT/COVID-19/MemberOutreach/

Quarterly Update on Claims Paid

Nevada Medicaid and Nevada Check Up paid out to providers \$1,305,855,187.66 in claims during the three-month period of January, February and March 2022. Nearly 100 percent of current claims continue to be adjudicated within 30 days. Thank you for participating in Nevada Medicaid and Nevada Check Up.

Providers May Sign Up to Receive Nevada Medicaid Notification Emails over ListServ

Providers may sign up to receive emails directly from Nevada Medicaid about a variety of topics. Nevada Medicaid sends notifications over ListServ direct to your email regarding news, initiatives and public meetings.

The <u>Nevada Medicaid Notifications & News</u> webpage lists the available ListServ options, which include Behavioral Health News, Public and Member Notifications, Primary Care Office Notifications and Nevada Medicaid Updates.

New ChatBot Provides Self-Service Option to Answering Providers' Frequently Asked Questions

new tool has been added to the <u>Nevada Medicaid provider website</u> to provide a self-service option to answer providers' frequently asked questions. The new ChatBot icon appears in the lower right-hand corner of each page of the public and secure webpages of the website.

When you click on the following icon:



The following box will open:



Type your question into the field next to the image of the white paper airplane in the blue box, and click on the airplane. The system will automatically respond with an answer to your question.

Generic answers to topic questions include call center hours, location of web announcements, provider training, provider enrollment and revalidation, prior authorizations, online provider tools with links, and claim status, etc.

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Provider Training Sessions Scheduled Each Month

Providers are reminded that several provider training sessions are offered each month throughout the year. All providers, delegates and/or staff are invited to attend one or more of the training sessions.

Web announcements listing the sessions are published on the <u>Provider Training</u> webpage in the Training Announcements section. The sessions are also listed on the website <u>Calendar</u>.

Some of the upcoming training sessions are listed below. Visit the <u>2022 Provider Training Registration Website</u> to register for one or more of the following sessions.

Workshop	Day	Date	Time*
Revalidation and Change Training for Individuals	Tuesday	July 12, 2022	9 a.m. to 10:30 a.m.
Residential Treatment Centers (RTC) Provider Workshop	Thursday	July 14, 2022	10 a.m. to noon
Claim Appeals, Voids and Adjustments Training	Wednesday	July 20, 2022	1 p.m. to 2 p.m.
New Provider Orientation	Tuesday	August 2, 2022	10 a.m. to 11:30 a.m.
Revalidation and Change Training for Groups	Wednesday	August 10, 2022	2 p.m. to 3:30 p.m.
Vision and Audiology Provider Workshop	Tuesday	August 16, 2022	10 a.m. to noon
Submitting Secondary Claims – Professional	Thursday	August 18, 2022	10 a.m. to 11 a.m.
Reading a Remittance Advice	Tuesday	August 23, 2022	2 p.m. to 3:30 p.m.
Applied Behavior Analysis (ABA) Provider Workshop	Thursday	September 1, 2022	1 p.m. to 3 p.m.
New Provider Orientation	Tuesday	September 6, 2022	1 p.m. to 2:30 p.m.
Durable Medical Equipment (DME) Provider Workshop	Thursday	September 8, 2022	1 p.m. to 3 p.m.
Certified Community Behavioral Health Center (CCBHC) Provider Workshop	Tuesday	September 20, 2022	1 p.m. to 3 p.m.

^{*}All times indicated are Pacific Time (PT).

New Provider Type Created for Pharmacist Services

Effective July 1, 2022, providers may enroll with Nevada Medicaid to provide Pharmacist services and submit professional claims.

To receive direct reimbursement for services, the Pharmacist must enroll as an individual PT 91 (specialty 991), and cannot link to a group. Pharmacists have the option of enrolling as an Ordering, Prescribing or Referring (OPR) provider (PT 91 specialty 400). OPR providers do not submit claims to Nevada Medicaid. The billing provider must include the National Provider Identifier (NPI) of the Pharmacist OPR provider on their claim to Nevada Medicaid.

Individual PT 91 Pharmacists who will be billing laboratory procedures must complete the Certified Laboratory Improvement Amendments (CLIA) fields on their Online Provider Enrollment application.

Provider Type	Pharmacist		
91	Specialty type codes: • 991: Pharmacist		
	• 400: Ordering, Prescribing, Referring (OPR)		

After providers complete the provider enrollment process, they may submit claims with dates of service on or after July 1, 2022.

The Enrollment Checklist and Billing Guide for this new provider type are posted on the <u>Provider Enrollment Checklists</u> webpage and the <u>Provider Billing Information</u> webpage, respectively.

Medicaid Services Manual (MSM) Chapter 600 (Physician Services) and MSM Chapter 1200 (Prescribed Drugs) will be updated with policy applicable to Pharmacists.

New and Clarified Statuses for Provider Enrollment Applications

E ffective June 20, 2022, new and clarified provider enrollment application statuses have been incorporated in the Online Provider Enrollment tool to assist providers in managing the progress of their applications.

Please review the application statuses listed in the updated <u>Online Provider Enrollment User Manual Chapter 1 – Getting Started</u> for explanations of the potential enrollment application statuses.

Providers Billing Surgical Procedures:

List Current Procedural Terminology (CPT) Codes from Highest to Lowest Relative Value

Providers billing surgical procedures are reminded that Current Procedural Terminology (CPT) codes must be billed in the correct sequence for claims to be adjudicated correctly. When submitting claims with multiple CPT codes, list the codes on the claim from highest to lowest relative value.

Providers are reminded to bill procedures with the correct modifier combinations, units of service provided and correct code combinations. It is the responsibility of providers to ensure the use of current CPT codes, service limitations and National Correct Coding Initiative (NCCI) guidelines when billing claims.

Contact Information

If you have a question concerning the manner in which a claim was adjudicated, please contact the Nevada Medicaid Provider Customer Service Center by calling (877) 638-3472, press Option 2 for providers, then Option 0 and then Option 2 for claim status. If you have a question regarding prior authorizations, please call (800) 525-2395.

If you have a question about Medicaid Service Policy, you can go to the DHCFP website at http://dhcfp.nv.gov. Select "Resources" and then select "Telephone Directory" for the telephone number of the Administration Office you would like to contact.