



MedicAide

An Informational Newsletter for Idaho Medicaid Providers

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

October 2024

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Changes to Hospital Perspective Payment System: DRG

Acute Care Hospitals will be subject to updates to the 3M™ All Patient Refined DRG (3M APR DRG) Software reimbursement methodology effective October 1, 2024. It's highly encouraged to refer to the published information that will outline the Idaho specific parameters in the Hospital, Idaho Medicaid Provider Handbook, and the Hospital Prospective Payment System: DRG library, found in the Resources [here](#) where a FAQ (Frequently Asked Questions), DRG calculator, and training information is made available. This update will result in changes to base rates, and policy adjusters. This change will not affect Critical Access hospitals or Idaho State-owned hospitals.

October 2024 Changes to the APC Prep – Fee Schedule Paid Procedure Codes List

The [APC Prep – Fee Schedule Paid Procedure Codes](#) list will be updated October 2024 in association with updates realized on the [Idaho Medicaid Fee Schedule](#). Ongoing updates will occur quarterly to align with the updated published fee schedules.

Left, Right and Bilateral Modifiers

Per the [General Billing Instructions](#) handbook and the National Correct Coding Initiative (NCCI) providers are required to bill with correct coding. Claims must use left (LT), right (RT) and bilateral (50) modifiers where appropriate. Idaho Medicaid has identified a number of claims that are not coded correctly. Due to the sheer volume of claims requiring these modifiers (over 10,000), Idaho Medicaid will not be reprocessing claims in mass. This is to prevent operational disruptions to providers who did code correctly. Providers must correct and reprocess their own claims that were submitted without the required modifiers. These claims may be subject to audits, recoupment and penalties if not corrected by the provider.

Questions about this article or suggestions about the provider handbook may be submitted to the Medicaid Policy Team at MCPT@dhw.idaho.gov.

Claims Processing Reminder/Clarification – Participants with Other Insurance

In an effort to reduce the administrative burden of attaching a physical copy of the primary payer's Explanation of Benefits (EOB) to a claim when the other payer made payment, we allow providers to enter the Coordination of Benefits (COB) information on the claim.

However, in order for Gainwell to see the results of the primary payers processing, the COB information **must** be entered at **line level**. If the COB information is not entered at the line level, or the other payer did not make payment, and an EOB is not attached the claim will likely be denied.

CPT® and HCPCS Coverage Update

The following codes are being added for coverage. These codes pertain to benefits already approved under the Idaho Medicaid State Plan and Waivers. 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
90624	Meningococcal pentavalent vaccine, men b-4c recombinant proteins and outer membrane vesicle and conjugated men a, c, w, y-diphtheria toxoid carrier, for intramuscular use	10/1/2024	No
A4271	Integrated lancing and blood sample testing cartridges for home blood glucose monitor, per 50 tests	10/1/2024	Yes
A7021	Supplies and accessories for lung expansion airway clearance, continuous high frequency oscillation, and nebulization device (e.g., handset, nebulizer kit, biofilter)	10/1/2024	Yes, Telligen
A9610	Xenon xe-129 hyperpolarized gas, diagnostic, per study dose	10/1/2024	No
C8000	Support device, extravascular, for arteriovenous fistula (implantable)	10/1/2024	No
C9169	Injection, nogapendekin alfa inbakicept-pmln, for intravesical use, 1 microgram	10/1/2024	No
C9170	Injection, tarlatamab-dlle, 1 mg	10/1/2024	No
C9171	Injection, pegulicianine, 1 mg	10/1/2024	No
C9172	Injection, fidanacogene elaparvovec-dzkt, per therapeutic dose	10/1/2024	Yes, Pharmacy
E0469	Lung expansion airway clearance, continuous high frequency oscillation, and nebulization device	10/1/2024	Yes, Telligen
E0721	Transcutaneous electrical nerve stimulatory, stimulates nerves in the auricular region	10/1/2024	Yes, Telligen
J0138	Injection, acetaminophen 10 mg and ibuprofen 3 mg	10/1/2024	No
J1171	Injection, hydromorphone, 0.1 mg	10/1/2024	No
J1749	Injection, iloprost, 0.1 mcg	10/1/2024	No
J2002	Injection, lidocaine hcl in 5% dextrose, 1 mg	10/1/2024	No
J2003	Injection, lidocaine hydrochloride, 1 mg	10/1/2024	No
J2004	Injection, lidocaine hcl with epinephrine, 1 mg	10/1/2024	No
J2251	Injection, midazolam in 0.9% sodium chloride, intravenous, not therapeutically equivalent to j2250, 1 mg	10/1/2024	No

J2252	Injection, midazolam in 0.8% sodium chloride, intravenous, not therapeutically equivalent to j2250, 1 mg	10/1/2024	No
J2253	Injection, midazolam (seizalam), 1 mg	10/1/2024	No
J2601	Injection, vasopressin (baxter), 1 unit	10/1/2024	No
J8522	Capecitabine, oral, 50 mg	10/1/2024	No
J8541	Dexamethasone (hemady), oral, 0.25 mg	10/1/2024	No
J9172	Injection, docetaxel (docivyx), 1 mg	10/1/2024	No
J9329	Injection, tislelizumab-jsgr, 1mg	10/1/2024	No
L1006	Scoliosis orthosis, sagittal-coronal control provided by a rigid lateral frame, extends from axilla to trochanter, includes all accessory pads, straps and interface, prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a specific patient by an individual with expertise	10/1/2024	No
L1652	Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, includes fitting and adjustment, prefabricated item that has been trimmed, bent, molded, assembled, or otherwise customized to fit a specific patient by an individual with expertise	10/1/2024	No
L1653	Hip orthosis, bilateral thigh cuffs with adjustable abductor spreader bar, adult size, prefabricated, off the shelf	10/1/2024	No
L1821	Knee orthosis, elastic with condylar pads and joints, with or without patellar control, prefabricated, off the shelf	10/1/2024	No
Q5135	Injection, tocilizumab-aazg (tyenne), biosimilar, 1 mg	10/1/2024	No
Q5136	Injection, denosumab-bbdz (jubbonti/wyost), biosimilar, 1 mg	10/1/2024	No

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



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September 11, 2024

MEDICAID INFORMATION RELEASE MA24-21

To: All Medicaid Providers

From: Juliet Charron, Deputy Director 

Subject: Outpatient Behavioral Health Claims

Idaho Medicaid has contracted [Magellan Healthcare, Inc. \(Magellan\)](#) to be the managed care organization administering the Idaho Behavioral Health Plan (IBHP). Magellan covers inpatient, residential, and outpatient behavioral health services.

Idaho Medicaid has assessed billing concerns identified by providers, affecting certain behavioral health outpatient claims. In response the state has modified the claims processing guidance given to Gainwell and Magellan.

To facilitate timely payment for all providers, for claim dates of service July 1, 2024, and forward the following changes have been made:

- **Gainwell will be the primary payor for outpatient Emergency Room (ER) claims and primary care encounter claims for Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs), regardless of identified diagnosis code.**
- Claims submitted on or after September 4, 2024, for the above providers will be paid through Gainwell. Claims previously denied for the above providers will be reprocessed by Gainwell starting the week of September 9, 2024.
- Claims denied for the following providers, due to a behavioral health diagnosis, will be reprocessed by Gainwell starting the week of September 9, 2024. These providers will see claims submitted after September 4, 2024, paid through Gainwell as well.
 - Intermediate Care Facility (ICF), Home Health, Long Term Care, and Speech / Physical / Occupational Therapy.

What is not changing?

The following will continue to be billed through Magellan of Idaho and will not be paid through the Gainwell system.

- Inpatient behavioral health claims.
- Professional claims for provider specialties as defined in information release [MA24-10 Behavioral Health Services](#) other than FQHC/RHC providers billing primary care encounters with an identified behavioral health diagnosis code.

What if I have claims paid, pending, or denied by Magellan?

- The state is working with Magellan to determine next steps on these claims and will provide an update via Informational Release by September 16, 2024.

Idaho Medicaid appreciates the dedication of providers in working to ensure claims are coded and submitted correctly.

Thank you for participating in the Idaho Medicaid Program.

JC/so

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September 24, 2024

MEDICAID INFORMATION RELEASE MA24-22

To: All Medicaid Providers

From: Juliet Charron, Deputy Director 

Subject: COVID-19 HCBS Flexibilities Under the Public Health Emergency

The Consolidated Appropriations Act of 2023 set the end of what is known as COVID-19 Medicaid Protection as April 1, 2023. Please see [Medicaid Information Release MA23-09 COVID-19 Medicaid Flexibilities Under The Public Health Emergency](#).

Following passage in 2021 of the [American Rescue Plan \(ARP\) Act, Section 9817](#), the Division of Medicaid submitted to the Centers for Medicare and Medicaid Services (CMS) an [ARP Home and Community-Based Services \(HCBS\) Spending Plan](#). The submitted plan conformed to the requirements outlined in [2021 House Bill 382 \(H382\)](#), which directed Medicaid ARP funding be used solely for temporary pay increases or bonuses for direct care workers.

Federal approval came with a number of conditions, one of which was to preserve the amount, duration, and scope of HCBS in effect as of April 1, 2021. This condition was in effect until state funds equivalent to the amount of federal funds attributable to the increased Federal Medical Assistance Percentage (FMAP) were spent. During this time, Idaho Medicaid HCBS participants continued to get notifications from Liberty when their assessed level of needed services and supports was lower than April 1, 2021, and the Department continued to authorize services and supports based on assessed needs prior to April 1, 2021.

Idaho Medicaid has now completed this ARP condition. **Because of this, starting November 1, 2024, the notices Idaho Medicaid HCBS participants receive from Liberty will only reflect their assessed level of needed services and supports at that time.** Additionally, notices for Department services and supports authorizations will only be based on those same assessed needs. While participants receiving Adult Developmental Disability Services will continue to receive the highest budget amount they have had since June 30, 2011, the "Injunction Budget," Liberty and Department notices will no longer be based on their

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September 24, 2024
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assessed level of needed services and supports prior to April 1, 2021. As always, Idaho Medicaid HCBS participants have the right to appeal any decision. Please see the [Medicaid Appeal Rights and Request Form](#) for more information.

Thank you for participating in the Idaho Medicaid Program.

JC/so

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BRAD LITTLE – Governor
ALEX J. ADAMS – Director

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September 24, 2024

MEDICAID INFORMATION RELEASE MA24-23

To: All Medicaid Providers

From: Juliet Charron, Deputy Director 

Subject: New Daily Spending Cap for Hourly Supported Living – Effective October 1, 2024

To providers of hourly residential habilitation services and targeted service coordinators:

Based on increases in underlying service rates, the daily spending cap for hourly residential supported living in combination with developmental therapy, adult day health, and community supported employment will match the rate for H2022 Daily Supported Living Services-High Support, which is currently \$410.88. The daily cap is effective October 1, 2024.

JC/so

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Provider Training Opportunities

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

October: Provider Enrollment Application Maintenance

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 for your schedule. To register for training, or to learn how to register, visit www.idmedicaid.com.

	October	November	December
	PEA Maintenance	Long Term Care	Respite Care
10-11:00 AM MT	10/16/2024	11/20/2024	12/18/2024
	10/17/2024	11/21/2024	12/19/2024
	10/15/2024	11/19/2024	12/17/2024
2-3:00 PM MT	10/9/2024	11/13/2024	12/11/2024
	10/10/2024	11/14/2024	12/12/2024
	10/17/2024	11/21/2024	12/19/2024
	10/15/2024	11/19/2024	12/17/2024

If you would prefer one-on-one training in your office with your Regional Provider Relations Consultant, please feel free to contact them directly. Contact information for Provider Relations Consultants can be found on page [13](#) 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 Contact Numbers	
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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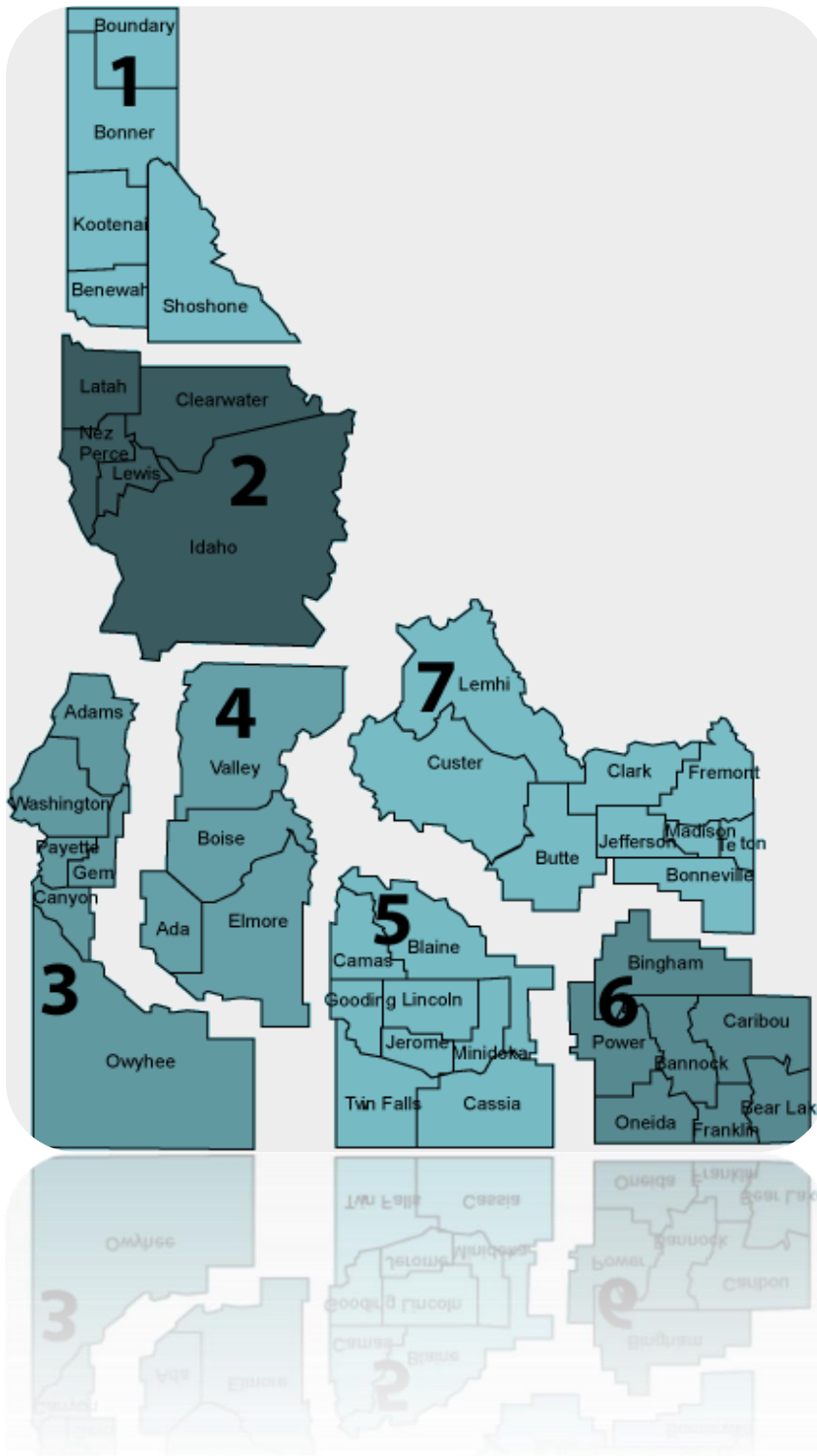
Gainwell Technologies Provider and Participant Services Contact Information

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

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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.



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Editor: Shannon Tolman**

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

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