# Medicaid Billing
# A Review for SBHCs

**Medicaid Provider Services**
September 14, 2020

# Introductions

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# Presentation Overview

- Need-to-know terms and acronyms

- Medicaid 101

- Medicaid and SBHCs

- Enrollment and Billing

- Resources

- Q&A

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# Terms Defined

- <u>MDH</u>: Maryland Department of Health

- <u>COMAR</u>: Code of Maryland Regulations

- <u>ePREP</u>: Electronic Provider Revalidation and Enrollment Portal

- <u>EVS</u>: Eligibility verification system

- <u>PVS</u>: Provider Verification System

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# Terms Defined

- <u>CMS</u>: Centers for Medicaid and Medicare Services

- <u>CMS-1500</u>: Standard form for paper billing/claims

- <u>837p</u>: Standard format for electronic billing/claims submission

- <u>CPT/HCPCS</u>: Common Procedural Terminology and Healthcare Common Procedure Coding System (Alphanumeric procedure codes)

- <u>EPSDT</u>: Early Periodic Screening, Diagnosis, and Treatment

- <u>NPI</u>: National Provider Identifier

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# Terms Defined

- <u>LHD</u>: Local health department

- <u>FQHC</u>: Federally Qualified Health Center

- <u>FFS</u>: Fee-for-Service

- <u>MCO</u>: Managed Care Organization

- <u>MA</u>: Medical Assistance (a.k.a. Medicaid)

- <u>PHE</u>: Public Health Emergency (due to COVID-19)

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# Medicaid 101

# Medicaid 101

- Began in 1966 - Social Security Amendments of 1965 created Medicare and Medicaid programs

- Both state and federal funds - Subject to both state (COMAR) and federal (CMS) regulation

- Maryland has 1.5 Million participants (1 in 5 Marylanders).

- Maryland offers one of the most comprehensive benefits packages of any state Medicaid program.

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# Maryland Medicaid Coverage

| Mandated | Optional (but covered in MD) |
|---|---|
| Hospital care | Prescription Drugs |
| Nursing facility care | Institutional care for individuals with intellectual disabilities |
| Physician Services | Rehabilitation and other therapies |
| Immunization and EPSDT services | Clinic services |
| Family planning services | DMS/DME |
| Lab and X-ray services | Personal care and medical day care |
| FQHC and Rural Health services | Home and community-based care (waivers) |
| Nurse Practitioner/Nurse Midwife services | Most mental health and SUD treatment services |
| Home Health services | |

# What is FFS Medicaid?

- Fee-for-service: Providers receive payment directly from the state for each service at set rates (i.e. not capitated rates)

- Some services paid FFS (e.g. specialty behavioral health)

- FFS populations include those not covered under managed care (e.g., dually enrolled in Medicare). Temporary FFS coverage period prior to MCO enrollment.

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# What is an MCO?

- **Managed Care Organizations (MCOs)** contract with Maryland Medicaid.

- **HealthChoice** (Medicaid's Managed Care Program):
  - Covers primary and specialty somatic care for most Medicaid recipients under 65 (not eligible for Medicare)
  - Program based on Medical Home - Primary Care Provider
  - MCOs receive capitated monthly payment – Per member per month (PMPM).

- MCOs pay providers for patient encounters at agreed upon rates, with the FFS rate as a minimum.

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# "Carve Out" Services

- Services not paid for by MCOs

- Providers bill Medicaid FFS or Administrative Service Organization (ASO)

## Examples of Carved Out Services

- Specialty mental health and substance use disorder

- Dental services for children

- Some prescriptions: Specialty mental health

- EPSDT Therapies - OT/PT/Speech

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# Children and MCOs

- About 84% of MD Medicaid participants - and about 99% of school-age Medicaid participants - are enrolled in an MCO. (Some children covered fee-for-service temporarily).

- Therefore, when billing Medicaid for services to children, providers will usually be billing an MCO.

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# HealthChoice MCOs

# What is a "self-referred" provider?

- Providers that do not need a contract with MCO to bill the MCO
  - Must still be enrolled with FFS Medicaid
  - MCOs reimburse at FFS rate for covered procedure codes
  - Improves access
- SBHCs are "self-referred" providers
- Other self-referred services include:
  - Family planning services
  - Certain substance use disorder treatment services
  - Renal dialysis services
  - Certain pregnancy and neonatal-related services

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# Medicaid and SBHCs

# Role of SBHCs in Medicaid

- Part of care continuum/EPSDT follow-up, especially for hard to reach children and teens

- Coordination of care. PCP is the child's medical home, but SBHCs provide additional access to primary and urgent care.

- Similar to care in private provider offices, including:
  - Acute/urgent visits, evaluation and management, etc.
  - <u>Comprehensive</u> well-child care according to HealthyKids/EPSDT standards, **including immunizations**
  - Family Planning Services
  - Drug and Alcohol Screening, Brief Intervention and Referral to Treatment (SBIRT)

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# Medicaid SBHC Sponsoring Agencies

- Federally Qualified Health Centers (FQHCs)

- Local Health Departments (LHDs)

- General Clinics*

- Physician Groups (*Coming soon!*)

- Nurse Practitioner (NP) Groups (*Coming soon!*)

* State universities/college health centers, hospitals or other medical entities acting as SBHC billing sponsors may enroll with Medicaid as general clinics, a physician group, or a NP group

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# Enrollment and Billing

# Before you start billing…

- Apply to become a SBHC through MSDE.

- Apply for NPI through NPPES.

- Apply for MA number through Medicaid via the online enrollment portal, ePREP.

- Obtain EPSDT certification

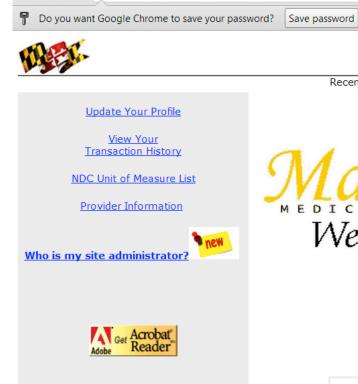- Make sure your info is added to the SELF-REFERRAL LIST! Check the SBHC manual.

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# EVS - A CRITICAL STEP!

- Eligibility Verification System (EVS)
  - The billing provider (sponsoring agency) must verify eligibility for every billed service.
  - EVS identifies the student's MCO (or FFS).

- Check on the <u>date of service</u>
  - Do NOT check eligibility only once a year, or assume a child has continuous enrollment.

- Access EVS at [encrypt.emdhealthchoice.org](encrypt.emdhealthchoice.org)

- Step-by-step instructions are provided on pages 30-31 of the 2020 Professional Services Provider Manual

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# EVS Home

# EVS Landing

# EVS Results (Example)

recipient eligibility verification

Please print this page for your records.
For questions please contact Provider Relations at: 410-767-5503 or 800-445-1159

| | |
|---|---|
| 9/3/2020 3:07:53 PM | Reference number: ███637 |
| Inquiring provider: ███ | |

**RECIPIENT INFORMATION**

| | |
|---|---|
| MA number: ███ | SSN: |
| Recipient name: ███ | |

**ELIGIBILITY INFORMATION**

| | |
|---|---|
| For 9/3/2020 12:00:00 AM | **ELIGIBLE for date of service** |

Recipient's Re-Determination Date is 01/31/2021

Citizenship not verified

Identity not verified

DHR/FIA form **9709** must be completed if long term care services are required

ADJUNCT ELIGIBLE FOR WIC

**BENEFIT DESCRIPTION**

| | |
|---|---|
| Recipient is in an MCO (HealthChoice. For additional information about MCOs or the participant's eligibility, call Provider Relations at 410-767-5503 or 800-445-1159 ) | MCO name: AMERIGROUP MARYLAND INC<br>MCO phone number: 800-454-3730 |

**BENEFIT EXCLUSIONS**

**BENEFIT LIMITATIONS**

**OTHER PAYORS**

**FACILITIES**

# Professional Services Fee Schedule

- (Generally) updated annually

- MCOs use FFS Fee Schedule for self-referred providers

- LHDs paid using Physician Fee Schedule

health.maryland.gov/providerinfo

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# Professional Services Fee Schedule

[health.maryland.gov/Pages/Provider-Information.aspx](health.maryland.gov/Pages/Provider-Information.aspx)

> Community Support Services
> Maryland Money Follows the Person Program
> Home and Community-Based Services
> Nursing Facility Services
> Maryland Access Point

## BEHAVIORAL HEALTH INFORMATION

Announcing: Optum Maryland will be the new Behavioral Health Administrative Service Organization (ASO). **Effective January 1, 2020**

For important information regarding the transition, please visit the ASO Transition Page

In the interim, Behavioral Health services must be authorized by the Department's designated Administrative Service Organization, Beacon Health Options.

- PBHS Fee Schedules
- Residential Substance Use Disorder Treatment for Adults
- 1915(i) Information
- Health Homes Information

## BILLING GUIDANCE, FEE SCHEDULES, and PREAUTHORIZATION INFORMATION

- Nursing Services Program Rates – Fiscal Year 2020 **Effective 7/1/19**
- Professional Services Preauthorization Information **New Effective 1/1/19**
- 2020 Professional Services Fee Schedule **Effective 7/1/20 Updated 7/23/20**
- 2019 Professional Services Fee Schedule **Effective 7/1/19**
- 2020 Professional Services Provider Manual **Effective 1/1/20**

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# General Billing Protocol

- Billing Forms
  - CMS-1500 - Paper Claims
  - **837p - Electronic Claims - Faster!**
- Timely filing:
  - MCOs: 6 months from date of service
  - FFS: 12 months from date of service
- "Payer of last resort"
  - SBHCs must bill other insurance first
- Rendering and pay-to provider NPIs
  - Rendering provider is required for FQHCs and professional groups (physician groups, nurse practitioner groups)

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# General billing protocol (cont'd)

- Verify provider enrollment and participant eligibility for date of service.
  - Information available via PVS, EVS

- Billing provider NPI should be SBHC sponsoring agency, not individual practitioner.
  - Rendering providers must follow billing rules for your specific sponsoring agency type (i.e, FQHCs and Physician/NP Groups)

- Pages 10-15 of the SBHC Billing Manual: block-by-block billing instructions

- **If you follow instructions, EVS, and continue to experience problems, WE WANT TO KNOW. Contact HealthChoice: mdh.healthchoiceprovider@maryland.gov.**


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# Electronic Billing

- For guidance on coding and submitting FFS claims electronically, visit:

  https://health.maryland.gov/HIPAA/Pages/transandcodesets.aspx

  SBHCs should work with MCOs directly on submitting electronic claims to MCOs.

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# Critical CMS-1500 Elements

*Rendering NPI for FQHCs vs no individual rendering for LHDs*

- NPI

- EVS'd Recipient MA Number

- Correct CPT/HCPCS and ICD-10 codes

- Review exceptions criteria in Manual

- Place of Service Code: 03 (School)

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# Place of Service

**SBHCs must bill with Place of Service (POS) code 03 - School.**

- This is the **only** element on the claim that verifies the service took place in a SBHC.
- Using a different code may result in denials from MCOs with varying explanations (e.g. "pre-auth required").
- MCOs systems will not know it is a self-referred SBHC billing without this POS code, and unlikely to process as a self-referred service.

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# CMS-1500: Place of Service, NPI

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# Provider Verification System (PVS)

- https://encrypt.emdhealthchoice.org/searchableProv/main.action
- Use to verify the enrollment status of a provider (including the billing sponsoring agency, or an individual practitioner) on a specific date of service.
- Not required, but a helpful tool to check practitioner enrollment.

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# Provider Verification System (PVS)

**Maryland Medicaid Provider Verification**

National Provider Identifier(NPI): _____

Provider Last Name /Organization: _____   First Name: _____

Medicaid Provider Base Number
(First 7 Digits of your Medicaid Provider Number): _____

Date of Service: ___ / ___ / ___ (mm/dd/yyyy)

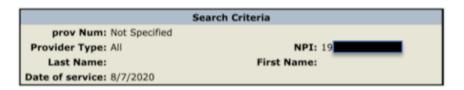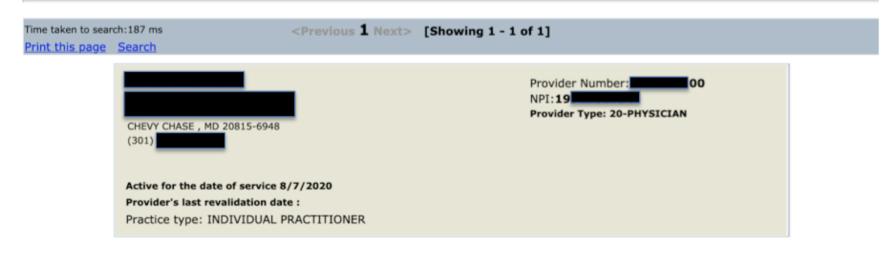Provider Type: [All ▾]

[Search]

Notes:

- At least one of the following fields must be completed: NPI, Provider Number, Provider Last Name/Organization. - Please specify the Date of Service for which to verify the provider's enrollment status. If no Date of Service is entered, results will show enrollment status for the current date

Please note: This provider verification service is for purposes of checking the Maryland Medicaid provider enrollment status, including Ordering, Referring, and Prescribing (ORP) (including attending) providers. Pursuant to federal Medicaid regulations, ORP providers on claims submitted to Maryland Medicaid must be "active" on the date of service with a Practice Type of "INDIVIDUAL PRACTITIONER." Providers listed as "active" in search results do not necessarily participate with or accept payment from Maryland Medicaid.

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# PVS - Example of Search Results



| Search Criteria | |
|---|---|
| **prov Num:** Not Specified | |
| **Provider Type:** All | **NPI:** 19▮▮▮▮▮ |
| **Last Name:** | **First Name:** |
| **Date of service:** 8/7/2020 | |

Time taken to search:187 ms  &lt;Previous **1** Next&gt;  **[Showing 1 - 1 of 1]**

Print this page   Search

▮▮▮▮▮▮▮▮▮▮
▮▮▮▮▮▮▮▮▮▮
CHEVY CHASE , MD 20815-6948
(301) ▮▮▮▮▮

Provider Number:▮▮▮▮▮**00**
NPI:**19**▮▮▮▮
Provider Type: **20-PHYSICIAN**

**Active for the date of service 8/7/2020**

**Provider's last revalidation date :**

Practice type: INDIVIDUAL PRACTITIONER

Please note: This provider verification service is for purposes of checking the Maryland Medicaid provider enrollment status, including Ordering, Referring, and Prescribing (ORP) (including attending) providers. Pursuant to federal Medicaid regulations, ORP providers on claims submitted to Maryland Medicaid must be "active" on the date of service with a Practice Type of "INDIVIDUAL PRACTITIONER." Providers listed as "active" in search results do not necessarily participate with or accept payment from Maryland Medicaid.

&lt;Previous **1** Next&gt;  **[Showing 1 - 1 of 1]**

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# Provider Verification System (PVS)

- PVS Overview: https://mmcp.health.maryland.gov/Documents/PVS%20Overview%20-%20Providers%202020-08-17.pdf

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# Telehealth and COVID-19

- SBHCs may use synchronous telehealth to deliver care to students. (Was permitted prior to the PHE.)

- During the COVID-19 PHE, Medicaid has expanded billable telehealth services to include when the patient is at home, and certain audio-only services.

- After the PHE, Medicaid intends to continue to allow patients to receive telehealth services at home, but audio-only will no longer be billable under federal rules.

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# Telehealth and COVID-19

- **CMS has approved a waiver to allow SBHCs and other clinics to bill Medicaid for services when neither the practitioner nor patient is onsite at the SBHC location, (i.e. in their homes).**

- **Still must use Place of Service code 03 - School.**

- **Waiver in effect for the PHE period only**.

- Normally (i.e. after the PHE) either the patient or the practitioner must be physically present in the SBHC to bill, under federal regulations (42 CFR § 440.90).

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# Telehealth and COVID-19

- Sponsoring agencies should bill with the same CPT/HCPCS codes used for in person visits, but must include a modifier for remote visits:
  - Modifier for audio-video telehealth: **GT**
  - Modifier for audio only (PHE only): **UB**
  - Do NOT use modifier 95 (used for Medicare)

- For Telehealth program info and temporary program rules during the COVID-19 state of emergency, visit: https://mmcp.health.maryland.gov/Pages/telehealth.aspx

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# Resources

# Online Resources

All Medicaid providers must follow program regulations and subregulatory guidance.

- SBHC Billing Manual

    https://health.maryland.gov/providerinfo

- CMS-1500 Form

    https://www.cms.gov/Medicare/CMS-Forms/CMS-Forms/Downloads/CMS1500.pdf

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# Online Resources

All Medicaid providers must follow program regulations and subregulatory guidance.

- SBHC Regulations: COMAR 10.09.76

    http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=10.09.76.*

- General Medical Assistance Provider Participation Criteria Regulations: COMAR 10.09.36

    http://www.dsd.state.md.us/COMAR/SubtitleSearch.aspx?search=10.09.36.*

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# Online Resources

- Medicaid Enrollment and ePREP
  https://health.maryland.gov/eprep

- Professional Services Provider Manual and Fee Schedule
  https://health.maryland.gov/providerinfo

- HealthyKids/EPSDT Program
  https://mmcp.health.maryland.gov/epsdt

- Telehealth Program
  https://mmcp.health.maryland.gov/Pages/telehealth.aspx

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# Online Resources

- MSDE SBHC Application and Information (Not specific to Medicaid)

    http://marylandpublicschools.org/about/Pages/DSFSS/SSSP/SBHC/index.aspx

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# Problem Resolution

- Check with your MCO SBHC contact <u>first.</u>

- Different resources for different problems and questions (SBHC Provider Manual, Attachment A)

- If you still need help after speaking with the MCO, contact the HealthChoice program at:

  **mdh.healthchoiceprovider@maryland.gov**.

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# Forum Discussion

Questions?

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