



North Dakota Medicaid Provider Newsletter

December 2021



Welcome to the North Dakota Medicaid Provider newsletter. We hope this newsletter provides you with important and beneficial information about the North Dakota Medicaid Program. If you have any suggestions for future articles, please send your ideas to dhsmed@nd.gov.

In this edition, you can learn about:

- The transition of ND Medicaid Expansion to Blue Cross Blue Shield of North Dakota,
- Upcoming changes to select ND Medicaid service limits,
- Medicaid 1915(i) provider development grants,
- Expanded tobacco cessation counseling coverage for all members, and more!

Thank you for being a North Dakota Medicaid provider and serving North Dakota Medicaid members.

Opening photo: Block houses at Fort Abraham Lincoln State Park, Mandan, N.D. Credit: ND Parks and Recreation



Update on Medicaid Expansion transition

Effective Jan. 1, 2022, the ND Medicaid Expansion coverage for 19- and 20-year-old members will transition to the traditional fee-for-service Medicaid program administered by the North Dakota Department of Human Services (NDDHS). Providers should submit all claims

electronically to NDDHS for services provided to Medicaid Expansion members ages 19 and 20 on or after Jan. 1, 2022.

The administration of ND Medicaid Expansion coverage for members who are ages 21 to 64-years old will transition to Blue Cross Blue Shield of North Dakota (BCBSND) on Jan. 1, 2022. This transition will not affect eligibility, and there will be no major benefit changes. ND Medicaid Expansion claims should be submitted electronically to BCBSND using the existing BCBSND payor ID 55891.

Sanford Health Plan will continue to administer ND Medicaid Expansion coverage through midnight on Dec. 31, 2021, and claims will continue to be paid as usual for dates of service through Dec. 31.

Questions?

For traditional ND Medicaid, go to [NDDHS website](#) or contact Medical Services Division at dhsmed@nd.gov, 701-328-2323 or 711 TTY for help from 8 a.m. to 5 p.m. Central Time Monday through Friday.

For ND Medicaid Expansion, contact [BCBSND](#) from 8 a.m. to 6 p.m. Monday through Friday Central Time at (833)-777-5779. Individuals can also contact the NDDHS at 701-328-2323 or dhsmed@nd.gov.

- Limitations have been removed for all eligible ND Medicaid members for substance use disorder, partial hospitalization, inpatient psychiatric services and psychological testing and therapy.

Providers are encouraged to reference the corresponding chapters in the [General Information for Providers Manual](#) for information on service authorization and documentation requirements. National Correct Coding Initiative (NCCI) edits and Medically Unlikely (MUE) edits for all service limits must be followed for daily services.

SERVICE LIMIT CHANGES

The following changes to service limits will go into effect on January 1, 2022.

Limit Prior to January 1, 2022	Services	Limit for Dates of Service as of January 1, 2022 or After
12 Visits	Chiropractic Care	20 Visits
20 Visits	Occupational Therapy	30 Visits
15 Visits	Physical Therapy	30 Visits
<ul style="list-style-type: none"> • Intensive outpatient treatment: 35 days per year • Partial hospitalization: 45 days per year • Clinically managed high-intensity residential care: 45 days per year 	Substance Use Disorder Treatment Services	Limitations Removed
<ul style="list-style-type: none"> • Level A: 45 days per year • Level B: 30 days per year 	Partial Hospitalization Psychiatric Services	Limitations Removed
45 days per year	Inpatient Psychiatric Services	Limitations Removed
<ul style="list-style-type: none"> • Psychological evaluations: one per year • Psychological testing: 10 units per year • Psychological therapy: 40 visits per year 	Psychological Evaluations, Testing and Therapy	Limitations Removed

Also, there are some changes to [fluoride varnish limits](#) for ND Medicaid members ages six months to 20 years of age. The limits are changing from two times per year to three times per year as of Jan. 1, 2022.



**Tobacco cessation
counseling coverage
expands to all ND
Medicaid members**

ND Medicaid will now cover tobacco cessation counseling for all members for dates of services on or after Jan. 1, 2022. Prior to Jan. 1, 2022, this service was only covered for pregnant women.

Counseling must be provided face-to-face by or under the supervision of a physician or other health care professional who is legally authorized to furnish such services under state law and within their scope of practice and is enrolled as a ND Medicaid provider.

CPT© Code: 99406 – Smoking and tobacco cessation counseling visit; intermediate, greater than three minutes up to 10 minutes.

CPT© Code: 99407 - Smoking and tobacco cessation counseling visit; intensive, greater than 10 minutes.

Photo credit: ND Tourism



ND Medicaid to cover sign and oral language interpreter services

The 2021 North Dakota Legislature authorized ND Medicaid to cover interpreter services as part of House Bill No. 1012.

Effective for dates of service on or after Jan. 1, 2022, sign and oral language interpreter services for assistance in providing covered services to a member with limited English proficiency or who has hearing loss will be covered. ND Medicaid will allow reimbursement for interpreter services when provided to members to facilitate access to covered services.

Interpreters are not able to enroll as a Medicaid provider; however, interpreter services are eligible for reimbursement when rendered in conjunction with a ND Medicaid covered service and when billed by professional service provider types such as physicians, podiatrists, optometrists, nurse practitioners, dentists, office-based practitioners and behavioral health providers.

Interpreters may be employed by or contracted with the billing provider. If a member comes to an appointment with an interpreter, the provider is not required to use that interpreter. Three people must be present for the service to be covered: the provider, the member and the interpreter.

The ND Medicaid sign and oral language interpreter services policy will be available in the [General Information for Providers Manual](#).



Medicaid 1915(i) provider development grants are now available

The North Dakota Department of Human Services is offering provider development grants to help defray costs and eliminate barriers to

providing Medicaid 1915(i) home and community-based behavioral health services for eligible individuals.

The Medicaid 1915(i) services help support individuals so they can live successfully in the community of their choice and avoid a higher level of care.

Enrolled Medicaid 1915(i) providers can choose to offer one or more of the following services:

- Care coordination,
- Respite,
- Training and support for unpaid caregivers,
- Nonmedical transportation,
- Family peer support,
- Peer support,
- Supported education,
- Benefits planning,
- Prevocational training,
- Supported employment, and
- Housing support.

A total of \$80,000 is available for the provider development grants. Providers may request up to \$10,000.

Some examples of ways these funds could be used include:

- Training and professional development,

- Costs associated with becoming an enrolled ND Medicaid 1915(i) group provider and affiliating individual providers,
- Compensation costs not paid by Medicaid,
- Staff recruitment or retention costs,
- Community outreach activities,
- Promotional materials related to the new 1915(i) services,
- Information technology equipment costs,
- Background checks, and
- Other agency development costs.

This competitive grant process is available for providers who have enrolled, as well as those who are committed to enrolling to provide Medicaid 1915(i) services.

Applications and supporting documentation must be submitted by email to Dawn Pearson, Medicaid 1915(i) administrator at drpearson@nd.gov by 4 p.m. Central Time on Dec. 30, 2021.

[Get Required Forms and Documents](#)



HCPCS “J” codes for drugs prior authorization update

ND Medicaid has expanded the list of HCPCS “J” codes for drugs requiring prior authorization, which are billed by a physician or clinic through 837p transactions.

Visit the [Preferred Drug List](#) to see a list of these drugs and the corresponding coverage criteria. If a medical drug is not on the list of drugs requiring prior authorization, a U.S. Food and Drug Administration or compendia supported indication is required.

Continuous Glucose Monitors (CGM) coverage

ND Medicaid now covers continuous glucose monitors (CGM) through the pharmacy benefit.

Providers who previously supplied CGM from their offices by billing CPT code 95250 should now issue a prescription to the member to fill the CGM at a pharmacy.

Startup training can be billed using CPT code 95249. Pharmacists can also bill CPT code 95249 by enrolling in the Medication Therapy Management (MTM) program. CPT code 95250 will only be allowed if other insurance requires CGM to be billed through the medical benefit.



What is a suspended claim?

ND Medicaid has received inquiries from providers asking why claims are in suspense.

A suspended claim means the claim has been received but requires additional action to move it to completed status. This may be an additional review for medical necessity, checking for a service

authorization, waiting for an attachment or supporting documentation or verifying member, or provider enrollment information.

Please allow sufficient time for suspended claims to complete processing and **do not** resubmit a duplicate claim. Providers can check the status of claims by calling the ND Medicaid Automated Voice Response System (AVRS) at 1-877-328-7098 and selecting option four. Claim status can also be obtained through the secure [provider portal](#).



Automated Voice Response System

The ND Medicaid Automated Voice Response System (AVRS) allows enrolled providers to readily access detailed information on a variety of topics using a telephone.

Providers can use the AVRS for member, payment and service authorization inquiries and to check the status of a claim.

AVRS Access Telephone Numbers (available 24/7)

Toll-Free: 877-328-7098

Local: 701-328-7098

Providers are granted access to the AVRS by entering the ND Health Enterprise MMIS issued seven-digit provider Medicaid ID number. A six-digit PIN number is also required for verification and access to secure information. One PIN number is assigned to each Medicaid ID number.

Option 1: Member Inquiry

Callers may select any of the following options:

- Eligibility and recipient liability
- Primary care provider (PCP)
- Coordinated services program (CSP) enrollment
- Third party liability (TPL)
- Vision
- Dental
- Service authorizations

Option 2: Payment Inquiry

Remittance advice payment information is available for the specific time frame entered.

Option 3: Service Authorization Inquiry

Service authorization information is available based upon the Member ID number entered, including:

- Service authorization (SA) number
- Date(s) of service
- Authorization status

Option 4: Claims Status

Claim information is available based on the Member ID number entered, including:

- Transaction control number (TCN)
- Billed amount
- Claim submit date
- Date(s) of service
- Claim status (paid, denied, suspended)
- Paid amount (if applicable)

Callers may choose to exit the AVR system at any point to speak with a ND Medicaid Provider Call Center customer service representative.

The call center is available from 8 a.m. to 5 p.m. Central Time, Monday through Friday, and observes the same

holidays as the State of North Dakota.

Providers can also leave a voicemail message when the call center is not available.

Except during heavy call times, provider voice mail messages will be responded to in the order they were received on the following business day during regular business hours.



**Training sessions
impact Medicaid call**

center hours on select Fridays in 2022

The ND Medicaid Provider Call Center will not be available from 12:15 to 2:45 p.m. Central Time on the following Fridays in 2022. Call center representatives are participating in training sessions to better serve our providers.

JANUARY	1/7/2022 - 1/14/2022 - 1/21/2022
FEBRUARY	2/4/2022 - 2/11/2022 - 2/18/2022
MARCH	3/4/2022 - 3/11/2022 - 3/18/2022
APRIL	4/2/2022 - 4/9/2022 - 4/16/2022
MAY	5/6/2022 - 5/13/2022 - 5/20/2022
JUNE	6/10/2022 - 6/17/2022 - 6/24/2022
JULY	7/1/2022 - 7/8/2022 - 7/15/2022
AUGUST	8/6/2022 - 8/13/2022 - 8/20/2022
SEPTEMBER	9/9/2022 - 9/16/2022 - 9/23/2022
OCTOBER	10/7/2022 - 10/14/2022 - 10/21/2022
NOVEMBER	11/4/2022 - 11/11/2022 - 11/18/2022
DECEMBER	12/3/2022 - 12/10/2022 - 12/17/2022

Providers are invited to leave a message and a call center representative will return the phone call as quickly as possible. We apologize for any inconvenience this may cause.

Providers can contact the ND Medicaid Provider Call Center at 1-877-328-7098 (toll-free), 711 (TTY) or

mmisinfo@nd.gov - Monday through Friday from 8 a.m. to 5 p.m. Central Time.



Payment updates for Medicaid providers

During the 2021 legislative session, North Dakota lawmakers passed Senate Bill No. 2085, which created a new section to North Dakota Century Code Chapter 50-24.1 requiring all payments to be made by

electronic funds transfer (EFT) through an automated clearing house to medical assistance providers.

No other forms of payment will be permitted.

New providers enrolling in ND Medicaid on or after Jan. 1, 2022, will be required to set up EFT payments at the time of enrollment.

Current providers that are enrolled in ND Medicaid and not receiving EFT payments, will be required to change to EFT payments before Jan. 1, 2023.

In 2022, ND Medicaid and its provider enrollment vendor, Noridian Healthcare Solutions, will be contacting currently enrolled providers who are not receiving EFT payments, to start the process to establish EFT payments.

Providers who would like to set up EFT payments should complete [SFN 661](#). The information on the form must match the information provided on a bank letter or voided check.



DHS hosts webinars to raise awareness about in-home long-term support options

The N.D. Department of Human Services is hosting twice-monthly webinars through July 2022 to spotlight in-home and community-based (HCBS) long-term support services that give older North Dakotans and adults with physical disabilities the option to live at home and in their community. Medicaid providers, Medicaid members and others are invited to participate and learn about care choices.

The webinars support the settlement agreement North Dakota reached with the U.S. Department of Justice in 2020. The agreement focuses on strengthening the state's HCBS system and ensuring that older adults and others with

physical disabilities who participate in North Dakota Medicaid and qualify for nursing home care, know that they have care choices and the right to receive care and support services in the most integrated setting possible.

Webinars are held on designated Thursdays, from 12 to 12:30 p.m. Central Time, and individuals can participate by phone or online. A calendar of upcoming webinars is available on the [DHS webpage](#) and is updated regularly with links to flyers describing webinars and details about how to participate.

Upcoming January 2022 webinars include the **Program for All-Inclusive Care for the Elderly (PACE)** that provides person-centered, coordinated care for older adults with significant support needs living in the community on **Jan. 13**, and an **overview of HCBS case management services** on **Jan. 27**.

Webinars are recorded and recordings uploaded to the [DOJ settlement webpage](#) and the [Adults & Aging Services Division webpage](#).

Past webinars shared information about the state's newest services Community Support and Residential Habilitation services that can include up to 24-hr daily support, the Aging and Disability Resource Link (ADRL), which connects people to services and support; and an overview of state and federally funded HCBS programs, including functional and financial eligibility criteria.

Individuals who need disability accommodations to participate in a webinar can contact Michele Curtis at 701-328-8679, 711 (TTY) or mimcurtis@nd.gov.

North Dakotans can get help finding in-home and community-based long-term support services by contacting the ADRL toll-free at 855-462-5465, 711 (TTY), by email at carechoice@nd.gov, or can apply for services online or search the [online database](#).



UPCOMING EVENTS

2022 Meetings

Medicaid Medical Advisory Committee

- February 15 - 4 to 6 p.m. CT
- May 17 - 4 to 6 p.m. CT
- August 16 - 4 to 6 p.m. CT
- November 15 - 4 to 6 p.m. CT

Autism Spectrum Disorder Task Force

- February 28 – 1 to 4:30 p.m. CT
- May 23 - 1 to 4:30 p.m. CT
- August 29 - 1 to 4:30 p.m. CT
- November 28 - 1 to 4:30 p.m. CT

Medicaid Drug Use Review Board

- March 2 - 1 to 4 p.m. CT
- June 1 - 1 to 4 p.m. CT
- September 7 - 1 to 4 p.m. CT
- December 7 - 1 to 4 p.m. CT

Money Follows the Person Stakeholders

- February 8 - 1 to 4 p.m. CT
- May 17 - 1 to 4 p.m. CT
- August 9 - 1 to 4 p.m. CT
- November 8 - 1 to 4 p.m. CT

Department of Justice Settlement Agreement Stakeholders

- March 17 - 1 to 3 p.m. CT
- June 9 - 1 to 3 p.m. CT
- September 15 - 1 to 3 p.m. CT
- December 8 - 1 to 3 p.m. CT