



MedicAide

An Informational Newsletter for Idaho Medicaid Providers

From the Idaho Department of Health and Welfare,
Division of Medicaid

July 2023

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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.

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 recently passed a bill that ends this continued coverage requirement as of April 1, 2023.

This does not mean a participant's Medicaid coverage automatically ended on April 1, 2023, even if they are or were receiving Medicaid as a result of this special protection.

DHW is sending 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 Medicaid participants receive notices regarding their benefits and re-evaluations, please encourage them to report any changes to their contact information, including phone number and mailing address. If their contact information has changed, or they want to confirm their current information, they can contact DHW using the information below. They can also report changes by visiting idalink.idaho.gov.

Providers are reminded that they **must** verify and document participant eligibility and Healthy Connections enrollment status on the date of service and prior to rendering services, as detailed in the Idaho Medicaid Provider Handbook, General Information and Requirements for Providers, section titled 6.2 Verifying Participant Eligibility.

Phone

[877-456-1233](tel:877-456-1233)

Email

MyBenefits@dhw.idaho.gov

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

Locum Tenens and Reciprocal Billing Arrangements

The Medicaid Program Integrity Unit has found instances of physician and non-physician practitioners inappropriately using locum tenens arrangements when a provider is newly employed with a provider group to avoid billing delays or denials related to provider enrollment effective dates. Providers must be enrolled and affiliated with the billing group before the services they provide can be billed to Medicaid.

Section 9.6 of the November 18, 2022, Idaho Medicaid Provider Handbook – Physician and Non-Physician Practitioner addresses when billing is allowed for Locum Tenens and Reciprocal Billing Arrangements. It states:

9.6. Locum Tenens and Reciprocal Billing Arrangements

Idaho Medicaid allows for physicians to bill for locum tenens and reciprocal billing arrangements. Arrangements may be made with one or more substitute physicians, and do not have to be in writing. The absent physician continues to bill and receive payment for the substitute physician's services as though they were performed by the absent physician.

Locum tenens and reciprocal billing arrangements are allowed when:

- The regular physician is unavailable to provide the services.
- The Medicaid participant has arranged or seeks to receive services from their regular physician.
- The regular physician identifies the services provided by a substitute physician by appending the appropriate modifier to the procedure code on claims.
- The regular physician maintains a record of each service provided by the substitute physician and their National Provider Identifier (NPI). Records must be available to DHW upon request.
- Services are not reported separately as substitute services for an operation and/or post-operative care covered by a global fee.

Locum tenens arrangements occur when the substitute physician covers the regular physician during absences for illness, pregnancy, vacation, or continuing education. The regular physician pays the substitute physician for their services on a per diem, or similar fee-for-time basis. Locum tenens arrangements cannot exceed a period of 90 continuous days. The regular physician must use the Q6 modifier on claims for services provided by the substitute physician in a locum tenens arrangement.

Reciprocal billing arrangements occur when the substitute physician covers the regular physician during occasional absences such as on-call coverage. The absent physician agrees to cover the substitute physician at a later time in exchange for their services. Arrangements are not to exceed a period of 14 continuous days. The regular physician must use the Q5 modifier on claims for services provided by the substitute physician in a reciprocal billing arrangement.

Physician and non-physician practitioners must be licensed and enrolled as an Idaho Medicaid provider prior to providing services for Idaho Medicaid participants. In extremely unique circumstances, an alternate effective date form with supporting documentation may be submitted for consideration. Services billed with the incorrect rendering practitioner may be subject to recoupment and/or civil monetary penalties.

July 2023 Changes to the APC Prep – Fee Schedule Paid Procedure Codes List

The [APC Prep – Fee Schedule Paid Procedure Codes](#) list will be updated July 2023 in association with updates to the [Idaho Medicaid Fee Schedule](#). Regular quarterly updates will also occur to align with the published fee schedules. Acute care hospitals will continue to be required to bill a CPT or HCPCS code on each outpatient hospital claim line where procedure codes are required under national billing guidelines. This requirement does not apply to in-state Critical Access Hospitals, Institutions for Mental Diseases (IMDs) or State-Owned Hospitals.

Collecting Participant Co-Pays

During the Public Health Emergency (PHE) participants were exempt from all copayments. As the Public Health Emergency ended on May 11th participants may now be subject to a copayment of \$3.65 for certain visits. Copayment information is observed or heard when verifying eligibility online or through the Medicaid Automated Customer Service Line (MACS).

For more information on copayments, refer to the Idaho Medicaid Provider Handbook, [General Information and Requirements for Providers](#), section titled 2.1 Co-payments.

When checking eligibility through the Trading Partner Account the co-pay will be reflected under the Copay tab. For more information on how to verify eligibility and copayment information refer to the [Trading Partner Account \(TPA\) User Guide](#), section titled 3.5 Eligibility Verification.

Attention: CFH Providers - Rate Changes for Adult Developmental Disability (DD) Waiver Services

Certified Family Home (CFH) providers who provide care to participants on the Adult Developmental Disability (DD) Waiver for service codes S5100, T1019 and S5140 are eligible for a rate increase for claim dates of services on or after 4/1/2023. This was approved for the State Fiscal Year 2023 in the amended budget request.

Providers should expect their claims to be adjusted by Gainwell Technologies (GWT), Blue Cross of Idaho or Molina Healthcare of Idaho to reflect the rate increase sometime in June. **However, if the billed amount on the claim was equal to the previous rate, the provider must adjust the claim and modify the Charge amount.** The claims processing system cannot pay more than the amount billed.

Refer to the instructions found [here](#), page 2, which will explain how to locate and adjust the claim. As a reminder, providers should bill their usual and custom fee rather than the approved rate for services. If you find that you need assistance after referring to the instructions, please contact your Provider Relations Consultant – their contact information can be found [here](#).

Healthy Connections Open Enrollment Begins July 1

The Healthy Connections (HC) program provides for a fixed enrollment process. Fixed Enrollment encourages a long-term provider-patient relationship, resulting in better care coordination and supporting the value-based model of care. As part of Fixed Enrollment, there is a designated time during the year when participants are allowed to request a change to their PCP for any reason. This is commonly known as the “annual enrollment period”. The annual enrollment period is July 1 – August 31st each year.

Important reminders:

- Enrollment changes to a Primary Care Provider will be effective on the date the enrollment is approved, **not** the date the request is received.
- Enrollment requests must be submitted by the participant or an authorized representative.
- HC clinics may submit HC enrollment forms on behalf of a participant, **only if** the form contains an original signature from the participant or their authorized representative.
- HC providers are required to check eligibility prior to services being performed to determine the correct Primary Care Provider. If you are not the Primary Care Provider in our claims processing system, a referral will be required for the service to be considered a Medicaid covered service.

For more information on the Healthy Connections program, please refer to the Idaho Medicaid Provider Handbook at www.idmedicaid.com.

National Diabetes Prevention Program

Idaho Medicaid covers preventive services as mandated by the Affordable Care Act (ACA) and recommended by the US Preventive Services Task Force (USPSTF) with an "A" or "B" recommendation, or when listed in the American Academy of Pediatrics Bright Futures periodicity schedule. The [USPSTF](#) has made a "B" recommendation for referring patients with prediabetes to preventive interventions.

Effective July 1, 2023, Idaho Medicaid covers the National Diabetes Prevention Program (NDPP) for eligible participants, once per 5 years. Participants over the age of 18 and a BMI>25 (or 23 for Asian Americans) with a diagnosis of prediabetes are eligible for the service. Services can also be accessed through the Preventive Health Assistance program with a prior authorization if the participant has exhausted their regular benefit. A prior authorization is necessary for a participant who started the program but did not finish and wishes to try again. Services are eligible for telehealth.

Idaho Medicaid follows Medicare guidelines for billing NDDP services with the following exceptions. NDDP services are provided under employment or contract of a physician, clinic, hospital, public health district and should be billed by those providers. ICD-10-CM R73.03 (Prediabetes) must be listed on the claim for reimbursement. Idaho Medicaid does not allow for the billing of G9882-G9885, G9890 or G9891.

Covered Codes	
Codes	Description
G9873	First Medicare Diabetes Prevention Program (MDPP) core session was attended by an MDPP beneficiary under the MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions
G9874	Four total Medicare Diabetes Prevention Program (MDPP) core sessions were attended by an MDPP beneficiary under the MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions.
G9875	Nine total Medicare Diabetes Prevention Program (MDPP) core sessions were attended by an MDPP beneficiary under the MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions
G9876	Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo) 7-9 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary did not achieve at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 7-9.

Covered Codes	
Codes	Description
G9877	<p>Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo) 10-12 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions.</p> <p>The beneficiary did not achieve at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 10-12.</p>
G9878	<p>Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo) 7-9 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 7-9.</p>
G9879	<p>Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo) 10-12 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 10-12.</p>
G9880	<p>The MDPP beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight in months 1-12 of the MDPP services period under the MDPP Expanded Model (EM). This is a one-time payment available when a beneficiary first achieves at least 5% weight loss from baseline as measured by an in-person weight measurement at a core session or core maintenance session.</p>
G9881	<p>The MDPP beneficiary achieved at least 9% weight loss (WL) from his/her baseline weight in months 1-24 under the MDPP Expanded Model (EM). This is a one-time payment available when a beneficiary first achieves at least 9% weight loss from baseline as measured by an in-person weight measurement at a core session, core maintenance session, or ongoing maintenance session.</p>

Questions and comments about this article may be submitted to the 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
C9150	Xenon xe-129 hyperpolarized gas, diagnostic, per study dose	7/1/2023	N/A
C9151	Injection, pegcetacoplan, 1 mg	7/1/2023	Yes, Pharmacy
C9784	Gastric restrictive procedure, endoscopic sleeve gastropasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	7/1/2023	Yes, Telligen
C9785	Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	7/1/2023	Yes, Telligen
C9786	Echocardiography image post processing for computer aided detection of heart failure with preserved ejection fraction, including interpretation and report	7/1/2023	N/A
C9787	Gastric electrophysiology mapping with simultaneous patient symptom profiling	7/1/2023	N/A
J0137	Injection, acetaminophen (hikma) not therapeutically equivalent to j0131, 10 mg	7/1/2023	N/A
J0206	Injection, allopurinol sodium, 1 mg	7/1/2023	N/A
J0216	Injection, alfentanil hydrochloride, 500 micrograms	7/1/2023	N/A
J0457	Injection, aztreonam, 100 mg	7/1/2023	N/A
J0665	Injection, bupivacaine, not otherwise specified, 0.5 mg	7/1/2023	N/A
J0736	Injection, clindamycin phosphate, 300 mg	7/1/2023	N/A
J0737	Injection, clindamycin phosphate (baxter), not therapeutically equivalent to j0736, 300 mg	7/1/2023	N/A
J1440	Fecal microbiota, live - jslm, 1 ml	7/1/2023	N/A
J1576	Injection, immune globulin (panzyga), intravenous, non-lyophilized (e.g., liquid), 500 mg	7/1/2023	Yes, Pharmacy
J1805	Injection, esmolol hydrochloride, 10 mg	7/1/2023	N/A
J1806	Injection, esmolol hydrochloride (wg critical care) not therapeutically equivalent to j1805, 10 mg	7/1/2023	N/A
J1811	Insulin (fiasp) for administration through dme (i.e., insulin pump) per 50 units	7/1/2023	N/A
J1812	Insulin (fiasp), per 5 units	7/1/2023	N/A
J1813	Insulin (lyumjev) for administration through dme (i.e., insulin pump) per 50 units	7/1/2023	N/A
J1814	Insulin (lyumjev), per 5 units	7/1/2023	N/A

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
J1836	Injection, metronidazole, 10 mg	7/1/2023	N/A
J1920	Injection, labetalol hydrochloride, 5 mg	7/1/2023	N/A
J1921	Injection, labetalol hydrochloride (hikma) not therapeutically equivalent to j1820, 5 mg	7/1/2023	N/A
J1941	Injection, furosemide (furoscix), 20 mg	7/1/2023	N/A
J1961	Injection, lenacapavir, 1 mg	7/1/2023	Yes, Pharmacy
J2249	Injection, remimazolam, 1 mg	7/1/2023	N/A
J2305	Injection, nitroglycerin, 5 mg	7/1/2023	N/A
J2329	Injection, ublituximab-xiiy, 1mg	7/1/2023	Yes, Pharmacy
J2371	Injection, phenylephrine hydrochloride, 20 micrograms	7/1/2023	N/A
J2372	Injection, phenylephrine hydrochloride (biorphen), 20 micrograms	7/1/2023	N/A
J2427	Injection, paliperidone palmitate extended release (invega hafyera, or invega trinza), 1 mg	7/1/2023	Yes, Pharmacy
J2561	Injection, phenobarbital sodium (sezaby), 1 mg	7/1/2023	N/A
J2598	Injection, vasopressin, 1 unit	7/1/2023	N/A
J2599	Injection, vasopressin (american regent) not therapeutically equivalent to j2598, 1 unit	7/1/2023	N/A
J2806	Injection, sincalide (maia) not therapeutically equivalent to j2805, 5 micrograms	7/1/2023	N/A
J7213	Injection, coagulation factor ix (recombinant), ixinity, 1 i.u.	7/1/2023	N/A
J9029	Injection, nadofaragene firadenovec-vncg, per therapeutic dose	7/1/2023	N/A
J9056	Injection, bendamustine hydrochloride (vivimusta), 1 mg	7/1/2023	N/A
J9058	Injection, bendamustine hydrochloride (apotex), 1 mg	7/1/2023	N/A
J9059	Injection, bendamustine hydrochloride (baxter), 1 mg	7/1/2023	N/A
J9063	Injection, mirvetuximab soravtansine-gynx, 1 mg	7/1/2023	N/A
J9259	Injection, paclitaxel protein-bound particles (american regent) not therapeutically equivalent to j9264, 1 mg	7/1/2023	N/A
J9321	Injection, pemetrexed (sandoz) not therapeutically equivalent to j9305, 10 mg	7/1/2023	N/A
J9322	Injection, pemetrexed (bluepoint) not therapeutically equivalent to j9305, 10 mg	7/1/2023	N/A
J9323	Injection, pemetrexed (hospira) not therapeutically equivalent to j9305, 10 mg	7/1/2023	N/A
J9347	Injection, tremelimumab-actl, 1 mg	7/1/2023	N/A
J9350	Injection, mosunetuzumab-axgb, 1 mg	7/1/2023	Yes, Pharmacy
J9380	Injection, teclistamab-cqyv, 0.5 mg	7/1/2023	N/A
J9381	Injection, teplizumab-mzwv, 5 mcg	7/1/2023	Yes, Pharmacy

Covered Codes			
Codes	Description	Effective Date	Prior Authorization
Q5131	Injection, adalimumab-aacf (idacio), biosimilar, 20 mg	7/1/2023	Yes, Pharmacy

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

The Idaho Perinatal Quality Collaborative

What do PQC's do?

- Statewide quality improvement projects
- Knowledge and resource sharing across participants
- Advocacy
- Reporting and analytics

Mission

The Idaho Perinatal Quality Collaborative works to improve the quality of maternal health outcomes for all Idahoans.

We promote evidence-based best practices in perinatal and neonatal care, work to reduce disparities, and improve the overall health and well-being of families.

Together, we can achieve our goal of providing equitable, compassionate, and effective care to all who need it.

Vision

The ID PQC envisions a future where all Idahoans have access to and receive safe, equitable, and high-quality perinatal and neonatal care.

Values

Access: We believe that every person should have access to high-quality perinatal and neonatal care, regardless of their background, circumstances, or location.

Equity: We are committed to promoting health equity by reducing disparities in access to care and health outcomes.

Patient-Centered: We recognize the importance of elevating patient voice in decision-making to ensure care, policy, and advocacy meet community needs.

Collaboration: We recognize that improving perinatal and neonatal care requires collaboration and coordination among stakeholders. We are committed to working together with partners across Idaho to advance our shared goals.

Through these values, we aim to create a community of sharing, learning, and improvement that benefits all Idahoans.

Get involved! Attend a Regional Stakeholder Engagement Session!

Health District 1 & 2

July 11th, 10-11am MT



Health District 3 & 4

August 1st, 3-4pm MT



Health District 5, 6 & 7

August 9th, 3-4pm MT



Questions? Email Ami Hanna at ahanna@comagine.org





What's ECHOing at ECHO Idaho?

Scheduled weekly over lunchbreaks, ECHO Idaho provides virtual, 1-hour sessions with a panel of subject matter experts to deliver a brief, high-yield presentation on a topic of interest, specific to Idaho healthcare practitioners. Each session includes a real-life case presentation from an ECHO Idaho participant.

ECHO Idaho is always free, and participants can earn CE/CME for attending.

Below please find the series and topics we have on deck for June 2023. If you know of anyone in your network interested in attending one of our sessions, please have them register on our website.

Questions? Please don't hesitate to reach out. echoidaho@uidaho.edu

July 2023

Free, Virtual, 1-hour Continuing Education Sessions

****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, Jul. 12, 2023

Time: Noon - 1 p.m. Mountain time

Topic: Cannabis Use Among Adolescents

Featuring: Michelle Cullinan, PMHNP, Psychiatric NP, Sage Health Care, Boise

Add this session to your calendar [here](#).

Date: Wednesday, Jul. 26, 2023

Time: Noon - 1 p.m. Mountain time

Topic: Peer Services for Adolescents with SUD

Featuring: Kaitlin Fledderjohann, CPRC, Brick House Recovery

Add this session to your calendar [here](#).

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Autism

Date: Thursday, Jul. 13, 2023

Time: 12:30 – 2 p.m. Mountain time

Topic: Deep Dive into the Katie Beckett Program

Featuring: Julie Wittman, MEd, PhD, BCBA Board Certified Behavior Analyst, Parent Advocate

Add this session to your calendar [here](#).

Date: Thursday, Jul. 27, 2023

Time: 12:30 – 2 p.m. Mountain time

Topic: Feeding Issues

Featuring: Lindsey Ethridge, MOT, OTR/L, CLC, St. Luke's Children's Rehabilitation

Add this session to your calendar [here](#).

Behavioral Health in Primary Care

Date: Wednesday, Jul. 19, 2023

Time: Noon to 1 p.m. Mountain time

Topic: Nutritional Components of Behavioral Health

Featuring: Annie Roe, PhD, Assistant Professor & Extension Specialist at University of Idaho, and Director of Eat Smart Idaho

Add this session to your calendar [here](#).

Counseling Techniques for Substance Use Disorders

Date: Thursday, Jul. 20, 2023

Time: Noon to 1 p.m. Mountain time

Topic: The Intersection of Treatment Court and Healthcare

Featuring: Radha Sadacharan, MD, MPH, Centurion and Israel Enriquez, Fifth Judicial District, Treatment Court Manager

Add this session to your calendar [here](#).

Infectious Diseases in the News

Date: Tuesday, Jul. 18, 2023

Time: Noon to 1 p.m. Mountain time

Topic: Community Acquired Pneumonia

Featuring: Liz Schackmann, MD, Boise VA Medical Center, University of Washington School of Medicine

Add this session to your calendar [here](#).

Medications for Opioid Use Disorder (MOUD) Consultation Hours*

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*CE not offered for this series

Date: Thursday, Jul. 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, Jul. 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, Jul. 13, 2023
Time: 12:15 – 1:15 p.m. Mountain time
Topic: MAT in Fentanyl Use - *NP Pharmacy credit available*

Featuring: Andrew Kloberdanz, DO, Addiction Medicine Fellow, Boise VA

Add this session to your calendar [here](#).

Date: Thursday, Jul. 27, 2023
Time: 12:15 – 1:15 p.m. Mountain time
Topic: Prescription Drug Monitoring Program

Featuring: Wendy Muir, Program Information Coordinator, Idaho Division of Occupational and Professional Licenses

Add this session to your calendar [here](#).

Viral Hepatitis and Liver Care

Date: Monday, Jul. 10, 2023
Time: Noon to 1 p.m. Mountain time
Topic: Liver Health and Diet
Featuring: Whitney Graham, RD - Dietitian @ Boise VA Medical Center

Add this session to your calendar [here](#).

Date: Monday, Jul. 24, 2023
Time: Noon to 1 p.m. Mountain time

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Topic: How to Manage Portal Hypertension in Cirrhosis
Featuring: Elsbeth Jensen-Otsu, MD, Boise VA Medical Center
Add this session to your calendar [here](#).

Stay in Touch with ECHO

- Find us on [Facebook](#) and [LinkedIn](#).
- Sign up for [text reminders](#).
- Watch past sessions from our [YouTube](#) channel.

ECHO Idaho is Jointly Accredited. Unless noted otherwise, ECHO Idaho series qualify for interprofessional continuing education, meaning that all individuals on a healthcare team can claim continuing education credits through live participation with ECHO Idaho. Check out our [website](#) to learn more.

Project ECHO® collects registration, participation, questions/answers, chat comments, and poll responses for some teleECHO® programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives.

ECHO Idaho is led by the University of Idaho and the WWAMI Medical Education Program.

Connect with us!

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BRAD LITTLE – Governor
DAVE JEPPESEN – Director

IDAHO DEPARTMENT OF HEALTH & WELFARE

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June 21, 2023

MEDICAID INFORMATION RELEASE MA23-12

To: Home Health Providers

From: Juliet Charron, Administrator 

Subject: Home Health Medicaid Caps

The table below summarizes Medicaid cap limits for all home health agency cost settlements effective for dates of service from July 01, 2023, through June 30, 2024. Please see [IDAPA 16.03.09.720 Home Health Services: Definitions](#) and [16.03.09.726 Home Health Services: Provider Reimbursement](#) for more information.

Service Type	Revenue Code	Medicaid Cap Limits
Skilled Nursing	551	\$222.68
Physical Therapy	421	\$196.77
Occupational Therapy	431	\$207.65
Speech Therapy, Audiology Services	441, 470, 471, 472	\$203.10
Home Health Aide	571	\$111.29

If you have any questions regarding how these rates were developed, please contact the Office of Reimbursement at the Idaho Division of Medicaid at (208) 287-1180 or its email MedicaidReimTeam@dhw.idaho.gov.

Thank you for your continued participation in the Idaho Medicaid program.

JC/ar

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

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to provide input on this document, contact the Division of Medicaid by emailing medicaidcommunications@dhw.idaho.gov or by calling 208-334-5747.

Provider Training Opportunities

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

July: Coordination of Benefits

The Coordination of Benefits training will review COB pricing calculations, entering COB in your Trading Partner Account, and attaching EOBs.

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.

	July	August	September
	Coordination of Benefits	Claims Adjustments	RALF
10-11:00 AM MT	7/19/2023	8/16/2023	9/20/2023
	7/20/2023	8/17/2023	9/21/2023
	7/18/2023	8/15/2023	9/19/2023
2-3:00 PM MT	7/12/2023	8/09/2023	9/13/2023
	7/13/2023	8/10/2023	9/14/2023
	7/20/2023	8/17/2023	9/21/2023
	7/18/2023	8/15/2023	9/19/2023

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 [20](#) 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
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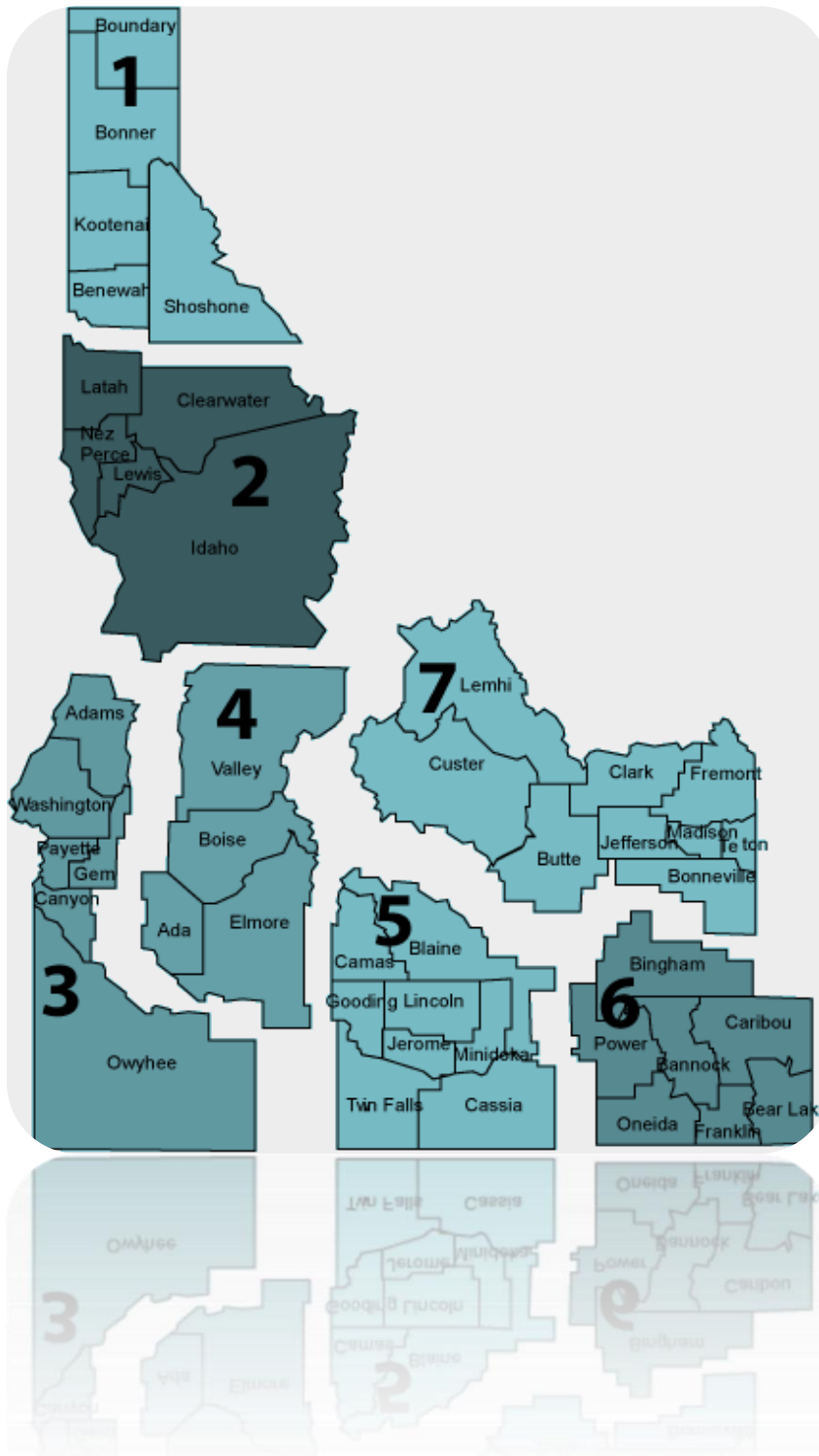
Gainwell Technologies Provider and Participant Services Contact Information

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

Gainwell Technologies
PO Box 70082
Boise, Idaho 83707



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**

If you have any comments or suggestions,
please send them to:

Shannon Tolman,
MedicaidCommunications@dhw.idaho.gov

Medicaid – Communications Team

P.O. Box 83720

Boise, ID 83720-0009

Fax: 1 (208) 364-1811