



North Dakota Medicaid Provider Newsletter

March 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:

- Launch of the new Electronic Visit Verification System,
- State's new contract for utilization management,
- Enrollment to be a Medicaid 1915(i) service provider
- Upcoming Medicaid-related public meetings and more.

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



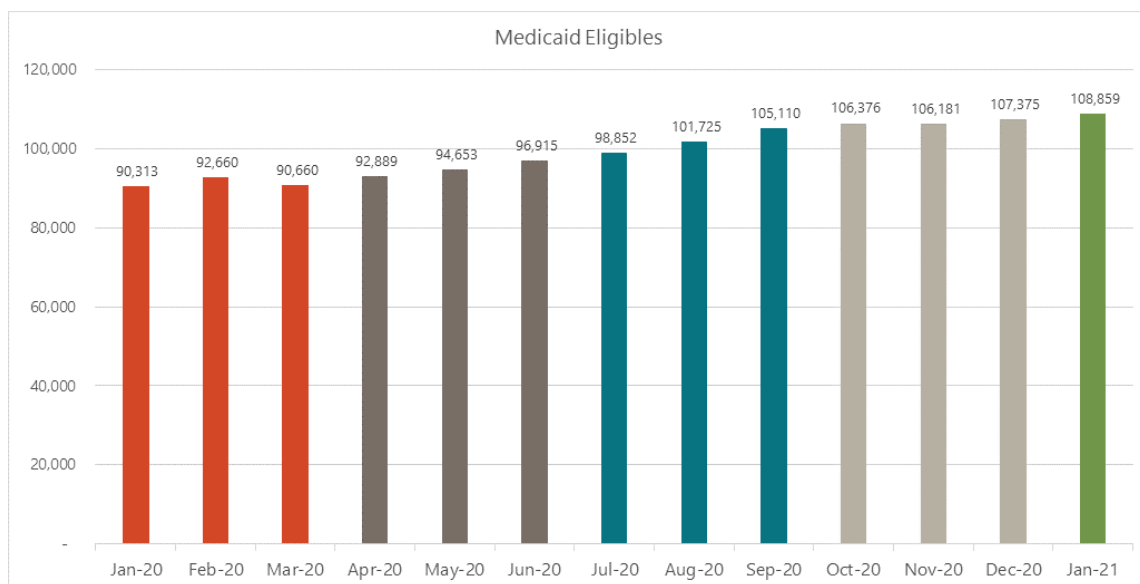
COVID-19 public health emergency

The federal Department of Health and Human Services has extended the public health emergency (PHE) related to COVID-19 through April 20, 2021. For Medicaid, this means that in order for North Dakota to receive the 6.2 percent enhanced federal Medicaid assistance percentage (FMAP)

that was authorized under the Families First Coronavirus Response Act, we must ensure continuous coverage for current enrollees through the end of the quarter in which the PHE ends.

Since March 2020, North Dakota Medicaid has not removed Medicaid eligibility for most members, even members who had changes in circumstances that would typically make them ineligible, such as increased income that puts them over the income eligibility threshold.

Below is a chart that shows the growth in North Dakota Medicaid enrollment due to the PHE and continuous coverage requirements.





Update on the launch of the electronic visit verification system

Electronic visit verification (EVV) is a federal requirement from the 21st Century Cures Act that impacts enrolled agency and individual Medicaid

providers who provide personal care and related services requiring an in-home visit.

EVV is a geo-location enabled system that uses a mobile device application on a phone, tablet, or laptop that records the beginning and ending time of services provided to individuals in their homes. The system electronically verifies that home and community-based services (HCBS) are being provided at a particular location and the precise time service delivery begins and ends.

North Dakota implemented the EVV system on Jan. 1, 2021. The North Dakota Department of Human Services has contracted with Therap as the state EVV vendor. Providers have the option to use Therap or another third-party vendor if they also agree to use the state's aggregator system.

[ND Therap Website](#)

EVV will help to reduce fraud, waste and abuse in HCBS and assure members are receiving necessary services. If states don't implement EVV, the amount of federal Medicaid funds they can collect to help pay for these services will be reduced.

Other benefits of EVV:

- Improve ability to respond to audit requests
- Improve audit outcomes
- Reduce manual effort
- Assist with documentation
- Produce and submit "clean" claims

For more information on the EVV System, click [here](#).



Legislative update

We're over halfway through the 2021 legislative session and now bills that passed in the House and Senate are sent to the other chamber for hearing. Below is a summary update of key bills impacting the DHS Medical Services Division that have crossed over to the other chamber.

House Bill 1090 - This bill revises the care and property payment models for nursing homes.

House Bill 1407 - This bill changes the tribal care coordination savings split from 60/40 to 70/30. Tribes will receive more of the savings under this bill.

Senate Bill 2085 - This bill allows DHS to pay providers only by electronic transfer, not by paper check.

You can read more about these bills by clicking [here](#).

All committee hearings and chamber floor sessions are livestreamed. Find out more [here](#).

Photo credit: Poppy Mills



Meet Kepro, the state's new contract for utilization management

The North Dakota Department of Human Services has contracted with Kepro to perform service authorization review of certain requests for

services and supplies for traditional Medicaid members effective Jan. 1, 2021.

Atrezzo Provider Portal

Request for medical service authorizations that Kepro is responsible for reviewing must be submitted to Kepro's Atrezzo provider portal.

In order to use the portal, each provider (facility, clinic, doctor's office, etc.) must appoint one person to be the administrator, or owner, of their provider portal account. To register as the account administrator of your facility, clinic, or doctor's office, email ndatrezzoregistration@kepro.com.

Kepro will provide a registration code to access the provider portal at <https://portal.kepro.com>.

Training

Kepro provides training for providers on its provider portal. The training will include how to register, how to create sub-user accounts, how to submit for service authorization and how to check the status of a service authorization request. Recorded trainings are available on Kepro's website at <http://nddhs.kepro.com/>.



Medicaid program provider agreements

According to the Medicaid program provider agreement signed by each practitioner who enrolls in North Dakota Medicaid, practitioners agree to certain participation, compliance, professionalism, recordkeeping and billing practices.

Expectations are detailed within the agreement and in the [General Information for Providers manual](#). With the increased emphasis on requirements for ordering and rendering services, North Dakota Medicaid is providing the following reminder, which will also be incorporated into the April 2021 updates to the provider manual:

All North Dakota Medicaid enrolled practitioners are responsible for ensuring services are ordered or rendered within their scope of practice according to state law. North Dakota Medicaid recognizes there are other professional sources that define the relationship between recipient and provider including current CPT® code definitions, current HCPCS codes, ethical standards of practice, accepted professional standards of practice and current evidenced-based practice guidelines. Practitioners are responsible for maintaining the qualifications for their licensure and are not eligible to order or render services during any periods in which there is a lapse in their licensure.



**Enroll now to provide
services through North
Dakota's Medicaid 1915(i)
State Plan Amendment**

In late January, the state's Medicaid 1915(i) State Plan Amendment was approved by the Centers for Medicare and Medicaid Services to expand community-based behavioral health services.

The new services North Dakota Medicaid will pay for include housing and employment supports, peer support, family peer support, respite and educational supports.

Providers interested in developing these new services or expanding their current service array should visit the Medicaid 1915(i) provider website by clicking [here](#).

You will find step-by-step instructions on how to enroll as a Medicaid 1915(i) provider, all the necessary forms you will need to complete the process, fee schedules and other valuable resources.

Team members from the department's Medical Services and Behavioral Health Divisions host **technical assistance calls on Wednesdays from 1 to 2 p.m. CT** to answer provider questions.

Learn more about the North Dakota Medicaid 1915(i) State Plan Amendment and how to become a provider [here](#).



**Professional help is
available for health care
workers dealing with
COVID-19**

Emotional well-being is important for everyone during the pandemic especially for our state's frontline health care workers.

The North Dakota Department of Human Services' Behavioral Health Division and Sanford Health have teamed up to offer resources for health care workers dealing with COVID-19.

Reach for Resilience was created by health care workers for health care workers to respond to pandemic-related challenges in their daily lives. The service is free, confidential and open to all health care workers in North Dakota.

There is a help line that is answered by behavioral health professionals Monday-Friday 8 a.m. to 5 p.m. CT. FirstLink 2-1-1 answers the help line on evenings, weekends and holidays, and offers support and referrals as needed. The help line can be reached at 701-365-4920.

Other resources are also available on the Reach for Resilience website.

[Reach for Resilience Website](#)

[March Newsletter](#)

[Facebook Page](#)



Reminder: In-state prospective payment system hospitals inpatient services (DRG)

When a Medicaid member is admitted to a short-term acute care hospital, the hospital must review up to three days prior to the inpatient admission to see if any related outpatient services, diagnostic and non-diagnostic, were provided to the member by the hospital and/or facility that is owned/operated by the hospital. If there were related outpatient services in the three-day window, they are not covered as separate services and must be included on the inpatient claim along with other related services.

Durable Medical Equipment (DME) Claims Billing Guidance

The North Dakota Health Enterprise Medicaid Management Information System (MMIS) was updated in December 2020 to reimburse required laterality modifiers right (RT) and left (LT) units properly. For claims that were denied, those can now be resubmitted. For claims that were partially paid, those can be adjusted. Please keep in mind that RT/LT modifiers will be required to be billed on two separate lines.

Example:

- Line 1: L3912 NU RT 1 unit
- Line 2: L3912 NU LT 1 unit

For DME HCPC codes that require a service authorization the claims submittal process will continue to require it to be submitted on one line to match the approved request.

Program Integrity Unit update

North Dakota Medicaid's Program Integrity Unit (PIU) hosted a recent provider update on Feb. 24 and 25. The PIU teams discussed a variety of topics that have an impact on providers and those they care for.

Topics covered included the Medicaid 1915(i) State Plan Amendment, the revalidation backlog and provider enrollment efforts with Noridian Healthcare Solutions.

The Fraud Division covered areas of concern related to COVID-19 vaccine scams and billing practices. The Audit Division discussed current and trending topics including the status of the Payment Error Rate Measurement Program (PERM) review, telehealth requirements, provider outreach, documentation and other topics.

A recording of the update and meeting resources can be found by clicking [here](#).

The goal of the quarterly updates is to improve communication between the PIU and North Dakota Medicaid's provider network.

The next PIU update is schedule for Wednesday, June 23 from 2 to 3 p.m. CT and Thursday, June 24 from 8 to 9 a.m. CT.

To be added to the email list for future provider updates or to submit ideas for future sessions, send an email to auditresponse@nd.gov.



Autism Spectrum Disorder Task Force Meeting - Monday,
May 24 from 1 to 4:30 p.m. CT.

[ASD Task Force Web Page](#)

North Dakota Medicaid Medical Advisory Committee
Meeting - Tuesday, May 11 from 5 to 7 p.m. CT

[MMAC Web Page](#)

North Dakota Medicaid Drug Use Review Board Meeting -
Wednesday, June 2 from 1 to 4 p.m. CT

[Medicaid DUR Web Page](#)