

# Provider Insider

Alabama Medicaid Bulletin

April 2019

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## ALABAMA MEDICAID CUMULATIVE MME EDIT COMING EARLY 2019

**In addition to the opioid naïve 5 and 7 day limits, the Alabama Medicaid Agency is working toward implementing cumulative Morphine Milligram Equivalent (MME) edits in early 2019.**

Higher doses of opioids are associated with higher risk of overdose and death; even relatively low dosages (20-50 MME per day) may increase risk.<sup>1</sup> Alabama has led the nation for the past 6 years in the opioid prescribing rate per 100 population (121 in 2016; 107.2 in 2017) and had nearly 3 times more opioid prescriptions per 100 population than New York.<sup>2</sup>

The Alabama Medicaid Agency previously executed many programs to address opioid use such as monthly maximum unit limits, therapeutic duplication edits, Drug Utilization Review (DUR) letters, academic detailing report cards and face to face visits, prior authorization, and other educational efforts. Most recently, Medicaid implemented limits for opioid naïve patients to limit first-time use to 5 days for children and 7 days for adults, limiting daily use to 50 MME. Overrides are available for medical necessity.

In an effort to continue combating the opioid crisis, **beginning May 1, 2019\*, Alabama Medicaid will limit the amount of cumulative MMEs allowed per day on claims for opioid experienced recipients.** The edit will begin at 250 cumulative MME per day and will gradually decrease over time. The final MME target is 90 MME per day.

Claims for opioids that exceed the maximum daily cumulative MME limit will be denied. Claims prescribed by oncologists will be excluded from the edit. Long term care and hospice patients will also be excluded; however, children will be included. Overrides for quantities exceeding the MME limit for medical necessity may be submitted to Health Information Designs (HID). Information regarding override requirements and MME examples will be made available on the Alabama Medicaid Agency website closer to the implementation of the new limitations.

The Agency will implement a robust educational program to include academic detailing visits to the prescribers and pharmacies of the first round of affected patients, extensive training, and notifications to the impacted providers through a provider ALERT closer to implementation. Please check the Alabama Medicaid Pharmacy webpage for additional information: [http://www.medicaid.alabama.gov/content/4.0\\_Programs/4.3\\_Pharmacy-DME.aspx](http://www.medicaid.alabama.gov/content/4.0_Programs/4.3_Pharmacy-DME.aspx)

*\*At the time of article submission, the implementation date is May 1, 2019 for a 'phase in' for 250MME/day. During the phase-in period, a universal prior authorization number will be provided on the pharmacy claim rejection, with an explanation to notify the affected patient/prescriber. Hard stops/edits will begin after the phase-in period.*

1. "Calculating Total Daily Dose of Opioids for Safer Dosage". CDC. [https://www.cdc.gov/drugoverdose/pdf/calculating\\_total\\_daily\\_dose-a.pdf](https://www.cdc.gov/drugoverdose/pdf/calculating_total_daily_dose-a.pdf). Accessed 2/1/2019.
2. "Understanding the Epidemic". Centers for Disease Control and Prevention. <https://www.cdc.gov/drugoverdose/epidemic/index.html>. Accessed 2/1/2019.



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## Pass It On!

Everyone needs to know the latest about Medicaid. Be sure to route this to:

- Office Manager
- Billing Dept.
- Medical/Clinical Professionals
- Other \_\_\_\_\_

The information contained within is subject to change. Please review your Provider Manual and all Provider Alerts for the most up to date information.

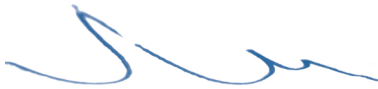
# ATTENTION:

## PSYCHOLOGISTS, LPCs, ALCs, LMFTs, LMSWs, LICSWs & PEDIATRICIANS Who have Allied Mental Health Professionals working in their practice(s)

Please be reminded effective April 1, 2019, LPCs, ALCs, LMFTs, LMSWs and LICSWs (who bill in accordance with Chapter 34 Behavioral Health Providers) must be an individually enrolled Medicaid provider and file claims using their own NPI number. Those professionals providing services within in a school setting in accordance with Chapter 103 Local Education Agencies (LEAs) are not required to enroll and should not bill independently. Claims filed using the current method of using the psychologists' NPI number with a modifier will deny. Please refer to the ALERT dated September 25, 2018, at [www.medicaid.alabama.gov](http://www.medicaid.alabama.gov) for more information.

### RECIPIENT SIGNATURE REQUIREMENTS

#### Rule No. 560-X-1-.18 Provider and Recipient Signature Requirements



As a reminder, all providers must obtain a signature from the recipient and this signature must be kept on file as verification that the recipient was present on the date of service for which the provider seeks payment (e.g., release forms or sign-in sheets). Unless otherwise specified, the signature requirements may be satisfied by a handwritten, electronic, or digital signature. As stated in the Administrative Code for Alabama Medicaid under Rule No. 560-X-1-.18(3)(a)(2):

“Recipient signatures are required for all pharmacy, Durable Medical Equipment (“DME”), supply, appliance and Prosthetics, Orthotics and Pedorthics (“POP”) claims to validate the billed and reimbursed service was rendered to the recipient and for pharmacy claims to ensure the recipient was offered appropriate counseling (if applicable). For pharmacy, DME, supply, appliance and POP items that have been delivered, the provider must ensure that the delivery service obtains the recipient’s signature or the signature of the recipient’s Designee.”

Please note it is important for providers to follow these procedures. Failure of providers to follow the signature requirements will result in recoupment as stated in Rule No. 560-X-1-.18(3)(c):

“When payment has been made on claims for which a signature is not available and one of the above exceptions is not applicable, the funds paid to the provider covering this claim will be recouped.”

For further guidance and additional information on signature requirements, as well as a description of exceptions to the listed signature requirements, providers are encouraged to refer to Rule No. 560-X-1-.18 located in Chapter 1 of the Administrative Code for Alabama Medicaid Agency, which can be found on pages 13 through 17 of the following link:

[http://www.medicaid.alabama.gov/documents/9.0\\_Resources/9.2\\_Administrative\\_Code/9.2\\_Adm\\_Code\\_Chap\\_1\\_General\\_10-26-18.pdf](http://www.medicaid.alabama.gov/documents/9.0_Resources/9.2_Administrative_Code/9.2_Adm_Code_Chap_1_General_10-26-18.pdf)

### RY 2020 PERM Cycle Underway

The Payment Error Rate Measurement (PERM) program measures improper payments in Medicaid and the State Children’s Health Insurance Program (SCHIP) and produces state and national-level error rates for each program. PERM audits authorized by the Centers for Medicare and Medicaid Services (CMS) for Reporting Year 2020 (RY 2020) are in progress. CMS has contracted with NCI AdvanceMed, Inc. (AdvanceMed) to serve as the Review Contractor (RC) to conduct the data processing and medical records reviews for this cycle. AdvanceMed will start contacting providers soon to request medical records for claims and payments originally paid between July 1, 2018, and June 30, 2019. If providers are contacted by AdvanceMed requesting medical records, providers are required to comply with the request as referenced in the Administrative Code, the Provider Manual, as well as their provider agreements. Providers are asked to submit accurate and complete documentation in a timely manner. For questions or additional information, please contact Patricia Jones, PERM Program Manager at 334-242-5609 or [Patricia.Jones@medicaid.alabama.gov](mailto:Patricia.Jones@medicaid.alabama.gov).

# ATTENTION:

## PSYCHOLOGISTS, LPCs, ALCs, LMFTs, LMSWs, LICSWs, and CMHCs

The 2019 Testing Codes have been activated for billing. Please refer to your respective Provider Billing Manual chapter and Fee Schedule for more information.

### Testing Codes Crosswalk

2018 CPT® Descriptor (Previous Code)	2019 CPT® Descriptor (Replacement Codes)
96101 Psychologist	96130
	96131
	96136
	96137
96102 LPC, ALC, LMFT, LICSW, LGSW	96130
	96131
	96138
	96139
96116 Psychologist	96116
	96121
96118 Psychologist	96132
	96133
	96136
	96137
96119 LPC, ALC, LMFT, LICSW, LGSW	96132
	96133
	96138
	96139
96103. 96120 Psychologist, LPC, ALC, LMFT, LICSW, LGSW	96146

## REMINDER:

### PROPER DOCUMENTATION OF BILLED SERVICES

The Payment Error Rate Measurement (PERM) audits authorized by the Centers for Medicare and Medicaid Services (CMS) measure improper payments in Medicaid and the Children’s Health Insurance Program (CHIP). As a part of the program, recipients’ records are subject to be audited for correctness. Providers are to keep detailed records of such quality, sufficiency, and completeness that fully disclose the extent and cost of services, equipment, or supplies furnished to eligible recipients. Providers should ensure records are legible and complete (i.e. physician’s signatures, correct dates, treatments plans, progress notes, consent forms, etc.). Please refer to Chapter 7 of the Provider Billing Manual.





# Alabama Medicaid Bulletin

PRSR STD  
U.S. POSTAGE  
PAID  
PERMIT # 432  
MONTGOMERY AL

Post Office Box 244032  
Montgomery, AL 36124-4032

### Check Write Schedule Reminder:

01/04/19	02/15/19	04/05/19	05/17/19	07/05/19	08/16/19
01/18/19	03/01/19	04/19/19	06/07/18	07/19/19	09/06/18
02/01/19	03/15/19	05/03/19	06/21/18	08/02/19	09/13/19

The release of funds is normally the second Monday after the check write (remittance advice) date. Please verify direct deposit status with your bank. As always, the release of direct deposit and checks depends on the availability of funds.

**DXC Provider Representatives may be reached by dialing  
1-855-523-9170 and entering the appropriate seven digit extension.**



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