

A young boy in a dark jacket is pushing a wooden wagon filled with pumpkins through a field of pumpkins. The wagon is green and has four black wheels. The field is filled with many pumpkins of various sizes and colors, including orange and yellow. The background shows a wooden fence and some trees.

North Dakota Medicaid Provider Newsletter

September 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 return of revalidations and what providers need to know,
- helpful resources for using Kepro's Atrezzo online provider portal for prior authorizations, and
- Payment Error Rate Measurement review year for 2022, and more!

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

Cover Photo: ND Tourism



Important updates about provider revalidations

Now that North Dakota Medicaid has resumed its provider revalidation process, it is important that providers update their contact information.

If there has been any turnover in your credentialing or provider enrollment areas or if other staff members should be notified of revalidation due dates, you are encouraged to submit those contact updates to NDMedicaidEnrollment@noridian.com.

If you are unsure about your organization's revalidation due dates, you should review the [online provider revalidation rosters](#) that are updated monthly.

If your organization's revalidation due date is approaching in less than 30 days, and you have not yet received a revalidation notice from Noridian Healthcare Solutions, there are [generic revalidation checklists](#) for individual, group and sole proprietor enrollments posted online that can be faxed to 701-433-5956, Attn: ND Medicaid Provider Enrollment, to begin the revalidation process.

Providers are strongly encouraged to check the [revalidation webpage](#) periodically for important updates.

MMIS Provider Contact Information

North Dakota Provider Enrollment has expanded its ability to capture additional contact information in the North Dakota MMIS web portal. Staff are now able to include names for PERM, medical records and audit contacts.

If you would like to make an update to your provider profile with any names in your facility who would be the most appropriate person for these categories, please have your organization administrator send an

email to NDMedicaidEnrollment@noridian.com or fax to 701-433-5956,
Attention: ND Medicaid Provider Enrollment.



Expand your services to individuals with an autism diagnosis and their families

The Autism Spectrum Disorder (ASD) waiver covering children from birth through age 16 will be available on Nov. 1, 2021, pending approval from

the Centers for Medicare and Medicaid Services.

The ASD waiver can provide service management, assistive technology and respite to families of children with an autism diagnosis.

The North Dakota Department of Human Services is also planning to add 54 slots to the waiver.

All waiver slots are required to have a service manager to assist families.

The qualifications for a service manager are:

- must complete mandated reporter training through the State of North Dakota,
- have a bachelor's degree in social work, psychology, occupational therapy, physical therapy, child development and family science, communication disorders (includes audiology or speech pathology), special education, sociology, elementary education, or equivalent and two years of experience working with children with autism or related conditions, or
- have a master's degree in counseling or psychology or a doctorate in medicine will also meet requirements.

Service managers help participants gain access to the waiver and other state plan services, as well as medical, social, educational and other services regardless of the funding source. They also help develop a service plan with the individual, legal decision maker or legal guardian.

The maximum hours a service manager can work with an individual and his or her family is 16 hours per month at the rate of \$14.78 per fifteen minute unit.

Agencies interested in providing this service to families, can contact Katherine Barchenger - State Autism Coordinator at 701-328-4630, or kbarchenger@nd.gov for more information.



Important information about Kepro

Kepro is North Dakota Medicaid's quality improvement partner.

Since Jan. 1, 2021, service authorization requests for certain CPT and ICD 10 procedure codes must be submitted to Kepro using Kepro's Atrezzo

online provider portal for medical necessity review.

As of Aug. 1, 2021, Kepro began authorizing requests for two genetic testing codes 81229 and 81162.

All requests for authorizations from Kepro must be submitted using the [provider portal](#). Kepro will not accept faxed or mailed requests.

How to use Kepro's Atrezzo provider portal

Each facility, doctor's office, and clinic should appoint one person to be its administrator or owner of the provider portal account. Facilities, clinics, and doctor's offices only need to register one time for an account. The account administrator will be able to create additional user accounts.

To register as the account administrator, go online to <https://nddhs.kepro.com/contact-us-form>. Providers will be contacted by secure email and given a registration code to access [Kepro's Atrezzo provider portal](#).

Helpful Resources

Kepro has [provider information and trainings](#) available online. The information includes how to:

- register for an account,
- use multifactor authentication,
- submit a case to Kepro, and
- check the status of a submitted case.

Providers can contact Kepro directly at ndumnurses@kepro.com to request additional information or submit questions.



Training sessions impact Medicaid call center hours on select Fridays

The North Dakota Medicaid Provider Call Center will not be available from 12:15 to 2:45 p.m. Central Time on the following Fridays. Call center

representatives are participating in training sessions to better serve our providers.

- October 8
- October 15
- October 22
- November 5
- November 12
- November 19
- December 3
- December 10
- December 17

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.

The North Dakota Medicaid Call Center hours of operation are Monday-Friday from 8 a.m. to 5 p.m. CT.

Providers can contact the call center by phone at 1-877-328-7098 (toll-free), 711 (TTY) or email at mmisinfo@nd.gov.



For your Information

Attention Ambulance Providers: Effective for claims processed on and after April 1, 2021, submit CPT modifier 76 with ambulance transports (HCPCS codes A0425-A0999) to indicate when a second trip occurred on the same date of service.

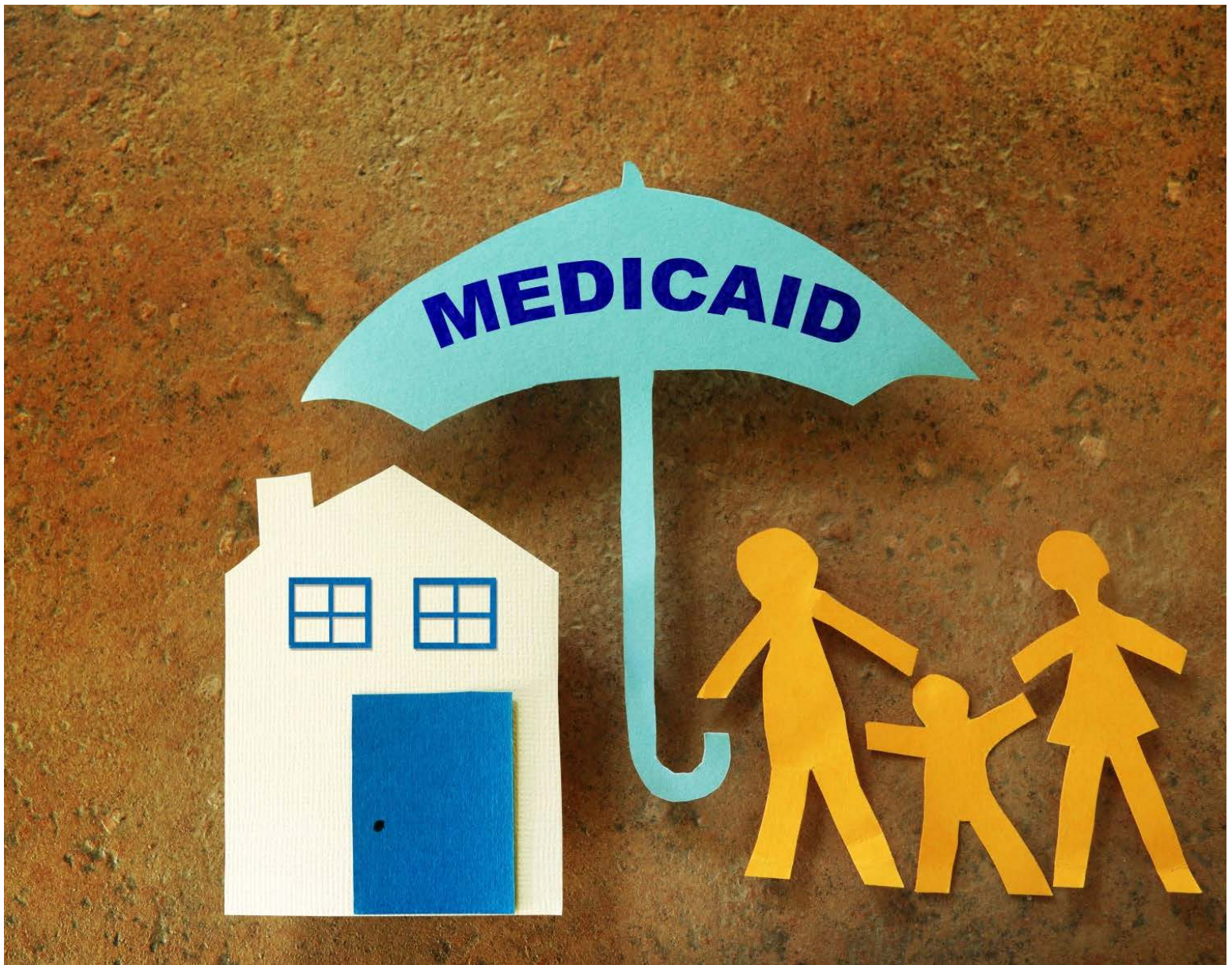
Training Resources: North Dakota Medicaid has created an [educational and training webpage](#) that contains presentations on various topics including billing and claims, the drug rebate program, Health Tracks, pharmacy, quality and program integrity efforts and other Medicaid- related information. Check it out today!

IMPORTANT: Human Service Zone eligibility workers are not allowed to change primary care providers (PCP) spans

retrospectively to make claims pay. **This is considered fraud.**

PCP changes and/or PCP referrals need to be completed

BEFORE seeing a provider that is not their active PCP.



Medicaid fraud, learn what you can do to prevent it

The Medicaid Fraud Control Unit (MFCU) was formed in 2019 to investigate and prosecute health care providers who defraud the North Dakota Medicaid Program and who abuse, neglect, or financially exploit a patient in any facility that accepts Medicaid funds. The MFCU has

statewide jurisdiction to prosecute offenders criminally or file civil actions.

North Dakota Medicaid's Program Integrity Unit (PIU) refers credible allegations of fraud committed by health care providers to the MFCU.

Referrals to the MFCU to date included indications of:

- Billing an impossible number of hours per day
- Unbundling codes
- Billing services on different dates to bypass a time-based service authorization requirement or service limit
- Providers not enrolled with North Dakota Medicaid performing services but billing under the NPI of a North Dakota Medicaid enrolled provider
- Billing for services not provided
- Insufficient or lack of documentation to support the services billed
- A pattern of resubmitting denied claims several times with different codes in an attempt to get paid
- Improperly altering documentation based on denials and then resubmitting for approval

As a reminder, anyone can report suspicions of Medicaid fraud committed by recipients or health care providers to the PIU by:

- Phone: (701) 328-4024 or 1-800-755-2604 (option 3)
- Email: MedicaidFraud@nd.gov
- Complete a [SFN 20](#) and return it via mail, fax, or e-mail as instructed on the form

Also, anyone can submit a complaint to the Medicaid Fraud Control Unit by:

- Phone: 701-328-5446
- Email: agomedicaidfraud@nd.gov
- Mail: MFCU, P.O. Box 2495, Bismarck, ND 58502-2495
- Complete a [SFN 61788](#) and return it to the MFCU via mail or email



Payment Error Rate Measurement (PERM)

Review Year 2022

The PERM review process occurs every three years and examines three areas within Medicaid including eligibility, medical records and data processing.

The goal of PERM is to provide oversight to states through the examination of processes related to health care and to find errors associated with them.

The two most consistent errors are when providers do not submit any records or when records are missing or incomplete. North Dakota Medicaid is also seeing errors in coding, unsigned documentation, unbundling, eligibility, policy violation and other areas.

North Dakota Medicaid is responsible for providing the eligibility and data processing portion of the PERM review. Providers are responsible for providing medical records, when requested.

How does it work?

The timeframe for the current review year is July 1, 2020 through June 30, 2021. The PERM process begins when the state provides claim and recipient data to the PERM vendor for review.

From the data, a sample is selected and providers are asked to submit documentation associated with a date, or range of dates, for when a service or supply was provided and billed.

The PERM vendor will review documents, and in some instances, request additional documentation. North Dakota Medicaid is informed of the results from all of the reviews. When errors are assessed, North Dakota Medicaid team members reach out to providers to see if any additional documentation is available that can be provided to reverse an error.

Visit [North Dakota Medicaid's PERM webpage](#) to learn more.