



DELAWARE MEDICAL ASSISTANCE PROGRAM

■ PART C ■ RENAL ■ MEDICAID ■ VFC ■ DHCP ■ DPAP

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DELAWARE HEALTH AND SOCIAL SERVICES

Division of Medicaid & Medical Assistance

Provider Specific Announcements

T ransitioning Away From Dial-up:

Attention Providers Who Bill Electronically

To assist our providers in transitioning away from dial-up, EDS offers an alternative file submission mechanism via the Internet. This mechanism is referred to as WebBBS and offers many advantages over dial-up:

- The WebBBS provides easier access to the application via the Internet.
- The WebBBS offers increased file transmission speed. Current dial-up supports 56K, while WebBBS supports the speed afforded by your Internet connection.
- The WebBBS is user friendly and more intuitive to the end user.
- The WebBBS requires no special software to access the application.
- The WebBBS provides secure access to the application via SSL.
- The WebBBS is accessible from any desktop, using any Windows browser. The recommended browser is Internet Explorer 5.5 or higher with 128-bit encryption.
- The WebBBS uses open standard Web services for automated access, so there is no need to script through screen prompts.

- Many third-party products support Web services used by BES; therefore there is no need for special software.
- The WebBBS' system security meets HIPAA security and privacy standards.
- Future enhancements will be made to the WebBBS.

The Web submission address is:

<https://www.prod.ebx-eds.com>. Your BBS ID and password will remain unchanged. We will be happy to assist with facilitating your use of Web submission. Please contact the ECS department at 302-454-7154.

For billing or other provider questions,
call Provider Relations at
(302) 454-7154
or
1-800-999-EDS1 (3371).

If you do not have a vendor and would like
to bill electronically, call us.

DMAP offers free software to all Medicaid
providers, so "go electronic" today!



How old is that patient?

Many CPT codes are age-specific.
If your patient is younger or older
than the age range specified
in the code description
for that procedure,
your claim will deny.

Please use the appropriate codes
to ensure reimbursement!



Provider Specific Announcements

Payment Error Rate Measurement (PERM)

The Centers for Medicare and Medicaid Services (CMS) published regulations that require States to measure the accuracy of payments made to providers for Medicaid and the State Healthy Children Insurance Program (SCHIP). The project is entitled "Payment Error Rate Measurement (PERM)." The Division of Medicaid & Medical Assistance (DMMA) participated in the pilot projects and started the next PERM cycle in October 2008.

As part of the initiative, a random sample of paid claims is selected for review in the following areas for both Medicaid and SCHIP: Fee-for-Service, Managed Care, Eligibility. Providers must submit medical record documentation pertinent to the claim(s) selected. Documentation must include enough information to determine that services were provided, were medically necessary, and were consistent with the diagnosis.

Previous findings resulted in a significant amount of errors due to provider non-response or insufficient documentation. **CMS will collect the Federal Financial Portion (FFP) back from the State for claims where proper documentation is not submitted by providers. Consequently, DMMA will need to recoup the payment from the provider as a PERM Recovery.** If you have any questions or concerns regarding this project, please contact Susan M. Mateja, Policy Administrator, DMMA, at (302) 857-5055.

**It is critical that
all providers
submit the requested
medical record documentation
to support the
claim payment timely
to the
Federal Contractor,
Livanta, LLC.**



Client Questions?

So that Provider Relations may focus on assisting with your provider questions, please direct all client questions to the cardholder phone number on the back of the Medicaid card.

Attention Hospice Providers:

When billing with revenue code 0658 - Hospice Room and Board, the patient status must be included on the claim.

For paper billing, field 17 Patient Status and Field 39 Value Codes (Hospice covered days = 80) are required fields. Refer to section 2.3 of the UB-04 billing manual.

For electronic billing using the Provider Electronic Software, enter the covered days under Header Tab 3. If using any other type of software, enter the covered days in loop 2300 QTY Segment.

E-Prescribing

Program Gains Momentum

Delaware Medicaid E-Prescribing participation has continuously grown since the program's inception in November of 2008. The number of Medicaid providers who have actively been using an E-Prescribing system has increased approximately 60 percent since November—when patient Medicaid data for Delaware was first available. There are now more than 11 percent of DMAP providers actively E-Prescribing, with the population increasing each month.

The value and benefits of adopting E-Prescribing include greater efficiencies in the office, increased patient safety, and the reduction of fraud.

The challenges of E-Prescribing adoption for some providers are adapting to new technology and adjusting the workflow in the office. Other reported barriers are cost considerations for license fees and hardware that may need to be purchased.



There are resources available for getting started with E-Prescribing and determining the best solution for your practice. Surescripts operates the country's largest e-prescribing network and provides a resource center for prescribers, pharmacies, and payers throughout the country.

Visit www.surescripts.com to access guides for physicians, buyer's guide worksheets, initiatives and incentives, and a wealth of other data to assist with E-Prescribing adoption.

For information or assistance with E-Prescribing, please contact Brenda Wilson at 302-607-0744 or b.wilson@eds.com.

Pharmacy Specific Announcements

Early Refill Percentage

On Wednesday April 15th, 2009, the early refill percentage was increased from 75 percent to 83 percent. This increase was discussed extensively at two Drug Utilization Review (DUR) meetings to determine any barriers that might occur in providing proper care. The 75 percent medication completion allowed Medicaid recipients to get their medication up to 7 days early on a 30-day supply. **The new required 83 percent completion and the 7-day window have been reduced to 5 days for a 30-day timespan. This change is a hard edit, meaning that it cannot be overridden at the pharmacy.**

This initiative was implemented for two main reasons:

- **Rising concern over abuse of medication by chronic early refills.** In a one-year span, a recipient could previously get 15 one-month refills. When the categories that hit most often for early refills were reviewed, half of the top 10 categories contained abusable products. Drug categories such as blood thinners, which require frequent changes in dosage, are not susceptible to this edit.
- **An effort to reduce State pharmaceutical expenditures without reducing our level of care.**

In the short time since implementation of this early refill percentage increase, feedback has been favorable from our retail pharmacies. Since the increase cannot be overridden at the pharmacy, pharmacists are not forced to make a judgment call on how early a recipient is filling medication. In circumstances where there is a clinical necessity for an early refill, the physician's office can call the pharmacy call center to discuss the rationale for an early refill.

Any questions? Call the pharmacy provider line at 1-800-999-3371.

What's New?



Provider Manual Updates

The following provider manual revisions were posted to the DMAP Web site What's New page: www.dmap.state.de.us. Notification also appeared on Remittance Advice Banner Pages and the DMAP e-Mail Notification System.

Dental Billing Manual

Revision Date: 2/12/09

Section Revised: 2.3

Added required legal wording for use of ADA coding.

Dental Provider Policy Specific Manual

Revision Date: 2/12/09

Sections Revised: 11.0 and 12.0

Added required legal wording for use of ADA coding.

DME Provider Manual

Revision Date: 4/1/09

Section Revised: 8.0

Added the asterisk indicator notifying providers that no prior authorization is required for the following codes: A4218, A4233, A4234, A4235 and A4236.

General Policy Manual

Revision Date: 2/12/09

Section Revised: 1.20.3.4

Added new procedure code wording that references the legal ADA criteria for dental coding.

Hospice Provider Specific Manual

Revision Date: 4/8/09

Section Revised: 10.0 - Replaced current Patient's Hospice Activity Dates form with updated form

Section Revised: 7.1 - Clarified Hospice Notification Requirements

Section Revised: 5.0 - Added new section titled General Inpatient Care

Section Revised: 9.0 - Added revenue code 0657

Section Revised: 4.1 - Clarified billing instructions for Physicians Services

Outpatient Hospital Provider Manual

Revision Date: 3/11/09

Section Revised: 5.3.2

Update to the policy which reflects the change in form numbers from UB92 (old form number) to UB04 (new form number).

Pharmacy Provider Specific Manual

Revision Date: 4/15/09

Sections Revised: 5.3.2.4

Change in overutilization rate from 75% to 83%.

Revision Date: 4/1/09

Sections Revised: 3.4.2.12, 2.1.6, 4.1.4.2 and 5.3.2.4.1

Added the Drug Utilization Review (DUR) Board's titration suggestion for reduction of the number of unique medications use per 30 days. Added the policy changes that reflect reduced agency spending.

Practitioner Provider Manual

Revision Date: 4/22/09

Section Revised: 1.2

Update to define our requirements that the practitioner(s) signature is on all medical records.

School-Based Services Provider Specific Manual

Revision Date: 4/16/09

Section Revised: 7.0 - Clarified the description that introduces the newly added billing example chart.

Revision Date: 4/8/09

Section Revised: 7.0 - Clarified billing with example chart.

Division of Services for Aging and Adults with Physical Disabilities

The **C.A.R.E.** Delaware Program (Caregiver Assistance, Respite, and Education)

Assists, Guides, and Supports Delaware's Family Caregivers

To be eligible for most services, you must be:

- A family member or friend providing in-home and community care to an older adult who is 60 or more years of age or under age 60 with a medical diagnosis of early onset dementia.
- An older relative, 55 or more years of age, caring for children 18 years of age and younger (for example, grandparents caring for grandchildren).

SUPPORT FOR CAREGIVERS

Are you caring for an older loved one? Are you a grandparent or relative raising another family member's children? If so, you know that the role of "caregiver" can be stressful and tiring. CARE Delaware can help—by providing support and assistance to help you take the best possible care of your loved one, while taking care of your own health and well-being.

GRANDPARENT CAREGIVERS

Are you a grandparent or older relative raising another family member's children? CARE Delaware partners with other organizations to offer a helping hand to seniors raising children. Summer and holiday camps and a "Grand Time-Off" community-based program give you a break, while providing worthwhile activities for the children in your care. Additionally, CARE Delaware offers a resource guide to legal concerns related to Family Court, custody, guardianship, foster care, visitation, child support and other important topics. For more information about grandparent support, call "Joining Generations" at (800) 223-9074.

CAREGIVER CASE MANAGEMENT SERVICES

CARE Delaware has two full-time Senior Social Worker/Case Managers whose primary function is to support Delaware's family caregivers. If you think that you may need help, but are not sure where to begin, our Case Managers can get you started. They will assess your needs and connect you with local programs and services that support you and your loved one.

Lauren Conine is our Case Manager for New Castle County. Lauren is very pleased about joining CARE Delaware and having the opportunity to work directly with Delaware's caregivers. Lauren has more than 6 years of experience in long-term care and personal experience as a family caregiver. Lauren graduated from Wilmington College with a Bachelors Degree in Behavioral Science in 2002 and is currently working towards her Masters Degree in Business Administration.

Please contact Lauren if you are a caregiver caring for a loved one who lives in New Castle County and would like her to make a home visit to assess your caregiving needs. She can be reached by email at lauren.conine@state.de.us or by phone at (302) 255-9390.

Janet Harper-Wooley, is Case Manager for Kent and Sussex Counties. She comes to the program with more than 14 years with the Division and 17 years in state employment. Janet has been Employee of the Quarter and was nominated for the Governor's Award for excellence in State Government. She has been a volunteer for DSAAPD activities and at nursing homes, schools, and church. Janet has a full range of personal experience as a caregiver for her grandson, father, and mother. If you are a caregiver for a loved one who lives in Kent or Sussex County and would like her to make a home visit to assess your needs, she can be reached at janet.harper-wooley@state.de.us or call her office in Milford at (302) 424-7310.

Division of Services for Aging and Adults with Physical Disabilities

RESPIRE – A BREAK FOR THE CAREGIVER

Respite Care gives families and other caregivers temporary relief from the demands of providing ongoing care for frail older adults. This service can be provided in a number of ways, in the absence of a caregiver or while the caregiver is at home. The type and extent of care may vary based on circumstances. Respite care can be provided in the home by a licensed professional or trained companion or in an adult day care program. Respite care may be provided for caregivers residing outside of Delaware, if they are the principal caregiver of a frail, older Delawarean.

Call a case manager to ask about our respite services or find more information on the Respite page of our Website:

<http://www.dhss.delaware.gov/dhss/dsaapd/carerespites.html>.

CAREGIVER RESOURCE CENTERS

Looking for a good source of caregiving information? Our Caregiver Resource Centers serve as lending libraries for training videos, comprehensive resource directories, books, pamphlets, and helpful caregiving information. These centers also facilitate Caregiver Support Groups and other activities that help to alleviate caregiver stress. There are seven locations with a part-time coordinator available to provide one-on-one assistance:

New Castle County

Joyce Shores, Coordinator
Newark Senior Center
200 White Chapel Drive
Newark, DE 19713
(302) 737-2336 ext. 21
shoresjoyce@hotmail.com

Joyce Shores, Coordinator
Wilmington Senior Center
1901 N. Market Street
Wilmington, DE 19802
(302) 651-3401
shoresjoyce@hotmail.com

Kent County

Cindy Clark, Coordinator
Modern Maturity Center
1121 Forrest Avenue
Dover, DE 19904
(302) 734-1200 ext. 186
mmc_caregiver@hotmail.com

Additional contact:
Cheryl Gallagher
(302) 734-1200 ext. 173
cherylgallagher@modern-maturity.org

Sussex County

Kathleen Woolman, Coordinator
CHEER Community Center
20520 Sandhill Rd.
Georgetown, DE 19947
(302) 854-2886
kwoolman@scss.org

Kathleen Woolman, Coordinator
Harbour Lights CHEER Center
34211 Woods Edge Drive
Lewes, DE 19958
(302) 645-9239 or (302) 854-2886
kwoolman@scss.org

Kathleen Woolman, Coordinator
Coastal Leisure Center
Ocean View CHEER Center
Cedar Neck Road
Ocean View, DE 19970
(302) 539-2671 or (302) 854-2886
kwoolman@scss.org

Kathleen Woolman, Coordinator
Pelican Cove
Long Neck CHEER Center
The Shoppes at Long Neck
26089 Long Neck Road
Millsboro, DE 19966
(302) 945-3551 or (302) 854-2886
kwoolman@scss.org

Caregiving information/assistance: **(800) 223-9074**
Information about CARE Delaware: <http://www.dhss.delaware.gov/dhss/dsaapd/care.html> or e-mail:
DSAAPDinfo @state.de.us

C.A.R.E. Delaware is offered through DSAAPD. The program is funded by the Older Americans Act through the National Family Caregiver Support Program, and is administered by the U.S. Administration on Aging. There is no charge for services offered by C.A.R.E. Delaware, but participants are encouraged to make voluntary contributions to help expand available services.

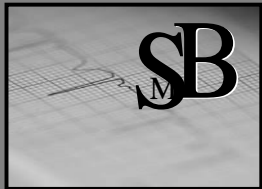


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DELAWARE HEALTH AND SOCIAL SERVICES
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