MedicAide

An Informational Newsletter for Idaho Medicaid Providers

From the Idaho Department of Health and Welfare,   **April 2023**

Division of Medicaid

In This Issue

Information Releases

The content of this guidance document is not new law but is an interpretation of existing law prepared by the Idaho Department of Health and Welfare to provide clarity to the public regarding existing requirements under the law. This document does not bind the public, except as authorized by law or as incorporated into a contract. For additional information or to provide input on this document, contact the Idaho Division of Medicaid by emailing medicaidcommunications@dhw.idaho.gov or by calling (208)334-5747.

Allergy Antigen Preparation

During recent audits, Medicaid Program Integrity Unit identified instances where providers were incorrectly billing Current Procedural Terminology (CPT) code 95165 (professional services for the provision of antigens for allergen immunotherapy; single of multiple antigens, per dose). Examples include overbilling the number of units prepared and/or billing over multiple days to bypass medically unlikely edits (MUEs).

Claims billed to Medicaid must follow the American Medical Association's guidelines, as well as the National Correct Coding Initiative (NCCI) for Medicaid services. NCCI is a compilation of coding policies established by the Centers for Medicare and Medicaid Services and includes two types of edits: NCCI Procedure-to-Procedure (PTP) edits and Medically Unlikely Edits (MUEs). An MUE is the maximum units of service reported for a HCPCS/CPT code on the vast majority of appropriately reported claims by the same provider/supplier for the same beneficiary on the same date of service.

Providers were notified of Medicaid's implementation of these required edits in the April 4, 2011, Medicaid Information Release MA11-05. It states, in pertinent part:

> Section 6507 of The Affordable Care Act requires state Medicaid programs to implement National Correct Coding Initiative (MCDNCCI) methodologies in their claims processing systems to prevent improper payments if incorrect procedure code combinations and medically unlikely units of service are reported on Medicaid claims. Idaho Medicaid began to apply MCDNCCI edits to claims processing for dates of service on or after April 1, 2011.

> Federal law mandates that the NCCI and MUE edits must be implemented. The MCDNCCI edits supersede the Medicaid State Plan, all Idaho Medicaid policies, MedicAide articles, and other previous guidance provided on procedure-to-procedure and units-of-service edits.

Providers are required to follow NCCI guidelines for services billed to Idaho Medicaid. Per these guidelines, one unit of CPT code 95165 is defined as one milliliter of antigen prepared. Providers may report a maximum of 30 units of service per NCCI's MUEs. Providers are not allowed to bill CPT codes over multiple days and/or multiple lines in order to bypass MUEs and are required to only bill for dates services were actually rendered.

Section V of Chapter XI, Medicine Evaluation and Management Service CPT Codes 90000-99999, of the January 2023 Medicaid National Correct Coding Initiative Policy Manual for Medicaid Services, as well as previous versions, addresses MUEs. It states, in pertinent part:

> 2.   Providers should be cautious about reporting services on multiple lines of a claim utilizing modifiers to bypass MUEs. The MUEs were set so that such occurrences should be uncommon. If a provider does this frequently for any HCPCS/CPT code, the provider may be coding UOS incorrectly. The provider may consider contacting their national health care organization or the national medical/surgical society whose members commonly perform the procedure to clarify the correct reporting of UOS.

> 3.   For purposes of reporting UOS for antigen preparation (i.e., CPT codes 95145-95170), the physician reports "number of doses". The NCCI program defines a dose for reporting purposes as 1 milliliter (ml). Thus, if a physician prepares a 10 ml vial of antigen, the physician may only report a maximum of 10 UOS for that vial even if the number of actual administered doses is greater than 10.

Additional information regarding NCCI edits can be found in the [Medicaid NCCI Policy Manual](#); [Section 3.5 of Idaho Medicaid Provider Handbook, General Billing Instructions;](#) and the [January 2018, March 2018, December 2022, and February 2023 MedicAide Newsletters](#). Services not billed in accordance with Idaho Medicaid rules are subject to recoupment and civil monetary penalties.

Medicaid Protection

Medicaid Protection was put in place at the beginning of the COVID-19 pandemic and provided continued Medicaid coverage for individuals who may have otherwise been ineligible. Congress has recently passed a bill that ends this continued coverage requirement on April 1, 2023.

This does not mean your customers' Medicaid coverage will automatically end on April 1, 2023 even if you are receiving Medicaid as a result of this special protection.

DHW will send notices to customers telling them about any coming changes in their eligibility or benefits, and if they need to complete a re-evaluation.

To ensure you receive notices regarding your benefits and re-evaluations, please report any changes in your contact information, including phone number and mailing address. If your contact information has changed, or you want to confirm your current information, contact DHW using the information below. You can also report changes by visiting www.idalink.idaho.gov.

Phone 1(877) 456-1233
Email MyBenefits@dhw.idaho.gov

For more information, visit the [Medicaid Protection FAQ page.](#)

Attention: All Hospital and Long Term Care Facility Provider Types! Additional Terms Documentation

An enhancement to the Provider Enrollment Application and the current process in collecting Additional Terms documentation for Hospitals reimbursed using 3M™ All Patient Refined DRG (APR DRG) Software and Long-Term Care Facility provider types is moving through our implementation process, and we anticipate this change to have provider impact by May 1, 2023. Many providers have already completed the Additional Terms documentation; however, we must require Hospital and Long-Term Care Facilities to repeat their acknowledgement and electronically sign the terms that are presented on the Documents tab in the application during their next maintenance. If a change in ownership is reported the Additional Terms will require re-acknowledgement. Thank you for your cooperation in this matter.

Attention: Hospice Program Audit and Claims Reprocessing

The Department completed an analysis of paid claims between 2/1/2022 to 2/1/2023 that may have paid incorrectly. Claims were paid when participants were receiving hospice care, but the Department had not been notified. Claim reprocessing will begin on 3/3/2023.

Hospice agencies are required to communicate and coordinate all services included in the patient's plan of care. This includes working with ancillary service providers so claims are billed

correctly. If ancillary service providers have questions about a claim reversal, they may contact their Gainwell Provider Relations Consultant or the Medical Care Unit and request the hospice agency name for the participant. It is the responsibility of the hospice provider to work with the ancillary service provider on the claim(s) in question.

The Hospice Services, Idaho Medicaid Provider Handbook requires the hospice provider to notify the Medical Care Unit (MCU) of all hospice elections or recertification for Medicaid participants, regardless of other insurance coverage. The provider is required to notify the MCU of the election or recertification within 15 working days. Election requests received after the first 15 days will be evaluated on a case-by-case basis; or election start date will begin the date of the faxed hospice election documentation is received.

Thank you for the continued service you provide to Idaho Medicaid participants; we look forward to correcting these impacted claims and appreciate your patience.

Policy Update: Ordering, Referring, and Prescribing (ORP) Providers

The ORP policy is being updated to include physician residents. Providers are encouraged to review the section on Ordering, Referring and Prescribing and Providers within the General Information and Requirements for Providers handbook to ensure their business practices are in compliance.

Questions and comments about this article may be submitted to the Medical Care Policy Team at MCPT@dhw.idaho.gov.

Idaho Health Care Conference 2023 – Save the Date!

Gainwell Technologies is eager to invite providers and their staff personnel to the 30th annual statewide Idaho Health Care Conference (IHCC) in May. This year's conference will be held in-person only at the locations noted below. We will be presenting a comprehensive overview of how and when to submit Provider Maintenance to reflect changes to an existing Provider record using the Gainwell Provider Enrollment Application system. The Idaho Medicaid Provider Enrollment Application system helps simplify processes for maintenance requests, features dynamic screens, electronic signature options, and less paper transactions. We will share tips on navigating the maintenance process. Join us to learn more!

Join us at the 2023 Idaho Health Care Conference from 8:00 AM to 4:00 PM on the following dates:

- May 11, 2023: North Idaho—Red Lion Templin's Hotel on the River, Post Falls
- May 16, 2023: Eastern Idaho—Shoshone Bannock Casino Hotel, Fort Hall
- May 18, 2023: Treasure Valley—Nampa Civic Center, Nampa

We hope you'll attend the conference at a location near you!

Idaho Medicaid will Remove the MUE Columns from Fee Schedule

Medically Unlikely Edits (MUEs) defines the maximum Units of Service (UOS) that a provider would report for each HCPCS/CPT code, under most circumstances for a single participant on a

single date of service. The purpose of the MUE is to detect and deny unlikely claims on a pre-payment basis to stop inappropriate payments. MUEs are coding edits, not medical necessity edits and they do not exist for all HCPCS/CPT codes. Medicaid MUEs are applied separately to each line of a claim. The values are updated by CMS quarterly. For more information please see [NCCI for Medicaid | CMS](#).

Although CMS publishes most Medicaid MUE values on its website, other MUE values are confidential. The State is required to use confidential MUE files to process claims and is not able to release any information from those files.

Effective 04/01/2023, Idaho Medicaid will remove the MUE columns from fee schedule because we can only publish the same values that are made publicly available by CMS. The State is restricted from publishing the MUE values it is required to use. Providers are encouraged to check publicly available MUE values on the following site [Filtered NCCI Medically Unlikely Edits (MUEs) (medicaid.gov)](#).

Non-Covered Services

As a reminder to all providers, any codes not appearing on the Idaho Medicaid Fee Schedule are considered non-covered. Informational only codes are not considered covered codes and are not eligible for reimbursement. Providers billing on a UB-04 claim form should be especially careful in their billing practices. While not all revenue codes require a HCPCS, providers should not be billing for services that are considered non-covered or informational under these revenue codes to receive reimbursement. This may constitute fraud and lead to referrals to the Medicaid Program Integrity Unit. Any reimbursement received for non-covered or informational only services may be subject to recoupment and penalties. See Non-Covered and Excluded Services in the [General Information and Requirements for Providers](#) for more information.

Questions and comments about this article may be submitted to the Medical Care Policy Team at [MCPT@dhw.idaho.gov](#).

C-Code Coverage

C-Codes are temporary codes for the hospital outpatient prospective payment system (OPPS) used by Medicare. The OPPS payment method is not utilized by Idaho Medicaid. However, in March of 2018 Idaho Medicaid begin covering a limited number of C-Codes for coverage to support hospitals required to use OPPS methodology and decrease incidents of split billing. Those codes that were determined not to be covered by Idaho Medicaid for reimbursement were made informational only to assist in claims processing.

Per provider requests made through the Idaho Hospital Association, Idaho Medicaid has reviewed C-Codes previously listed as informational only and made a coverage determination. The following C-codes are being added for coverage. All other C-Codes that were informational only not appearing below are non-covered effective May 1, 2023. As a reminder, any codes not appearing on the Idaho Medicaid Fee Schedule are considered non-covered. New codes for drugs with an FDA indication and which are eligible for a manufacturer's rebate will be covered and placed on the Idaho Medicaid Fee Schedule in compliance with the Social Security Act 1927, "Payment for Covered Outpatient Drugs".

Please, allow additional time for the system to be updated. Claims will be reprocessed once complete. All statute, rule and provider handbook requirements apply.

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
C1721	Cardioverter-defibrillator, dual chamber (implantable)	7/1/2022	No
C1722	Cardioverter-defibrillator, single chamber (implantable)	7/1/2022	No
C1750	Catheter, hemodialysis/peritoneal, long-term	7/1/2022	No
C1752	Catheter, hemodialysis/peritoneal, short-term	7/1/2022	No
C1754	Catheter, intradiscal	7/1/2022	No
C1767	Generator, neurostimulator (implantable), non-rechargeable	7/1/2022	No
C1777	Lead, cardioverter-defibrillator, endocardial single coil (implantable)	7/1/2022	No
C1778	Lead, neurostimulator (implantable)	7/1/2022	No
C1779	Lead, pacemaker, transvenous vdd single pass	7/1/2022	No
C1783	Ocular implant, aqueous drainage assist dev	7/1/2022	No
C1785	Pacemaker, dual chamber, rate-responsive (implantable)	7/1/2022	No
C1786	Pacemaker, single chamber, rate-responsive (implantable)	7/1/2022	No
C1787	Patient programmer, neurostimulator	7/1/2022	No
C1789	Prosthesis, breast (implantable)	7/1/2022	No
C1815	Prosthesis, urinary sphincter (implantable)	7/1/2022	No
C1816	Receiver and/or transmitter, neurostimulator (implantable)	7/1/2022	No
C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system	7/1/2022	No
C1822	Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charging system	7/1/2022	No
C1878	Material for vocal cord medialization, synthetic (implantable)	7/1/2022	No
C1880	Vena cava filter	7/1/2022	No
C1881	Dialysis access system (implantable)	7/1/2022	No
C1895	Lead, cardioverter-defibrillator, endocardial dual coil (implantable)	7/1/2022	No
C1896	Lead, cardioverter-defibrillator, other than endocardial single or dual coil (implantable)	7/1/2022	No
C1897	Lead, neurostimulator test kit (implantable)	7/1/2022	No
C1898	Lead, pacemaker, other than transvenous vdd single pass	7/1/2022	No
C1899	Lead, pacemaker/cardioverter-defibrillator combination (implantable)	7/1/2022	No
C2619	Pacemaker, dual chamber, non rate-responsive (implantable)	7/1/2022	No

C2620	Pacemaker, single chamber, non rate-responsive (implantable)	7/1/2022	No
C2621	Pacemaker, other than single or dual chamber (implantable)	7/1/2022	No
C2622	Prosthesis, penile, non-inflatable	7/1/2022	No
C5272	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (list separately in addition to code for primary procedure)	7/1/2022	No
C5274	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)	7/1/2022	No
C5276	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (list separately in addition to code for primary procedure)	7/1/2022	No
C5278	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (list separately in addition to code for primary procedure)	7/1/2022	No
C9601	Percutaneous transcatheter placement of drug-eluting intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)	7/1/2022	No
C9603	Percutaneous transluminal coronary atherectomy, with drug-eluting intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery (list separately in addition to code for primary procedure)	7/1/2022	No
C9605	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft (list separately in addition to code for primary procedure)	7/1/2022	No

C9608	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft (list separately in addition to code for primary procedure)	7/1/2022	No

Questions and comments about this article may be submitted to the Medical Care Policy Team at MCPT@dhw.idaho.gov.

CPT® and HCPCS Coverage Update

The following codes are being added for coverage. Please, allow additional time for the system to be updated. Claims will be reprocessed once complete. All statute, rule and provider handbook requirements apply.

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
01937	Anes drg/aspir crv/thrc	1/1/2022	No
01937	Anes drg/aspir crv/thrc	1/1/2022	No
01938	Anes drg/aspir lmbr/sac	1/1/2022	No
01939	Anes nulyt agt crv/thrc	1/1/2022	No
01940	Anes nulyt agt lmbr/sac	1/1/2022	No
01941	Anes neuromd/ntrvrt crv/thrc	1/1/2022	No
01942	Anes neuromd/ntrvrt lmbr/sac	1/1/2022	No
15853	Removal sutr/stapl xreq anes	1/1/2023	No
15854	Removal sutr&stapl xreq anes	1/1/2023	No
33509	Ndsc hrv uxtr art 1 sgm cab	1/1/2022	No
33894	Evasc st rpr thrc/aa acrs br	1/1/2022	No
33895	Evasc st rpr thrc/aa x crsg	1/1/2022	No
33897	Perq trluml angp nt/recr coa	1/1/2022	No
33900	Perq p-art revsc 1 nm nt uni	1/1/2023	No
33901	Perq p-art revsc 1 nm nt bi	1/1/2023	No
33902	Perq p-art revsc 1 abnor uni	1/1/2023	No
33903	Perq p-art revsc 1 abnor bi	1/1/2023	No
33904	Perq p-art revsc each addl	1/1/2023	No
36836	Prq av fstl crtj uxtr 1 acs	1/1/2023	No
36837	Prq av fstl crt uxtr sep acs	1/1/2023	No
43291	Egd flx trnsorl rmvl balo	1/1/2023	No
43497	Transorl lwr esophgl myotomy	1/1/2022	No

	Covered Codes		
Codes	**Description**	**Effective Date**	**Prior Authorization**
49591	Rpr aa hrn 1st < 3 cm rdc	1/1/2023	No
49592	Rpr aa hrn 1st < 3 ncr/strn	1/1/2023	No
49593	Rpr aa hrn 1st 3-10 rdc	1/1/2023	No
49594	Rpr aa hrn 1st 3-10 ncr/strn	1/1/2023	No
49595	Rpr aa hrn 1st > 10 rdc	1/1/2023	No
49596	Rpr aa hrn 1st > 10 ncr/strn	1/1/2023	No
49613	Rpr aa hrn rcr < 3 rdc	1/1/2023	No
49614	Rpr aa hrn rcr < 3 ncr/strn	1/1/2023	No
49615	Rpr aa hrn rcr 3-10 rdc	1/1/2023	No
49616	Rpr aa hrn rcr 3-10 ncr/strn	1/1/2023	No
49617	Rpr aa hrn rcr > 10 rdc	1/1/2023	No
49618	Rpr aa hrn rcr > 10 ncr/strn	1/1/2023	No
49621	Rpr parastomal hernia rdc	1/1/2023	No
49622	Rpr parastomal hrna ncr/strn	1/1/2023	No
49623	Rmvl ninfct mesh hernia rpr	1/1/2023	No
55867	Laps surg prst8ect smpl stot	1/1/2023	No
63052	Lam facetc/frmt arthrd lum 1	1/1/2022	No
63053	Lam factc/frmt arthrd lum ea	1/1/2022	No
64584	Rmvl hpglsl nstim ary pg	1/1/2022	No
66989	Xcpsl ctrc rmvl cplx insj 1+	1/1/2022	No
66991	Xcapsl ctrc rmvl insj 1+	1/1/2022	No
69716	Impl oi implt sk tc esp<100	1/1/2022	Yes, Telligen
69719	Rplcm oi implt sk tc esp<100	1/1/2022	Yes, Telligen
69726	Rmv ntr oi implt skl prq esp	1/1/2022	No
69727	Rmv ntr oi imp sk tc esp<100	1/1/2022	No
69728	Rmv ntr oi imp sktc esp>=100	1/1/2023	No
69729	Impl oi implt sk tc esp>=100	1/1/2023	No
69730	Rplc oi implt sk tc esp>=100	1/1/2023	No
76883	Us nrv&acc strux 1xtr compre	1/1/2023	No
80220	Drug asy hydroxychloroquine	1/1/2022	No
80503	Path clin consltj sf 5-20	1/1/2022	No
80504	Path clin consltj mod 21-40	1/1/2022	No
80505	Path clin consltj high 41-60	1/1/2022	No
80506	Path clin consltj prolng svc	1/1/2022	No
81349	Cytog alys chrml abnr lw-ps	1/1/2022	No
81418	Rx metab gen seq alys pnl 6	1/1/2023	Yes, Telligen
81441	Ibmfs seq alys pnl 30 genes	1/1/2023	Yes, Telligen
81449	Tgsap so neo 5-50 rna alys	1/1/2023	Yes, Telligen
81451	Tgsap hl neo 5-50 rna alys	1/1/2023	Yes, Telligen

Covered Codes			
Codes	**Description**	**Effective Date**	**Prior Authorization**
81456	Tgsap so/hl 51/> rna alys	1/1/2023	Yes, Telligen
81523	Onc brst mrna 70 cnt 31 gene	1/1/2022	No
82653	El-1 fecal quantitative	1/1/2022	No
83521	Ig light chains free each	1/1/2022	No
84433	Asy thiopurin s-mthyltrnsfrs	1/1/2023	No
86015	Actin antibody each	1/1/2022	No
86036	Anca screen each antibody	1/1/2022	No
86037	Anca titer each antibody	1/1/2022	No
86051	Aquaporin-4 antb elisa	1/1/2022	No
86052	Aquaporin-4 antb cba each	1/1/2022	No
86053	Aqaprn-4 antb flo cytmtry ea	1/1/2022	No
86231	Ema each ig class	1/1/2022	No
86258	Dgp antibody each ig class	1/1/2022	No
86362	Mog-igg1 antb cba each	1/1/2022	No
86363	Mog-igg1 antb flo cytmtry ea	1/1/2022	No
86364	Tiss trnsgltmnase ea ig clas	1/1/2022	No
86381	Mitochondrial antibody each	1/1/2022	No
86596	Voltage-gtd ca chnl antb ea	1/1/2022	No
87467	Hepatitis b surface ag quan	1/1/2023	No
87468	Anaplsma phgcytophlm amp prb	1/1/2023	No
87469	Babesia microti amp prb	1/1/2023	No
87478	Borrelia miyamotoi amp prb	1/1/2023	No
87484	Ehrlicha chaffeensis amp prb	1/1/2023	No
87913	Nfct agt gntyp alys sarscov2	4/1/2022	No
90678	Rsv vacc pref bivalent im	1/1/2023	No
90759	Hep b vac 3ag 10mcg 3 dos im	1/1/2022	No
91304	Sarscov2 vac 5mcg/0.5ml im	10/1/2022	No
91311	Sarscov2 vac 25mcg/0.25ml im	6/17/2022	No
91314	Sarscov2 vac bvl 25mcg/.25ml	10/1/2022	No
91315	Sarscov2 vac bvl 10mcg/0.2ml	10/1/2022	No
91316	Sarscov2 vac bvl 10mcg/0.2ml	12/8/2022	No
91317	Sarscov2 vac bvl 3mcg/0.2ml	12/8/2022	No
92066	Orthop traing supvj phys/qhp	1/1/2023	Yes, EPSDT
93569	Njx cth slct p-art angrp uni	1/1/2023	No
93573	Njx cath slct p-art angrp bi	1/1/2023	No
93574	Njx cath slct pulm vn angrph	1/1/2023	No
93575	Njx cath slct p angrph mapca	1/1/2023	No
93593	R hrt cath chd nml nt cnj	1/1/2022	No
93594	R hrt cath chd abnl nt cnj	1/1/2022	No

Covered Codes			
Codes	**Description**	**Effective Date**	**Prior Authorization**
93595	L hrt cath chd nm/abn nt cnj	1/1/2022	No
93596	R&l hrt cath chd nml nt cnj	1/1/2022	No
93597	R&l hrt cath chd abnl nt cnj	1/1/2022	No
93598	Car outp meas drg cath chd	1/1/2022	No
94625	Phy/qhp op pulm rhb w/o mntr	1/1/2022	No
94626	Phy/qhp op pulm rhb w/mntr	1/1/2022	No
99418	Prolng ip/obs e/m ea 15 min	1/1/2023	No
99424	Prin care mgmt phys 1st 30	1/1/2022	No
99425	Prin care mgmt phys ea addl	1/1/2022	No
99426	Prin care mgmt staff 1st 30	1/1/2022	No
99427	Prin care mgmt staff ea addl	1/1/2022	No
99437	Chrnc care mgmt phys ea addl	1/1/2022	No
0041A	Adm sarscov2 5mcg/0.5ml 1st	10/1/2022	No
0042A	Adm sarscov2 5mcg/0.5ml 2nd	10/1/2022	No
0044A	Adm sarscov2 5mcg/0.5ml bst	10/1/2022	No
0112A	Adm sarscov2 25mcg/0.25ml2nd	6/17/2022	No
0113A	Adm sarscov2 25mcg/0.25ml3rd	6/17/2022	No
0144A	Adm srscv2 bvl 25mcg/.25ml b	10/1/2022	No
0154A	Adm sarscv2 bvl 10mcg/.2ml b	10/1/2022	No
0164A	Adm srscv2 bvl 10mcg/0.2ml b	12/8/2022	No
0173A	Adm sarscv2 bvl 3mcg/0.2ml 3	12/8/2022	No
A4238	Adju cgm supply allowance	4/1/2022	No
A4239	Non-adju cgm supply allow	1/1/2023	No
A4341	Iduc valve pat inst repl	4/1/2023	No
A4342	Iduc valve sply repl	4/1/2023	No
A4436	Irr supply sleev reus per mo	1/1/2022	No
A4437	Irr supply sleev disp per mo	1/1/2022	No
A6590	Urinary cath disp suc pump	4/1/2023	No
A6591	Urinary cath suc pump	4/1/2023	No
A9595	Piflufolastat f-18, diagnostic, 1 millicurie	1/1/2022	No
A9596	Gallium ga-68 gozetotide, diagnostic, (illuccix), 1 millicurie	7/1/2022	No
A9601	Flortaucipir f 18 injection, diagnostic, 1 millicurie	7/1/2022	No
A9602	Fluorodopa f-18 diag per mci	10/1/2022	No
A9607	Lutetium lu 177 vipivotide	10/1/2022	No
A9800	Gallium locametz 1 millicuri	10/1/2022	No
C1747	Endo, single, urinary tract	1/1/2023	No
C1826	Gen, neuro, clo loop, rechg	1/1/2023	No
C1827	Gen, neuro, imp led, ex cntr	1/1/2023	No

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
C7500	Deb bone 20 cm2 w/drug dev	1/1/2023	No
C7504	Perq cvt&ls inj vert bodies	1/1/2023	No
C7505	Perq ls&cvt inj vert bodies	1/1/2023	No
C7506	Fusion of finger joints	1/1/2023	No
C7507	Perq thor&lumb vert aug	1/1/2023	No
C7508	Perq lumb&thor vert aug	1/1/2023	No
C7513	Cath/angio dialcir w/aplasty	1/1/2023	No
C7514	Cath/angio dial cir w/stents	1/1/2023	No
C7515	Cath/angio dial cir w/embol	1/1/2023	No
C7516	Cor angio w/ ivus or oct	1/1/2023	No
C7518	Cor/gft angio w/ ivus or oct	1/1/2023	No
C7521	R hrt angio w/ ivus or oct	1/1/2023	No
C7523	L hrt angio w/ ivus or oct	1/1/2023	No
C7525	L hrt gft ang w/ ivus or oct	1/1/2023	No
C7527	R&l hrt angio w/ ivus or oct	1/1/2023	No
C7530	Cath/aplasty dial cir w/stnt	1/1/2023	No
C7531	Angio fem/pop w/ us	1/1/2023	No
C7532	Angio w/ us non-coronary	1/1/2023	No
C7533	Ptca w/ plcmt brachytx dev	1/1/2023	No
C7534	Fem/pop revasc w/arthr & us	1/1/2023	No
C7535	Fem/pop revasc w/stent & us	1/1/2023	No
C7537	Insrt atril pm w/l vent lead	1/1/2023	No
C7538	Insrt vent pm w/l vent lead	1/1/2023	No
C7539	Insrt a & v pm w/l vent lead	1/1/2023	No
C7540	Rmv&rplc pm dul w/l vnt lead	1/1/2023	No
C7541	Ercp w/ pancreatoscopy	1/1/2023	No
C7542	Ercp w/bx & pancreatoscopy	1/1/2023	No
C7543	Ercp w/otomy, pancreatoscopy	1/1/2023	No
C7544	Ercp rmv calc pancreatoscopy	1/1/2023	No
C7545	Exch bil cath w/ rmv calculi	1/1/2023	No
C7546	Rep nph/urt cath w/dil stric	1/1/2023	No
C7547	Cnvrt neph cath w/ dil stric	1/1/2023	No
C7548	Exch neph cath w/ dil stric	1/1/2023	No
C7549	Chge urtr stent w/ dil stric	1/1/2023	No
C7551	Exc neuroma w/ implnt nv end	1/1/2023	No
C7555	Rmvl thyrd w/autotran parath	1/1/2023	No
C7900	Hopd mntl hlt, 15-29 min	1/1/2023	No
C7901	Hopd mntl hlt, 30-60 min	1/1/2023	No
C7902	Hopd mntl hlt, ea addl	1/1/2023	No

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
C9082	Injection, dostarlimab-gxly, 100 mg	10/1/2021	Yes, Pharmacy
C9083	Injection, amivantamab-vmjw, 10 mg	10/1/2021	Yes, Pharmacy
C9084	Injection, loncastuximab tesirine-lpyl, 0.1 mg	10/1/2021	Yes, Pharmacy
C9085	Injection, avalglucosidase alfa-ngpt, 4 mg	1/1/2022	No
C9086	Injection, anifrolumab-fnia, 1 mg	1/1/2022	No
C9087	Injection, cyclophosphamide, (auromedics), 10 mg	1/1/2022	No
C9088	Instillation, bupivacaine and meloxicam, 1 mg/0.03 mg	1/1/2022	No
C9089	Bupivacaine, collagen-matrix implant, 1 mg	1/1/2022	No
C9090	Plasminogen, human-tvmh 1 mg	4/1/2022	No
C9091	Sirolimus, protein-bound,1mg	4/1/2022	No
C9092	Inj., xipere, 1 mg	4/1/2022	No
C9093	Inj., susvimo, 0.1 mg	4/1/2022	No
C9094	Inj, sutimlimab-jome, 10 mg	7/1/2022	No
C9095	Inj, tebentafusp-tebn, 1 mcg	7/1/2022	No
C9096	Inj, releuko, 1 mcg	7/1/2022	No
C9097	Inj, faricimab-svoa, 0.1 mg	7/1/2022	No
C9098	Ciltacabtagene car pos t	7/1/2022	No
C9101	Inj, oliceridine 0.1 mg	10/1/2023	No
C9142	Inj, alymsys, 10 mg	10/1/2022	No
C9143	Cocaine hcl nasal (numbrino)	1/1/2023	No
C9144	Inj, bupivacaine (posimir)	1/1/2023	No
C9145	Inj, aponvie, 1 mg	4/1/2023	No
C9146	Inj, elahere, 1 mg	4/1/2023	No
C9147	Inj, tremelimumab-actl, 1 mg	4/1/2023	No
C9148	Inj, teclistamab-cqyv, 0.5mg	4/1/2023	Yes, Pharmacy
C9149	Inj, teplizumab-mzwv, 5 mcg	4/1/2023	Yes, Pharmacy
C9779	Esd endoscopy or colonoscopy	10/1/2021	No
C9780	Insert cv cath inf & sup app	10/1/2021	No
E2102	Adju cgm receiver/monitor	4/1/2022	No
E2103	Non-adju cgm receiver/mon	1/1/2023	No
G0316	Prolong inpt eval add15 m	1/1/2023	No
G0317	Prolong nursin fac eval 15m	1/1/2023	No
G0318	Prolong home eval add 15m	1/1/2023	No
G0320	Two-way audio and video hhs	1/1/2023	No
G0322	Home h physio data collec tr	1/1/2023	No
G1028	Take home supply 8mg per 0.1	1/1/2022	No
G3002	Chronic pain mgmt 30 mins	1/1/2023	No
G3003	Chronic pain mgmt addl 15m	1/1/2023	No

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
J0131	Inj, acetaminophen (nos)	1/1/2023	No
J0134	Inj acetaminophen -fresenius	1/1/2023	No
J0136	Inj, acetaminophen (b braun)	1/1/2023	No
J0173	Inj, epinephrine (belcher)	1/1/2023	No
J0208	Inj sodium thiosulfate 100mg	4/1/2023	No
J0218	Inj olipudase alfa-rpcp 1mg	4/1/2023	Yes, Pharmacy
J0225	Inj, vutrisiran, 1 mg	1/1/2023	No
J0248	Inj, remdesivir, 1 mg	1/1/2022	No
J0283	Inj, amiodarone (nexterone)	1/1/2023	No
J0611	Calcium glucon (wg critical)	1/1/2023	No
J0612	Calcium glucon (fresenius)	4/1/2023	No
J0613	Calcium glucon (wg critical)	4/1/2023	No
J0689	Inj cefazolin sodium, baxter	1/1/2023	No
J0699	Inj, cefiderocol, 10 mg	10/1/2021	No
J0701	Inj. cefepime hcl (baxter)	1/1/2023	No
J0703	Inj, cefepime hcl (b braun)	1/1/2023	No
J0739	Injection, cabotegravir 1 mg	7/1/2022	No
J0741	Inj, cabote rilpivir 2mg 3mg	10/1/2021	Yes, Pharmacy
J0877	Inj, daptomycin (hospira)	1/1/2023	No
J0891	Argatroban nonesrd (accord)	1/1/2023	No
J0892	Argatroban dialysis (accord)	1/1/2023	No
J0893	Inj, decitabine (sun pharma)	1/1/2023	No
J0898	Argatroban nonesrd (auromed)	1/1/2023	No
J0899	Argatroban dialysis, auromed	1/1/2023	No
J1302	Inj, sutimlimab-jome, 10 mg	10/1/2022	No
J1305	Inj, evinacumab-dgnb, 5mg	10/1/2021	Yes, Pharmacy
J1306	Injection, inclisiran, 1 mg	7/1/2022	No
J1411	Inj, hemgenix, per tx dose	4/1/2023	Yes, Pharmacy
J1426	Injection, casimersen, 10 mg	10/1/2021	Yes, Pharmacy
J1445	Inj triferic avnu 0.1mg iron	10/1/2021	No
J1448	Injection, trilaciclib, 1mg	10/1/2021	No
J1449	Inj eflapegrastim-xnst 0.1mg	4/1/2023	No
J1456	Inj, fosaprepitant (teva)	1/1/2023	No
J1551	Inj cutaquig 100 mg	7/1/2022	No
J1574	Inj, ganciclovir (exela)	1/1/2023	No
J1611	Inj glucagon hcl, fresenius	1/1/2023	No
J1643	Inj heparin, pfizer, 1000u	1/1/2023	No
J1747	Inj, spesolimab-sbzo, 1 mg	4/1/2023	Yes, Pharmacy
J1932	Inj, lanreotide, (cipla) 1mg	10/1/2022	No

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
J1952	Leuprolide inj, camcevi, 1mg	10/1/2022	No
J1954	Leuprolide depot cipla 7.5mg	1/1/2023	No
J2021	Inj, linezolid (hospira)	1/1/2023	No
J2184	Inj, meropenem (b. braun)	1/1/2023	No
J2247	Inj, micafungin (par pharm)	1/1/2023	No
J2251	Inj midazolam (wg crit care)	1/1/2023	No
J2272	Inj, morphine (fresenius)	1/1/2023	No
J2281	Inj moxifloxacin (fres kabi)	1/1/2023	No
J2311	Inj, naloxone hcl (zimhi)	1/1/2023	No
J2327	Inj risankizumab-rzaa 1 mg	1/1/2023	No
J2356	Inj tezepelumab-ekko, 1mg	7/1/2022	No
J2401	Chloroprocaine hcl injection	1/1/2023	No
J2402	Chloroprocaine (clorotekal)	1/1/2023	No
J2403	Chloroprocaine opht gel, 1mg	4/1/2023	No
J2406	Injection, oritavancin 10 mg	10/1/2021	Yes, Pharmacy
J2777	Inj, faricimab-svoa, 0.1mg	10/1/2022	No
J2779	Inj, susvimo 0.1 mg	7/1/2022	No
J2998	Inj plasminogen tvmh 1mg	7/1/2022	No
J3244	Inj. tigecycline (accord)	1/1/2023	No
J3299	Inj xipere 1 mg	7/1/2022	No
J3371	Inj, vancomycin hcl (mylan)	1/1/2023	No
J3372	Inj, vancomycin hcl (xellia)	1/1/2023	No
J7294	Seg acet and eth estr yearly	10/1/2021	No
J7295	Eth estr and eton monthly	10/1/2021	No
J9046	Inj, bortezomib, dr. reddy's	1/1/2023	No
J9048	Inj, bortezomib freseniuskab	1/1/2023	No
J9049	Inj, bortezomib, hospira	1/1/2023	No
J9196	Inj gemcitabine hcl (accord)	4/1/2023	No
J9247	Inj, melphalan flufenami 1mg	10/1/2021	Yes, Pharmacy
J9274	Inj, tebentafusp-tebn, 1 mcg	10/1/2022	No
J9294	Inj pemetrexed, hospira 10mg	4/1/2023	No
J9296	Inj pemetrexed (accord) 10mg	4/1/2023	No
J9297	Inj pemetrexed (sandoz) 10mg	4/1/2023	No
J9298	Inj nivol relatlimab 3mg/1mg	10/1/2022	No
J9314	Inj pemetrexed (teva) 10mg	1/1/2023	No
J9318	Inj romidepsin non-lyo 0.1mg	10/1/2021	No
J9319	Inj romidepsin lyophil 0.1mg	10/1/2021	No
J9331	Inj sirolimus prot part 1 mg	7/1/2022	No
J9332	Inj efgartigimod 2mg	7/1/2022	No

Covered Codes			
Codes	**Description**	**Effective Date**	**Prior Authorization**
J9393	Inj, fulvestrant (teva)	1/1/2023	No
J9394	Inj, fulvestrant (fresenius)	1/1/2023	No
K1022	Endoskel posit rotat unit	10/1/2021	No
L8678	Ext sply implt neurostim	4/1/2023	No
M0220	Tixagev and cilgav inj	1/1/2022	No
M0221	Tixagev and cilgav inj hm	1/1/2022	No
Q2056	Ciltacabtagene car-pos t	10/1/2022	No
Q5125	Inj, releuko 1 mcg	10/1/2022	No
Q5126	Inj alymsys 10 mg	10/1/2022	No
Q5127	Inj, stimufend, 0.5 mg	4/1/2023	No
Q5128	Inj, cimerli, 0.1 mg	4/1/2023	No
Q5129	Inj, vegzelma, 10 mg	4/1/2023	No
Q5130	Inj, fylnetra, 0.5 mg	4/1/2023	No

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Questions and comments about this article may be submitted to the Medical Care Policy Team at MCPT@dhw.idaho.gov.

State of Idaho
Division Of Occupational and Professional Licenses
Health Professions Bureau

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RUSSELL BARRON
Administrator

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Boise, ID 83720-0063
(208) 334-3233
dopl.idaho.gov

February 13, 2023

RE: Mandatory Checking of the Prescription Drug Monitoring Program (PDMP)

Dear Controlled Substance Registrant,

Idaho Code 37-2722 went into effect on October 1, 2020, mandating that prescribers check the Prescription Drug Monitoring Program (PDMP) database. When this law was passed, enforcement was to be educational initially. Beyond a suitable period, enforcement could then be a collaborative effort by the Board of Pharmacy and the respective licensing boards.

We want to thank those prescribers who abide by the law and check the PDMP prior to prescribing. **The period for enforcement discretion ends March 31, 2023. Those prescribers not checking the PDMP prior to prescribing an opioid analgesic or benzodiazepine in accordance with Idaho Code 37-2722 are in violation of the law and subject to disciplinary action.** The PDMP records each inquiry it receives (whether by the provider or their delegate).

Idaho has instituted Statewide Gateway integration to make PDMPs more convenient to use and access. Integrations into electronic health record (EHR) systems helps streamline the process. The integration eliminates the need for providers to log in separately to the PDMP. Though integration is not mandatory, it is highly encouraged, and funds are available for providers or facilities. For additional information visit: PDMP Gateway-Welcome Kit.

Please be sure your user profile is accurate and up to date. For additional information a FAQ is posted at www.BOP.idaho.gov. Questions can be sent to pdmp@dopl.idaho.gov. Thank you for your efforts to comply with the Idaho Uniform Controlled Substance Act.

Sincerely,

Nicki Chopski, PharmD
Health Professions Bureau Chief
Division of Occupational and Professional Licenses

State of Idaho
Division of Occupational and Professional Licenses
Idaho State Board of Pharmacy

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Governor
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Administrator

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PDMP Mandatory Checking
Frequently Asked Questions

Idaho Code

Q. Is there an Idaho law regarding mandatory checking a patient prescription history in the Idaho PDMP?
A. Yes. Idaho Code 37-2722(f) effective October 1, 2020.

https://legislature.idaho.gov/statutesrules/idstat/Title37/T37CH27/SECT37-2722/

Q. What is the specific compliance expectation for prescribers?
A. Idaho Code 37-2722(f) states in pertinent part:
"Prior to issuing a patient a prescription for outpatient use for an opioid analgesic or benzodiazepine listed in schedule II, III, or IV, the prescriber or the prescriber's delegate shall review the patient's prescription drug history from the preceding twelve (12) months from the prescription drug monitoring program and evaluate the data for indicators of prescription drug diversion or misuse."

Q. Are there any exceptions for PDMP mandatory checking?
A. Yes, 37-2722 (f)(1)(2) states in pertinent part:
"The review is not required:
(1) For patients:
       (i) Receiving treatment in an inpatient setting:
       (ii) At the scene of an emergency or in an ambulance:
       (iii) In hospice care: or
       (iv) In a skilled nursing home care facility: or
(2) For a prescription in a quantity intended to last no more than three (3) days."

Q. Who is considered a registered Idaho prescriber?
A. A professionally licensed Idaho prescriber that has an active Idaho Practitioner Controlled Substance Registration an associated Federal DEA Controlled Substance Registration, and prescribes to human patients.

Q. Who is considered a registered prescriber delegate?
A. Nurse, medical or office assistant, current student of a health profession if a licensed practitioner or registered graduate of such profession who may access the database, or a registered pharmacy technician who is designated by a supervising practitioner or pharmacist.

Q. How does a person become a registered delegate?
A. The person must create a PDMP delegate user account and select a supervisor (prescriber). The prescriber will receive the request via their PDMP account for approval.

Valid Search

Q. Does reviewing a patient history once validate all controlled substance prescriptions for that encounter?
A. Yes. A prescriber or prescriber's delegate needs only view PDMP once per patient encounter no matter if two or more prescriptions are prescribed.

Q. Is there is a way for a prescriber to view past searches?
A. Yes, in the user account under RX Searches there is a Prescriber Report option. This will provide a snapshot of prescribing history for covered substances for the most recent report as well as available historical reports.

Compliance

Q. How does the division know that a prescriber or prescriber's delegate has checked the Idaho PDMP and are there any requirements for documenting when checked?
A. The PDMP system tracks compliance for each inquiry. While there is no requirement by law for the prescriber or prescriber's delegate to document PDMP checks, it may be best practice to do so.

Q. How is PDMP mandatory checking going to be enforced?
A. There was a subcommittee that was clear that enforcement was to be educational initially. Beyond a suitable period, enforcement could be a collaborative effort by the division and the respective licensing boards.
With more than two (2) years having passed since the implementation of mandatory checking, enforcement discretion ends 03/31/2023.

PDMP Statewide Integration

Q. Signing in and out of the PDMP system takes too much time. How can I quickly obtain the necessary patient data and still meet the mandatory requirements?
A. PDMP data can be integrated into an electronic health record (EHR) through our PDMP integration platform.

Q. How does integrating with the PDMP platform help me get data faster?
A. The PDMP data is integrated into the EHR or pharmacy management system. This integration empowers clinicians to access patient data at the point of care.

Q. Does checking via the PDMP integration platform count towards the mandatory checking?
A. Yes, the PDMP integration does track compliance for each inquiry search.

Q. Is PDMP integration mandatory?
A. No, PDMP integration is not necessary and if chosen PDMP data will still be accessible through the Idaho PDMP web portal.

Q. Is there a cost for the PDMP Integration?
A. Yes, there is a fee. However, the Idaho Board of Pharmacy will provide for the initial user license fee expenses to set up the integration.

How long does it take for integration to be completed?
A. The process and timeline for integration is dependent upon your EHR or pharmacy management system vendor.

How do I register for the integration?

A. To register for PDMP Integration into your EHR or Pharmacy Management System review the following Gateway Integration Welcome Packet.
Then go to https://connect.bamboohealth.com/and click Create An Account to begin.

What's ECHOing at ECHO Idaho?

ECHO Idaho is a virtual platform that gives voice to knowledge. Our CE-eligible series combine interactive learning and case-based discussions that offer every health professional the opportunity to participate in a community where experts and peers share knowledge, experience and expertise using technology to connect.

April 2023

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Free, Virtual, 1-hour Continuing Education Sessions in April

**Registering with Project ECHO will provide you with regular email updates on all upcoming ECHO trainings. Still not registered? Register here.

Adolescent Substance Use Disorder
Date: Wednesday, April 12, 2023
Time: Noon - 1 p.m. Mountain time
Topic: Trauma and Addiction
Featuring: Ryan Billington, MD, Psychiatrist at St. Luke's
Add this session to your calendar, here.

Date: Wednesday, April 26, 2023
Time: Noon - 1 p.m. Mountain time
Topic: Mental Illness and Addiction
Featuring: Cate Heil, MD, Addiction Medicine Fellow, Full Circle Health
Add this session to your calendar, here.

Alzheimer's Disease and Related Dementias
Date: Wednesday, April 26, 2023
Time: 1 - 2 p.m. Mountain time
Topic: Brain Health Across the Lifespan: Strategies for Risk Reduction
Featuring: Susan Melchiore, MD, Geriatrician, North Idaho Memory Clinic

- Add this session to your calendar, here.

Behavioral Health in Primary Care
Date: Wednesday, April 5, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Neurodiversity – Nonpharmacological ADHD Diagnosis, Screening, and Treatment
Featuring: Steve Hill, PhD, PLLC, Hill Psychology

- Add this session to your calendar, here.

Date: Wednesday, April 19, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Neurodiversity – Pharmacological ADHD Treatment
Featuring: Stephen Carlson, PharmD, Director of Pharmacy, Cottonwood Creek Behavioral Hospital

- Add this session to your calendar, here.

Counseling Techniques for Substance Use Disorders
Date: Thursday, April 6, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Alcohol Use Disorder & Adolescents
Featuring: Jason Zelus, MSW, LCSW, Executive Director, Zelus Recovery

- Add this session to your calendar, here.

Date: Thursday, April 20, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Alcohol Use Disorder & Women

- Add this session to your calendar, here.

Geriatric Care
Date: Tuesday, April 11, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Management of Diseases: Common Infection
Featuring: Julie Brown, PharmD, Geriatric Clinical Pharmacist, Owner of ClinRX and Connect Pharmaceuticals LTC

- Add this session to your calendar, here.

Date: Tuesday, April 25, 2023
Time: Noon to 1 p.m. Mountain time

Topic: Elder Abuse: What You Need to Know
Featuring: Sheila Weaver, LCSW, ACADC, Lead Navigator and Program Coordinator, Family Caregiver Navigator, Center for the Study of Aging, Boise State University; Therapist, Trivium Life Services

- Add this session to your calendar, here.

Medications for Opioid Use Disorder (MOUD) Consultation Hours*
*CE not offered for this series
Date: Thursday, April 6, 2023
Time: 12:30 – 1:30 p.m. Mountain time
Topic: Audience Q & A
Featuring: Rotating Expert Panel

- Add this session to your calendar, here.

Date: Thursday, April 20, 2023
Time: 12:30 – 1:30 p.m. Mountain time
Topic: Audience Q & A
Featuring: Rotating Expert Panel

- Add this session to your calendar, here.
  - **2023 MOUD Consultation Hours Flyer (PDF)**

Opioids, Pain, and Substance Use Disorders
Date: Thursday, April 13, 2023
Time: 12:15 – 1:15 p.m. Mountain time
Topic: Long-Term Complications of Alcohol Use Disorder
Featuring: Todd Palmer, MD, FMRI Addiction Medicine Fellowship Director, FMRI Geriatric Medicine Fellowship Director, Assistant Professor in Family Medicine, University of Washington

- Add this session to your calendar, here.

Date: Thursday, April 27, 2023
Time: 12:15 – 1:15 p.m. Mountain time
Topic: Low Dose Induction with Buprenorphine
Featuring: Megan McCarren, MD, Internal Medicine Specialist, St. Alphonsus Regional Medical Center and Adjunct Faculty at University of Utah

- Add this session to your calendar, here.

Pediatric Autism
Date: Thursday, April 13, 2023
Time: 12:30 – 2 p.m. Mountain time
Topic: Concern to Action – Screening and Next Steps
Featuring: Tim Leavell, MD, Developmental-Behavioral Pediatric Specialist, Retired

- Add this session to your calendar, here.

Date: Thursday, April 27, 2023
Time: 12:30 – 2 p.m. Mountain time
Topic: Best Practice Primary Care for ASD
Featuring: Thomas Patterson, MD, Pediatrician, Full Circle Health, and Travis Haase, LCPC, Pediatric Behavioral Health Specialist, St. Luke's Children's Center for Autism and Neurodevelopmental Disabilities

- Add this session to your calendar, here.

Viral Hepatitis and Liver Care
Date: Monday, April 10, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Motivational Interviewing in Primary Care
Featuring: Winslow Gerrish, PhD, Full Circle Health

- Add this session to your calendar, here.

Date: Monday, April 24, 2023
Time: Noon to 1 p.m. Mountain time
Topic: HIV/HCV Co-Infection Overview
Featuring: Abby Davids, MD, MPH, AAHIVS, Full Circle Health

- Add this session to your calendar, here.

IDAHO DEPARTMENT OF
HEALTH & WELFARE

March 15, 2023

MEDICAID INFORMATION RELEASE MA23-05

TO: Hospital Administrators

FROM: Juliet Charron, Administrator

SUBJECT: Notice of 2023 Medicaid Rates for Swing-bed Days and Administratively
           Necessary Days (ANDs)

Effective for dates of service on or after **January 1, 2023,** Medicaid will pay the following
rates:

−   Swing-bed Day $299.64

−   Administratively Necessary Day $292.18

If you have questions about this information, please contact the Office of Reimbursement
Policy at the Division of Medicaid at (208) 287-1180 or email
MedicaidReimTeam@dhw.idaho.gov.

Thank you for participating in the Idaho Medicaid Program.

JC/js

*The content of this guidance document is not new law but is an interpretation of existing law
prepared by the Idaho Department of Health and Welfare to provide clarity to the
public regarding existing requirements under the law. This document does not bind
the public, except as authorized by law or as incorporated into a contract. For additional
information or to provide input on this document, contact the Division of Medicaid by
emailing medicaidcommunications@dhw.idaho.gov or by calling 208-334-5747.*

IDAHO DEPARTMENT OF
HEALTH & WELFARE

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FAX: (208) 364-1811

March 17, 2023

<u>MEDICAID INFORMATION RELEASE MA23-06</u>

To: Personal Assistance Agencies

From: Juliet Charron, Administrator

Subject: Personal Care Services (PCS) by Spouses or Parents

Certain flexibilities in federal rules have been granted to state Medicaid Agencies for the duration of the Public Health Emergency (PHE), effectively declared by the Secretary of Health and Human Services in January of 2020. These flexibilities were intended to support access to services that may have otherwise become unavailable.

One of those flexibilities has been the temporary waiving of a federal regulation (*42 C.F.R. §440.167 Personal Care Services*), which prohibits certain individuals from being compensated by a state Medicaid Agency for providing personal care services (PCS) to a Medicaid participant, primarily certain family members. In Idaho, this is specific to spouses of participants and parents of minor children who are participants.

The federal emergency declaration ends May 11, 2023, which directly affects this flexibility for the Idaho Medicaid State Plan PCS benefit. Idaho Medicaid applied for a temporary 1115 authority to allow that State Plan benefit flexibility to continue an additional sixty (60) days through July 11, 2023. This applies to parents as caregivers and some spouses as caregivers for individuals receiving PCS through the state plan if not on the Aged and Disabled waiver.

For spouses providing care under the Aged and Disabled waiver, the state has authority under its Appendix K application to continue the flexibility for attendant care services only (not state plan PCS) through November 11, 2023.

Idaho Medicaid is investigating a number of federal policy options to allow parents and spouses to act as paid caregivers permanently. The Medicaid program will have to ensure that whatever option is used to make this flexibility permanent is compliant with state and federal laws. This may mean some changes to the flexibility as they are different from those during the public health emergency. Idaho Medicaid is looking at all options with their federal partners to find the one best suited for our families.

Thank you for participating in the Idaho Medicaid Program.

JC/db

The content of this guidance document is not new law, but is an interpretation of existing law prepared by the Idaho Department of Health and Welfare to provide clarity to the public regarding existing requirements under the law. This document does not bind the public, except as authorized by law or as incorporated into a contract. For additional information or to provide input on this document, contact the Idaho Division of Medicaid by emailing medicaidcommunications@dhw.idaho.gov or by calling 208-334-5747.

IDAHO DEPARTMENT OF
HEALTH & WELFARE

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March 24, 2023

MEDICAID INFORMATION RELEASE MA23-07

TO: Skilled Nursing Facility Providers

FROM: Juliet Charron, Administrator

SUBJECT: Changes to Idaho Medicaid Nursing Facility Assessment Schedules

Beginning October 1, 2023, the Optional State Assessment (OSA) will be the only assessment type that will include all Minimum Data Set (MDS) data elements required for Resource Utilization Group (RUG) classification. States wishing to maintain a RUGs-based case mix reimbursement system must require Medicaid-certified nursing facilities to complete the OSA with each federally required MDS assessment. As of October 1, 2023, the Department is requiring that a concurrent OSA be completed, with the same Assessment Reference Date (ARD), as each federally required assessment submitted. This will allow for a RUGs-based case mix score to be calculated and the current RUG-based reimbursement methodology to continue beyond October 1, 2023.

If a concurrent OSA (with a matching ARD) is not submitted with a federally required MDS assessment, then a RUG-based case mix score cannot be calculated and as a result the assessment will be excluded from the facility-wide and Medicaid case mix index calculations and associated MDS record processing procedures. This may ultimately result in the resident record being assigned to the delinquent BC1 category as no RUG classification information would be available.

The Department recommends that nursing facilities start reviewing their internal software systems for OSA compatibility prior to October 1, 2023 in preparation for the implementation of the OSA requirement. As a reminder, the purpose of the OSA is to capture RUG-III information to continue reimbursement under a RUG-based resident classification system until the Department has sufficient data and time to model rates using the Patient-Driven Payment Model (PDPM) resident classification system. The modeling will continue through state fiscal year 2023.

The Department is sympathetic to nursing facility concerns regarding the duplication of information in the OSA which may increase the administrative burden of completing this MDS assessment. We encourage providers to work with the IHCA and their MDS software vendors to streamline data input for fields that are duplicated on the federally required assessment and the OSA, in the hopes of reducing the administrative burden for all nursing facility providers.

If you have questions about this information, please contact the Provider Audits and Special Projects team at the Division of Medicaid at (208) 364-1931 or email MedicaidReimTeam@dhw.idaho.gov.

Thank you for participating in the Idaho Medicaid Program.

JC/js

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Provider Training Opportunities

You are invited to attend the following webinars offered by Gainwell Technologies Regional Provider Relations Consultants.

April: PEA Enrollment
A comprehensive overview of how and when to submit Provider Maintenance to reflect changes to an existing Provider record using the upgraded Provider Enrollment Application system. The upgraded Idaho Medicaid Provider Enrollment Application features a new look and feel, simplified processes for maintenance requests and features dynamic screens and electronic signature options, which will result in quicker processing times and less paper transactions. Join us to learn more!

Training is delivered at the times shown in the table below. Each session is open to any region, but space is limited to 25 participants per session, so please choose the session that works best with your schedule. To register for training, or to learn how to register, visit www.idmedicaid.com.

	April **PEA New Enrollment**	**May** **PEA Maintenance**	**June** **Eligibility**
10-11:00 AM MT	4/19/2023	5/17/2023	6/21/2023
	4/20/2023	5/18/2023	6/15/2023
	4/18/2023	5/16/2023	6/20/2023
2-3:00 PM MT	4/12/2023	5/10/2023	6/14/2023
	4/13/2023	5/11/2023	6/08/2023
	4/20/2023	5/18/2023	6/15/2023
	4/18/2023	5/16/2023	6/20/2023

If you would prefer one-on-one training in your office with your Regional Provider Relations Consultant, please feel free to contact them directly. Provider Relations Consultant contact information can be found on page 33 of this newsletter.

DHW Resource and Contact Information

DHW Website	https://healthandwelfare.idaho.gov/
Idaho CareLine	2-1-1 1 (800) 926-2588
Medicaid Program Integrity Unit	P.O. Box 83720 Boise, ID 83720-0036 prvfraud@dhw.idaho.gov Hotline: 1 (208) 334-5754 Fax: 1 (208) 334-2026
Telligen	1 (866) 538-9510 Fax: 1 (866) 539-0365 http://IDMedicaid.Telligen.com
Healthy Connections Regional Health Resource Coordinators	
Region I **Coeur d'Alene**	1 (208) 666-6766 1 (800) 299-6766
Region II **Lewiston**	1 (208) 799-5088 1 (800) 799-5088
Region III **Caldwell**	1 (208)-334-4676 1 (800) 494-4133
Region IV **Boise**	1 (208) 334-4676 1 (800) 354-2574
Region V **Twin Falls**	1 (208) 736-4793 1 (800) 897-4929
Region VI **Pocatello**	1 (208) 235-2927 1 (800) 284-7857
Region VII **Idaho Falls**	1 (208) 528-5786 1 (800) 919-9945
In Spanish **(en Español)**	1 (800) 378-3385

Insurance Verification

HMS PO Box 2894 Boise, ID 83701	1 (800) 873-5875 1 (208) 375-1132 Fax: 1 (208) 375-1134

Gainwell Technologies Provider and Participant Services Contact Information

Provider Services

MACS **(Medicaid Automated Customer Service)**	1 (866) 686-4272 1 (208) 373-1424
Provider Service Representatives **Monday through Friday, 7 a.m. to 7 p.m. MT**	1 (866) 686-4272 1 (208) 373-1424
E-mail	idproviderservices@gainwelltechnologies.com idproviderenrollment@gainwelltechnologies.com
Mail	P.O. Box 70082 Boise, ID 83707

Participant Services

MACS **(Medicaid Automated Customer Service)**	1 (866) 686-4752 1 (208) 373-1432
Participant Service Representatives **Monday through Friday, 7 a.m. to 7 p.m. MT**	1 (866) 686-4752 1 (208) 373-1424
E-mail	idparticipantservices@gainwelltechnologies.com
Mail – Participant Correspondence	P.O. Box 70081 Boise, ID 83707

Medicaid Claims

Utilization Management/Case Management	P.O. Box 70084 Boise, ID 83707
CMS 1500 Professional	P.O. Box 70084 Boise, ID 83707
UB-04 Institutional	P.O. Box 70084 Boise, ID 83707
UB-04 Institutional **Crossover/CMS 1500/Third-Party Recovery (TPR)**	P.O. Box 70084 Boise, ID 83707
Financial/ADA 2006 Dental	P.O. Box 70087 Boise, ID 83707

Gainwell Technologies Provider Services Fax Numbers

Provider Enrollment	1 (877) 517-2041
Provider and Participant Services	1 (877) 661-0974

Provider Relations Consultant (PRC) Information
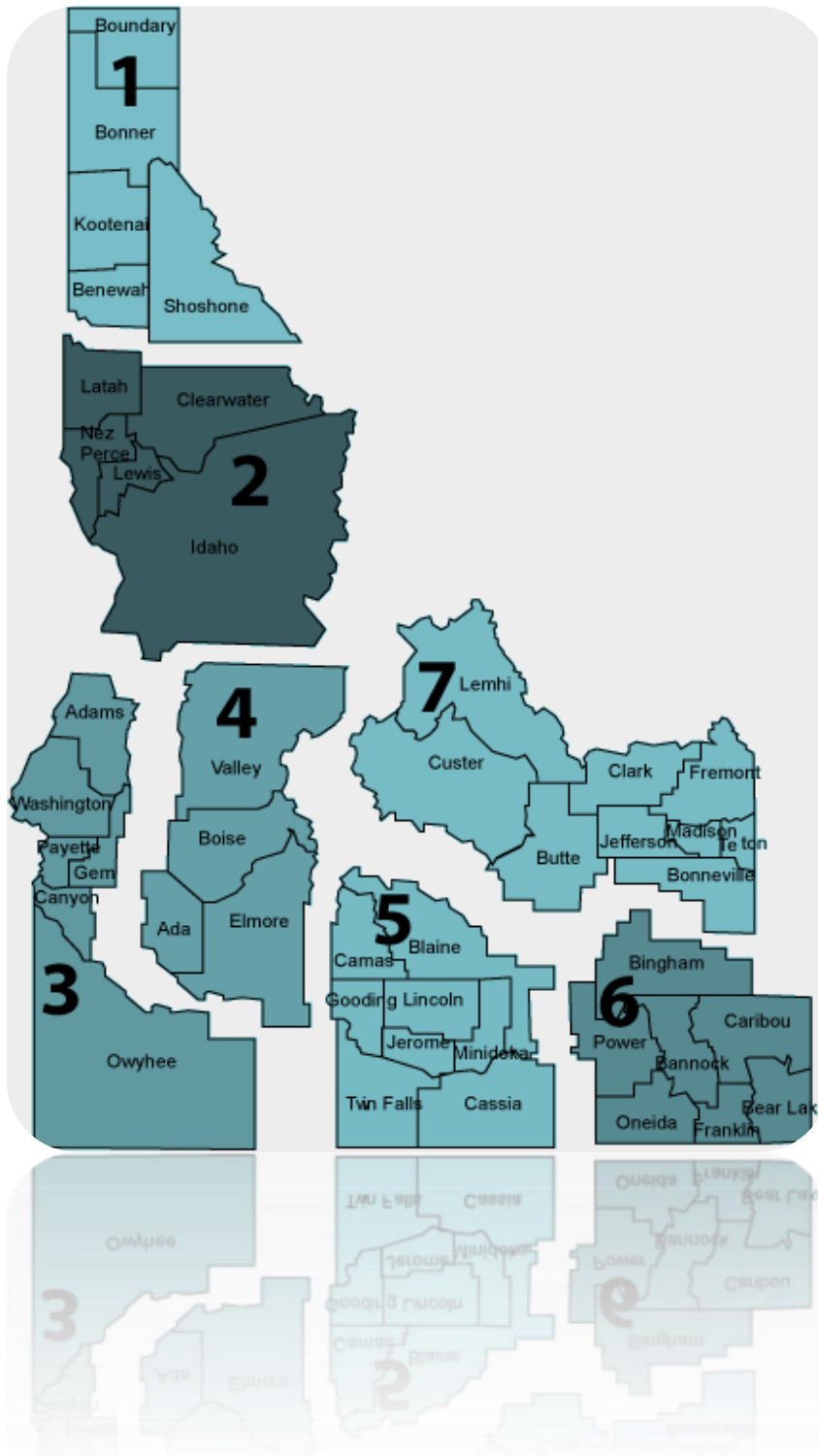
Region 1 and the state of Washington
1 (208) 202-5735
Region.1@gainwelltechnologies.com

Region 2 and the state of Montana
1 (208) 202-5736
Region.2@gainwelltechnologies.com

Region 3 and the state of Oregon
1 (208) 202-5816
Region.3@gainwelltechnologies.com

Region 4
1 (208) 202-5843
Region.4@gainwelltechnologies.com

Region 5 and the state of Nevada
1 (208) 202-5963
Region.5@gainwelltechnologies.com

Region 6 and the state of Utah
1 (208) 593-7759
Region.6@gainwelltechnologies.com

Region 7 and the state of Wyoming
1 (208) 609-5062
Region.7@gainwelltechnologies.com

Region 9 all other states (not bordering Idaho)
1 (208) 609-5115
Region.9@gainwelltechnologies.com

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IDAHO DEPARTMENT OF
HEALTH & WELFARE

Digital Edition

MedicAide is available online by the fifth of each month at www.idmedicaid.com. There may be occasional exceptions to the availability date as a result of special circumstances. The electronic edition reduces costs and provides links to important forms and websites.

MedicAide **is the monthly informational newsletter for Idaho Medicaid providers. Editor: Shannon Tolman**

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