Medicaid in North Dakota Schools

Nuts & Bolts of School Medicaid 8.10.23

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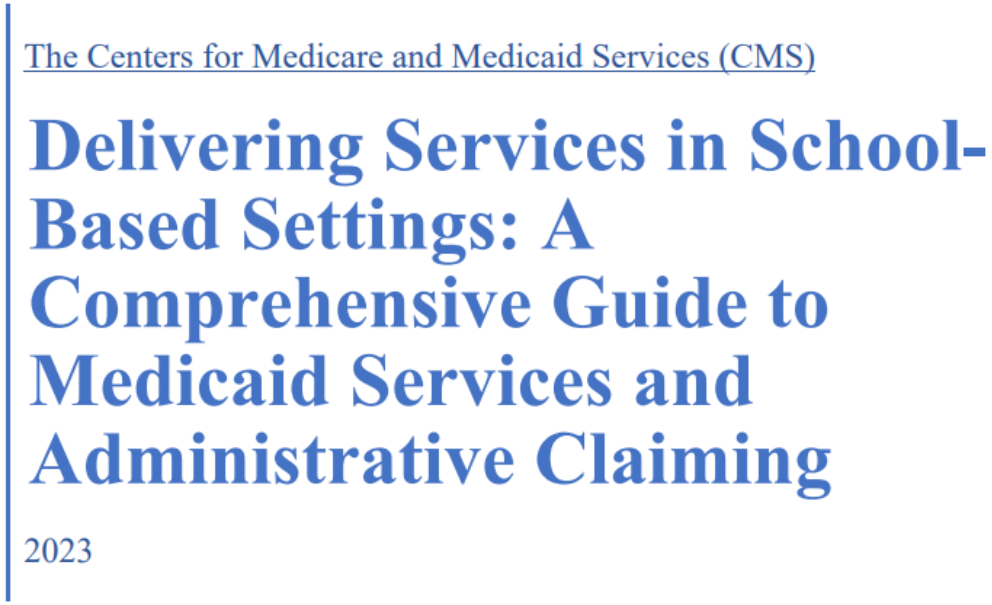
New School Medicaid Guidance from CMS



ND Medicaid is still working through this.

No changes based on this guidance have yet been implemented.

Hot off the press

There is now a place on ND Medicaid's website to find school-based information!

Medicaid School-Based Care

ND Medicaid provides coverage for qualifying students in a school setting.

Home / Healthcare Coverage / North Dakota Medicaid / ND Medicaid Provider Information / Medicaid School-Based Care

Medicaid School-Based Care

We are excited to partner with North Dakota schools to provide Medicaid coverage to qualifying students in a school setting.

These services are for all Medicaid-eligible students whether they have an Individualized Education Plan (IEP) or not.

Many students are already receiving these services in schools. Billing Medicaid brings money back to your school so it can be used in other ways to benefit the health and well-being of your student body.

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https://www.hhs.nd.gov/healthcare/medicaid/provider

Enrollment

Provider Eligibility Requirements

- Provide services to at least one North Dakota Medicaid-eligible recipient
- Meet conditions regulating the specific type of provider, program, and/or service
- Hold a current license, certification, accreditation, or registration according to North Dakota state laws and regulations and Medicaid rules, where applicable
- Pass enrollment screening process

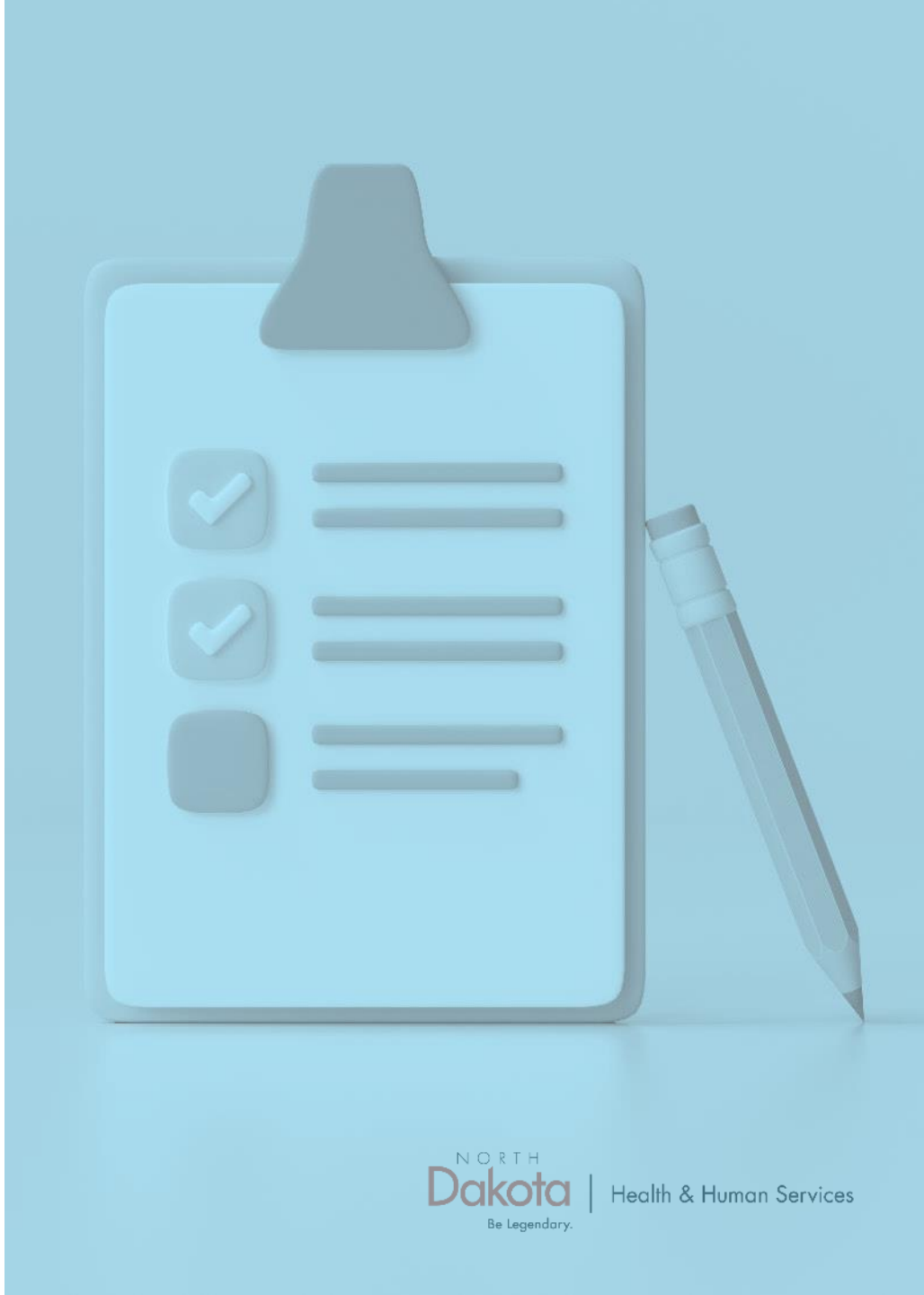
Enrollment Information

[ND Medicaid Provider Information page]

Enrollment Information

Find enrollment and revalidation information, forms and instructions.

Get more info >



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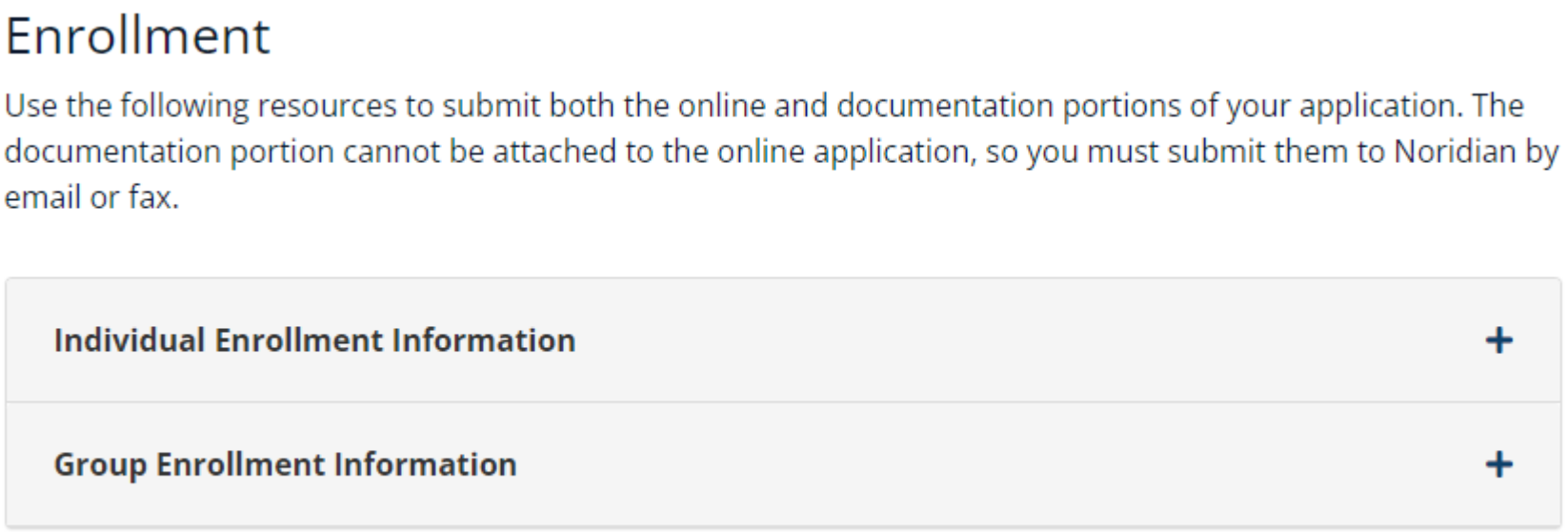
Enrollment Information

ND Medicaid Provider Enrollment Information page



LEA/Sp Ed Enrollment

Provider Type Code:

025 – Agency

Provider Specialty Code:

397 LEA/Special Education

Taxonomy Code:

251300000X

ND Medicaid - Group Provider Type, Specialty and Taxonomy Valid Values

PROVIDER TYPE CODE	PROVIDER SPECIALTY CODE	TAXONOMY CODE
017-Other Service Providers	335-Case Manager/Care Coordinator	171M00000X
017-Other Service Providers	468-County Social Service Office	171M00000X
017-Other Service Providers	339-Lodging	A taxonomy code is not required for this provider type/specialty combination
017-Other Service Providers	393-Meals	A taxonomy code is not required for this provider type/specialty combination
025-Agencies	035-Case Management	251B00000X
025-Agencies	357-Community/Behavioral Health	251S00000X
025-Agencies	060-Early Intervention; Provider Agency	252Y00000X
025-Agencies	082-Home Health Agency	251E00000X
025-Agencies	454- Hospice Care, Community Based	251G00000X
025-Agencies	453-Human Service Center	251S00000X
025-Agencies	397-Local Education Agency (LEA)/Special Education	251300000X

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IEP vs. non-IEP Medicaid enrollment

Step 1: School Enrolls with North Dakota Medicaid as a

Provider Type – 025 Agencies and

Provider Specialty – 397 Local Education Agency(LEA)/Special Education

Step 2: If school provides **both** IEP & non-IEP services, it will need two separate National Provider Identifiers AND two separate enrollment records for billing and reimbursement

Schools are responsible for billing IEP or non-IEP services under appropriate records and NPI.

IEP vs. non-IEP Medicaid enrollment

Step 1: School Enrolls with North Dakota Medicaid as a 025/397 Agency/Local Education Agency(LEA)/Special Education

Step 2: School obtains NPI(s) and completes separate enrollments for IEP & non-IEP services (if providing both)

IEP	Non-IEP
School obtains a National Provider Identifier from NPPES (hhs.gov) and completes its enrollment for IEP services.	School obtains a National Provider Identifier from NPPES (hhs.gov) and completes a separate enrollment for non-IEP services.
	Noridian will need to add Non-IEP to this provider enrollment name to ensure that claims are not subject to the Medicaid Match.
Bill for IEP services using this Provider (NPI) number	Bill for non-IEP services using this Provider (NPI) number which should be identified as “Non-IEP”

Enrollment Information

ND Medicaid Provider Enrollment Information page

Taxonomy Codes

Taxonomy codes identify a health care provider by the service they provide and area of specialty.

Providers are required to submit taxonomy codes when **submitting paper** or **electronic claims** to ND Medicaid. This excludes Qualified Service Providers (HCBS claims), transportation claims, and claims submitted by other atypical provider types.

Learn More on Taxonomy Codes −

Taxonomies (59kb pdf)

View a searchable list of:

- Provider Type Codes and Provider Specialty Codes
- ND Medicaid Valid Values for Individual and Group Providers

How to Search

- Open the document
- Hold the Control Key and press F
- A search box will be displayed in the upper right of the screen
- Enter your search criteria (NPI number)
- Click the NEXT button in the search box to locate the NPI number you are inquiring on

Instructions to validate your taxonomy code(s) in Enterprise MMIS

Taxonomy codes are:

- Maintained on the provider's record and will be verified based on licenses and certifications
- Submitted to North Dakota on claims and other items such as service authorizations
- Used during adjudication
- Required on paper and electronic claims. Claims without the required taxonomy code will be denied.

Taxonomy codes listed on a claim MUST match the taxonomy codes on a provider's record or the claims will be denied.

Questions about taxonomy codes, changing taxonomy codes or other enrollment information should be emailed to NDMedicaidEnrollment@Noridian.com .

Enrollment Resource

Contents

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How to See if a Provider is Already Enrolled with North Dakota Medicaid 3
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Provider Enrollment FAQ

Additional Information and Resources

- **Enrollment Maintenance** +
- **Add Service Locations** +
- **Add Primary Care Providers (PCP)** +
- **Frequently Asked Questions for Provider Enrollment** −

Provider Enrollment FAQ (1.60mb pdf)

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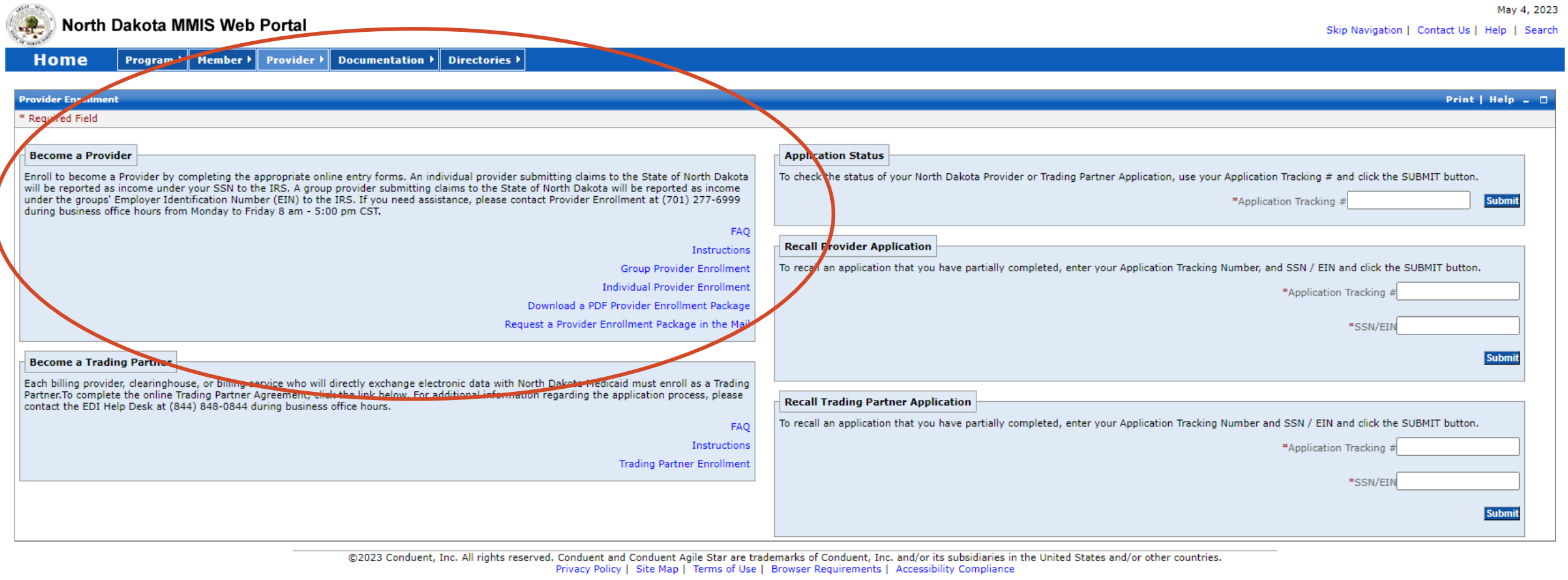
Online enrollment MMIS Web Portal

MMIS Web Portal online application

ND Health Enterprise MMIS Web Portal



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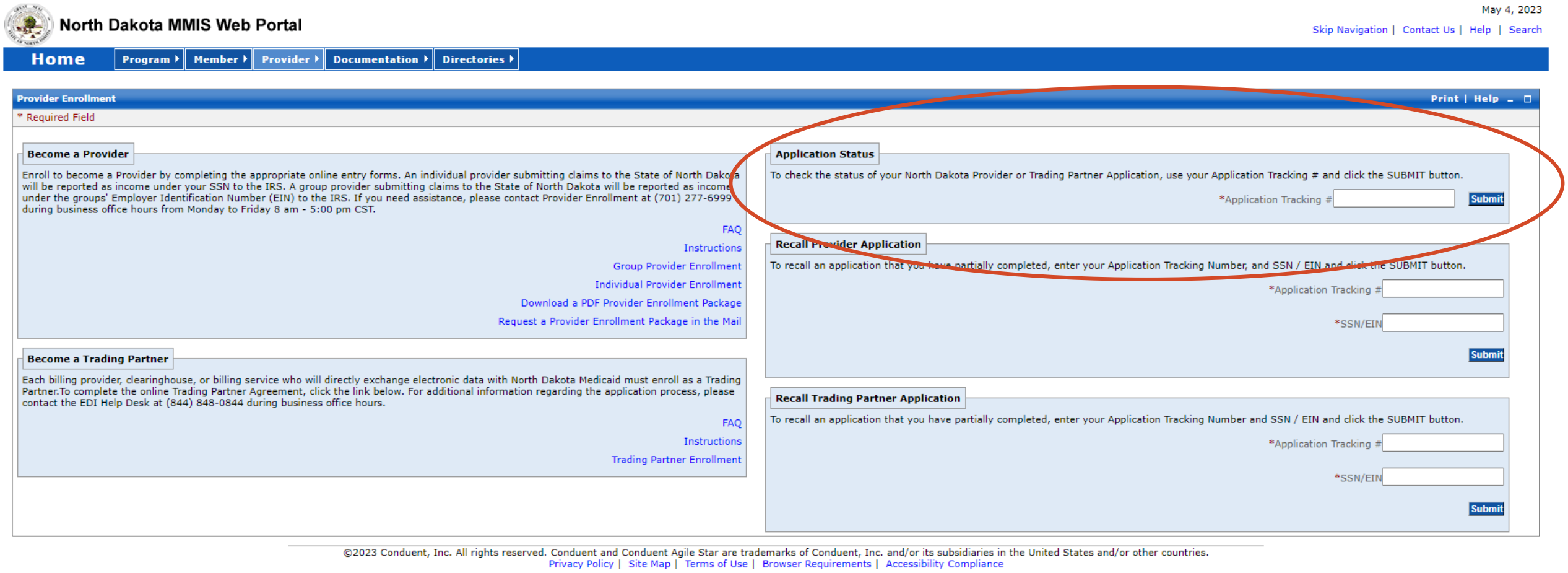
Online enrollment – check application status

MMIS Web Portal online application

ND Health Enterprise MMIS Web Portal



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Has it been a while since you've billed?

You may just need to reactivate your enrollment.

Submit a complete checklist and required documentation by going to https://www.hhs.nd.gov/healthcare/medicaid/provider/enrollment-information and under Group Enrollment Information (Required Documents) click on Group Provider Checklist, scroll down to Agency and click on Local Education Agency (LEA).

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Enrollment Questions?

Call

(701) 277-6999

Write

Noridian Healthcare Solutions

Attn: ND Medicaid Provider Enrollment

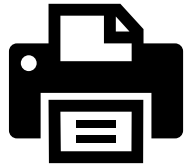
PO Box 6055

Fargo, ND 58108-6055

Email

NDMedicaidEnrollment@noridian.com

Fax



(701) 433-5956

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Eligibility

Student Eligibility Verification

Enrolled Providers can access eligibility information through the MMIS web portal at https://mmis.nd.gov/portals/wps/portal/EnterpriseHome

Click on the Member field next to Home

- Check eligibility
- Populate 2 of the 3 fields: Member ID, Date of Birth, Last Name, First Name
- Fill in Service from Date and Service to Date
- Service Type must equal 30-Health Benefit
- Click Search

Student Eligibility Verification, cont'd

You will see what plans the member is enrolled in.

- Health Tracks/Early Perdic Scrn Det Tmt (EPSDT), Medicaid Fee for Service (aka "traditional" Medicaid), Developmentally Disabled Waiver are potential options
- Note: Special Health Services (SHS) is not a Medicaid plan of coverage

Eligibility Status: Yes = active eligibility

Eligibility condition and assignment of claim

- Eligibility Condition

If the individual has third-party medical coverage (health care, accident, automobile), proceeds received/receivable go to the cost of that person's care as well as an eligible spouse and children.

Source: N.D.C.C. 50-24.1-02(2).

- Assignment of Claim

Medicaid applicants or recipients are deemed to have assigned the right to recovery of medical costs not exceeding the amount of Medicaid funds expended for the care and treatment of the applicant or recipient. Effective on eligibility determination.

Source: N.D.C.C. 50-24.1-02.1.

Why does this matter?

This is something you need to know for students who may have third-party medical coverage.

We'll get to third party liability (TPL) in just a bit.

Billing/Claims

Consent to Bill Medicaid – hasn't changed yet

The US Department of Education proposed a rule to eliminate the requirement for schools to obtain initial consent before billing Medicaid. Public comment closed August 1st, 2023. Federal Register :: Assistance to States for the Education of Children With Disabilities

Initial consent is currently a requirement of IDEA prior to IEP service Medicaid billing. 34 Section 300.154(d)(iv).

Written notice would still be required and FERPA consent requirements still apply (see proposed revision to that section to your right).

The revision reads as follows:

§ 300.154 Methods of ensuring services.

★ ★ ★ ★ ★

(d) * * *

(2) * * *

(iv) Prior to accessing a child's or parent's public benefits or insurance for the first time, and annually thereafter, must provide written notification to the child's parents, consistent with § 300.503(c), that includes—

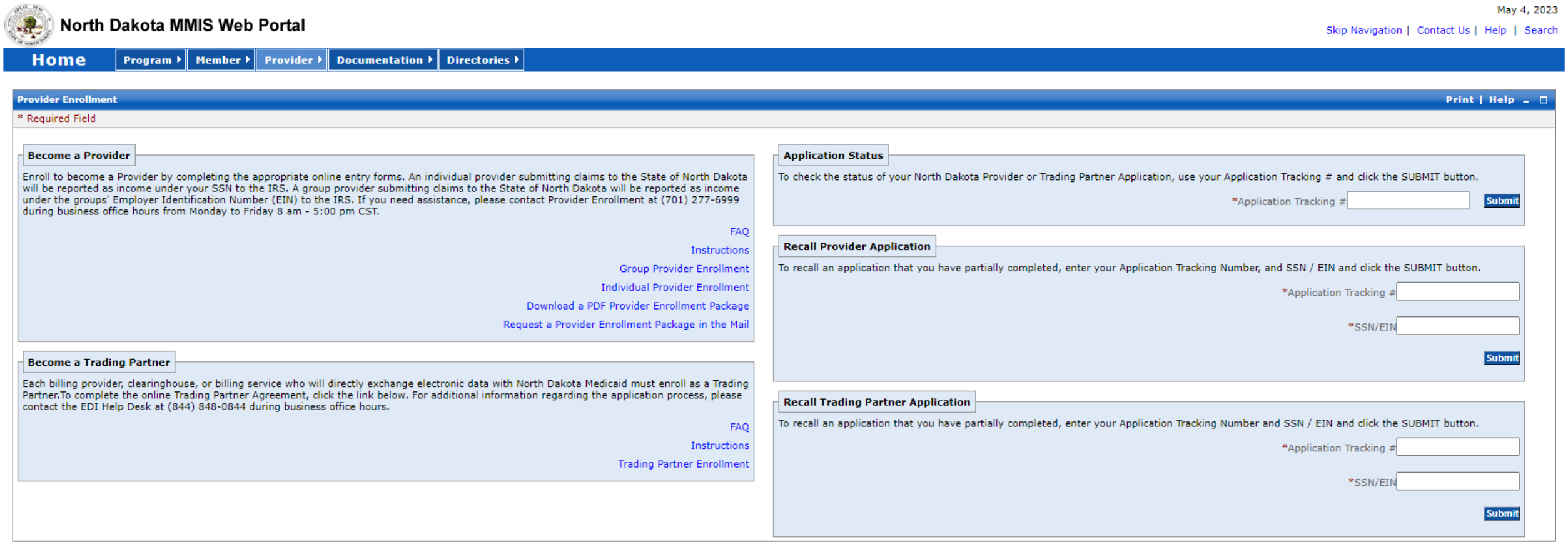
(A) A statement confirming that parental consent to disclose personally identifiable information is required separately under 34 CFR 99.30 and 300.622 and that parents retain all applicable privacy rights under those provisions; and

(B) A statement of the "no cost" provisions in paragraphs (d)(2)(i) through (iii) of this section.

Online claiming
MMIS Web Portal

MMIS Web Portal

ND Health Enterprise MMIS Web Portal



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MMIS Web Portal claims training and information

MMIS - ND Health Enterprise Medicaid Management Information System webpage

Provider Enrollment

All new and existing providers MUST complete a web-based enrollment application to use the ND Health Enterprise MMIS.

Guides and Fact Sheets

Fact Sheets +

Quick Guides +

Provider Education and Training webpage

Billing/Claims −

- MMIS Web Portal Template Training (931kb pdf)
- MMIS Web Portal Professional Claim Form Submission Instructions Training (1.09mb PDF)
- MMIS Web Portal Claims Status Inquiry for 837 or Web Portal Claims Training (669kb PDF)
- Dental provider training - MMIS Web Portal Dental Claim Form Submission Training (1.12mb PDF)
- Hospitals, rural health and federally-qualified providers training - ND Health Enterprise Web Portal Institutional Claim Form Submission Instructions (1.3MB PDF)
- How to adjust or void a claim (582kb pdf)
- How to Submit a DME Service Authorization Training (Feb. 4, 2021 - YouTube video)

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ND Medicaid Fee Schedules

ND Medicaid pays health care professionals directly for each service billed.

Services are paid according to published fee schedules.

RESOURCES: ND Medicaid Provider Page – Fee Schedules, Autism Fee Schedule

Fee Schedules

Rates

- CAH Rates
- IHS Encounter Rates
- Swing Bed Rates

Current Medicaid Fee Schedules

- ND Medicaid 1915(i) Services Fee Schedule (7/1/2023 Updated)
- ND Medicaid Ambulance Fee Schedule (7/1/2023 Updated)
- ND Medicaid Autism Services Fee Schedule (7/1/2023 Updated)
- ND Medicaid Dental - ADULT Fee Schedule (7/1/2023 Updated)
- ND Medicaid Dental - CHILD Fee Schedule (7/1/2023 Updated)
- ND Medicaid DME Purchase Fee Schedule (7/1/2023 Updated)
- ND Medicaid DME Rental Fee Schedule (7/1/2023 Updated)
- ND Medicaid Non-Emergency Transportation Fee Schedule (7/1/2023 Updated)
- ND Medicaid Partial Hospitalization (PHP) Fee Schedule (7/1/2023 Updated)
- ND Medicaid Professional Fee Schedule (7/1/2023 Updated)
- ND Medicaid Rehab Services Fee Schedule (7/1/2023 Updated)
- ND Medicaid Substance Use Disorder Treatment Services Fee Schedule (7/1/2023 Updated)
- ND Medicaid Swing Bed Fee Schedule (3/27/2023)
- ND Medicaid Vaccine Fee Schedule (8/1/2022) (Revised)

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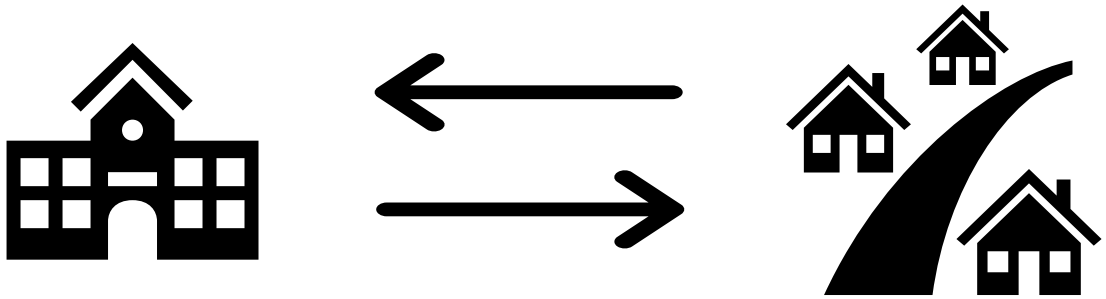
Why isn’t there a separate School-based fee schedule?

Because services delivered in schools are the same type of services delivered elsewhere in North Dakota communities.



Each state designs its own Medicaid program within federal regulations and guidelines so other states may do things differently.

Claim Filing Deadlines

- North Dakota Medicaid follows the timely filing requirements found at 42 Code of Federal Regulations (CFR) 447.45(d). N.D. Admin; Code 75-02-05-04(6).

Timely Filing policy

180 Days - Original Claim Submission

ND Medicaid must receive a provider's original Medicaid primary claim submission within 180 days from the date of service.

365 Days - Final Claim Submissions

Final submission of claims that will be considered for adjudication (including resubmitted claims) must occur within 365 days from the date of service. The complete policy is located here.

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Documentation Guidelines

Providers must keep records of services provided for a minimum of seven years.

This documentation must be available on request and at no charge (to ND Medical Services/HHS).

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Third Party Liability

Third Party Liability (TPL)

Who is a third party?

Anyone (individual, entity, program) who is or may be liable to pay for all or part of a Medicaid-eligible service.

ND Medicaid must do a reasonable search for third-party coverage when members initially apply and when coverage is redetermined. Schools do not need to get this information from families.

Source for more info: 42 CFR 433.135 et. al

Boiling TPL down

Bill for services first.

- If there is a legally liable third party identified in MMIS, the claim will reject.
- You will see a third-party listed on the Remittance Advice (RA).
- Bill the third-party and you will receive an Explanation of Benefits(EOB) letting you know if the third-party covers the service.
- You may bill Medicaid for the payment of the balance per the Medicaid allowable fee (from fee schedules).
- If there is no coverage for the service, provide ND Medicaid with the EOB showing no coverage.

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TPL Food for thought

ND Medicaid doesn't have an interest as to who pays the third party's liability.

State Education Associations (SEAs) can pay TPL through its own funds.

See p. 107 of CMS School Medicaid Guidance, May 2023

Questions about TPL?

Policies to know about.

School-Based Services Policy

Third Party Liability Policy

- Call (701) 328-2347

- Email medicaidtpl@nd.gov

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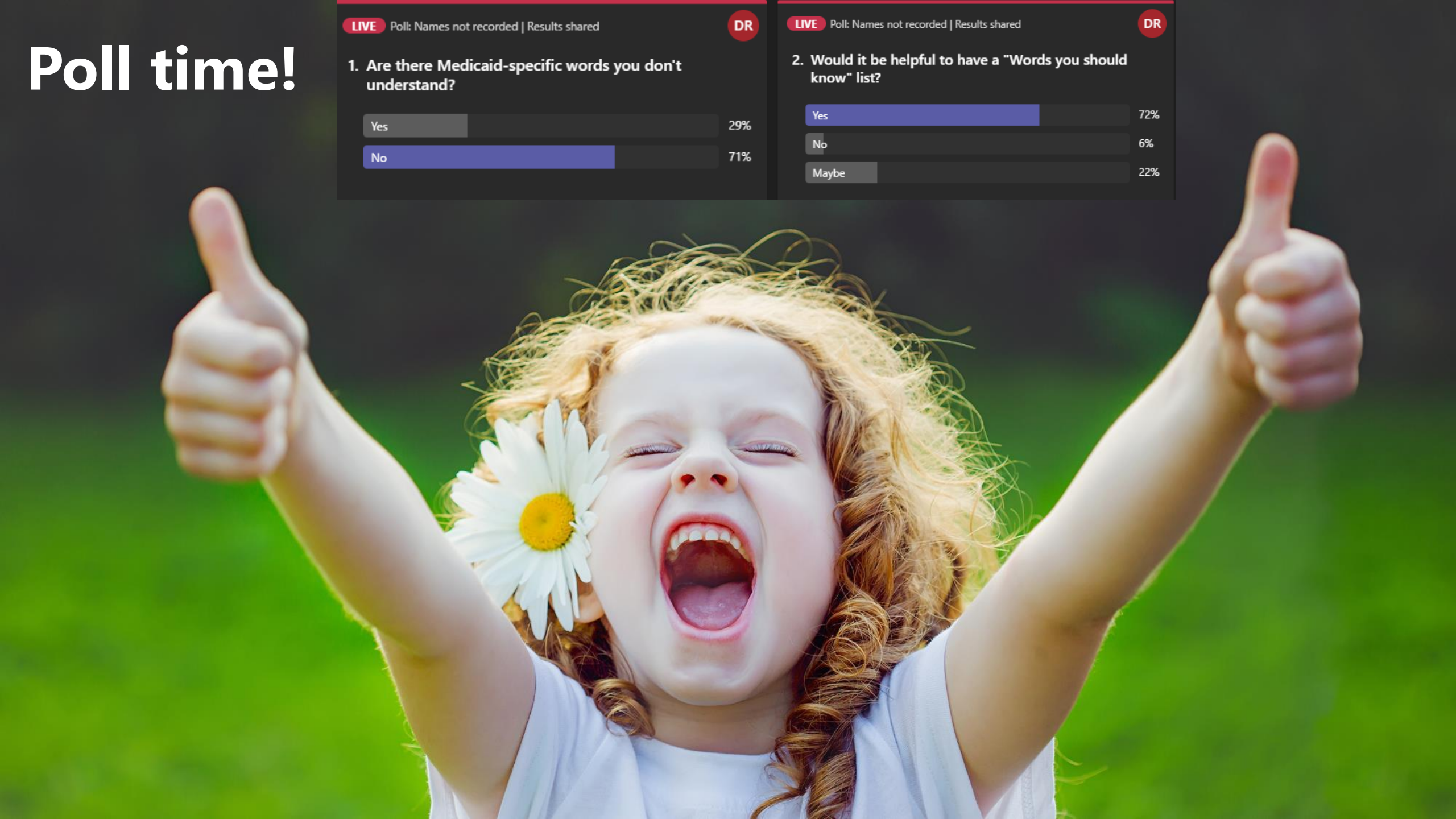
Poll time!


LIVE Poll: Names not recorded | Results shared
DR
1. Are there Medicaid-specific words you don't understand?
Yes 29%
No 71%
LIVE Poll: Names not recorded | Results shared
DR
2. Would it be helpful to have a "Words you should know" list?
Yes 72%
No 6%
Maybe 22%

Services

Policy Manuals

- Service eligibility and requirements
- Billing codes and service limits
- Payment and service authorization information
- Documentation requirements
- Provider enrollment and information chapters
- Definitions
- Updated quarterly

Provider Manuals and Guidelines webpage

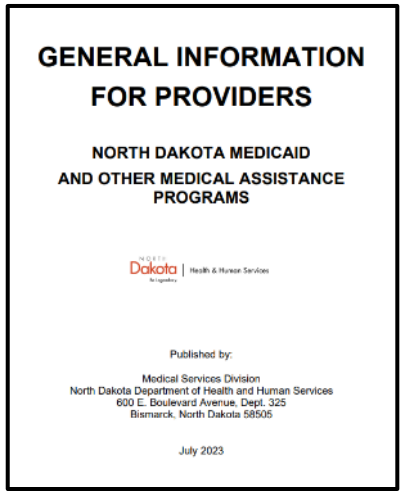
Provider Guidelines, Manuals and Policies

Download guidelines for provider enrollment and Medicaid-covered services (1203 KB) - July 2023

General Information for Providers Manual

Behavioral Health −

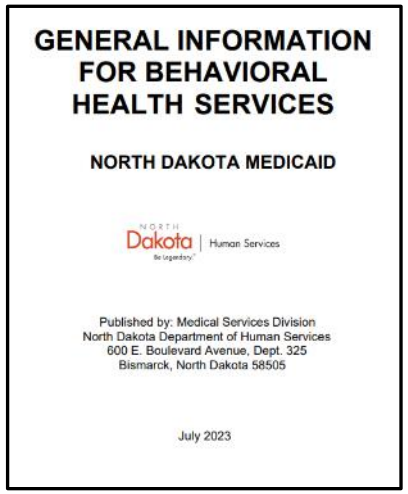
Behavioral Health Services Provider Manual (July 2023)


GENERAL INFORMATION FOR PROVIDERS

NORTH DAKOTA MEDICAID AND OTHER MEDICAL ASSISTANCE PROGRAMS

Published by:
Medical Services Division
North Dakota Department of Health and Human Services
600 E. Boulevard Avenue, Dept. 325
Bismarck, North Dakota 58505

July 2023


GENERAL INFORMATION FOR BEHAVIORAL HEALTH SERVICES

NORTH DAKOTA MEDICAID

Published by: Medical Services Division
North Dakota Department of Human Services
600 E. Boulevard Avenue, Dept. 325
Bismarck, North Dakota 58505

July 2023

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Covered Services

- P. 22 of the General Information for Providers Manual

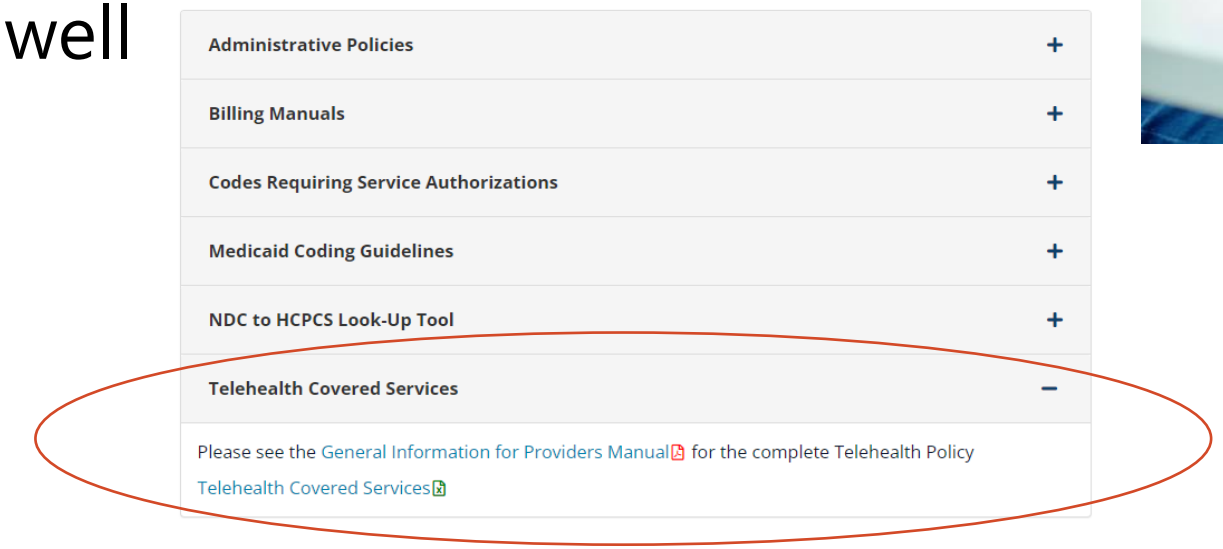
Covered services are subject to change based on changes in funding, legislative action, and changes in administrative rules.

Service	Referral Required from Primary Care Provider	Limits	Service Authorization Required	Age Restrictions
1915(i) Services	No	Yes	Yes, see 1915(i) chapter	Yes
Ambulance services	No	No	For emergency out of state transport: referring providers have 48 hours following the service to notify ND Medicaid of transport	No
Ambulatory surgical services	Yes	No	Some services require SA from Kepro	No
Audiology	Yes	No	No	No
Autism Spectrum Disorder Applied Behavioral Analysis Service	No	No. Services must be included in the plan of care.	Yes, annual and 180-day update.	Yes, must be under 21 years of age.
Behavioral health services	No	No	No	No
Certified nurse midwife services	No	No	No	No
Chiropractic services	No	20 manipulations per year; x-rays 2 per year	Yes, after limits are met	No

Telehealth Coverage

List of covered codes is located on the Medicaid Provider landing page here

There is a Telehealth chapter in the General Provider manual and information about telehealth coverage in the Behavioral Health Manual as well



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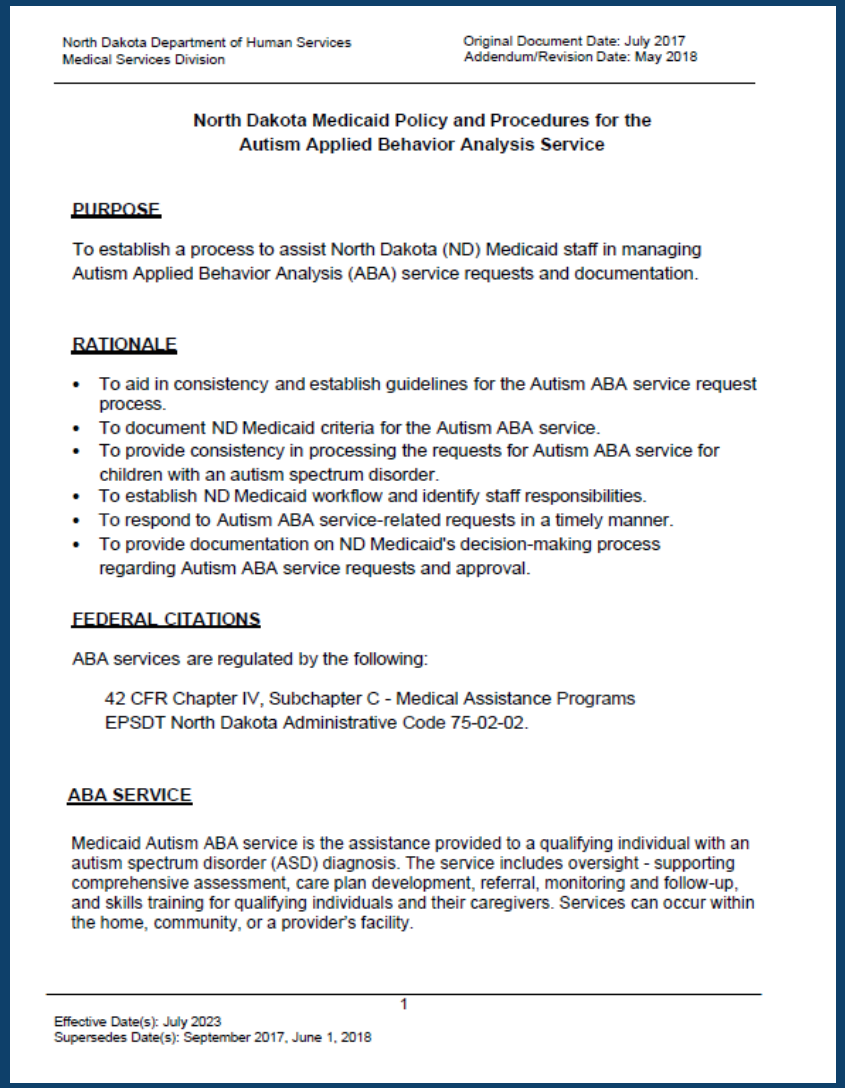
Autism



North Dakota Department of Human Services
Medical Services Division

Original Document Date: July 2017
Addendum/Revision Date: May 2018

North Dakota Medicaid Policy and Procedures for the Autism Applied Behavior Analysis Service

PURPOSE

To establish a process to assist North Dakota (ND) Medicaid staff in managing Autism Applied Behavior Analysis (ABA) service requests and documentation.

RATIONALE

- To aid in consistency and establish guidelines for the Autism ABA service request process.
- To document ND Medicaid criteria for the Autism ABA service.
- To provide consistency in processing the requests for Autism ABA service for children with an autism spectrum disorder.
- To establish ND Medicaid workflow and identify staff responsibilities.
- To respond to Autism ABA service-related requests in a timely manner.
- To provide documentation on ND Medicaid's decision-making process regarding Autism ABA service requests and approval.

FEDERAL CITATIONS

ABA services are regulated by the following:

42 CFR Chapter IV, Subchapter C - Medical Assistance Programs
EPSDT North Dakota Administrative Code 75-02-02.

ABA SERVICE

Medicaid Autism ABA service is the assistance provided to a qualifying individual with an autism spectrum disorder (ASD) diagnosis. The service includes oversight - supporting comprehensive assessment, care plan development, referral, monitoring and follow-up, and skills training for qualifying individuals and their caregivers. Services can occur within the home, community, or a provider's facility.

1

Effective Date(s): July 2023
Supersedes Date(s): September 2017, June 1, 2018

Applied Behavioral Analysis (ABA) is a service covered under the Medicaid State Plan for students with an Autism Spectrum Disorder (ASD) diagnosis from their primary care provider or licensed medical care provider qualified to diagnose ASD.

Autism Services webpage

Home / Child and Family Services / Autism Services

Autism Services

Medicaid State Plan ASD Services

Applied Behavioral Analysis (ABA) Service policy and procedures *(July 2023)*

- Fact Sheet: Medicaid Autism Applied Behavioral Analysis Service *(Updated January 2019)*
- N.D. Medicaid Autism Fee Schedule *(July 1, 2022)*
- ABA Services Provided in the Schools *(Posted March 2018)*

Contact
Katherine Barchenger, Autism Services Coordinator
North Dakota Health and Human Services
Medical Services Division
600 E. Boulevard Ave., Dept. 325
Bismarck, ND 58505
Phone: (701) 328-4630
Toll-Free: (800) 755-2604
711 TTY
Fax: (701) 328-1544
Email: dhsautism@nd.gov

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Behavioral Health Rehabilitative Services

Policy

- Assessments
- Group/Individual Counseling
- Skill Introduction/Improvement
- Intensive In-Home for Children
- Crisis intervention

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Behavioral Health Rehabilitative Services

- Screening, Triage, and Referral Leading to Assessment
- Behavioral Assessment
- Crisis Intervention
- Nursing Assessment and Evaluation
- Behavioral Health Counseling and Therapy
- Individual or Group Counseling
- Intensive In-home for Children
- Skills Restoration
- Skills Integration
- Behavioral Intervention
- Assessment for Alleged Abuse and/or Neglect and Recommended Plan of Care (formerly known as Forensic Interview)

Member eligibility

The following requirements must be met before behavioral health rehabilitative services can be provided through the Medicaid program:

Member must be Medicaid-eligible

Service must be recommended by a practitioner of the healing arts (this means a prescribing professional)

- within the scope of their practice under state law, and applicable regulations

Member must need mental health or behavioral intervention services

- provided by qualified practitioners

Member eligibility, cont'd

Member must have **at least 1 of the following circumstances**:

- Be at risk of entering or reentering a mental health facility or hospital and demonstrate a score of 25 or above based on the WHODAS 2.0*; **and/or**
- Need substance use disorder treatment services; **and/or**
- Have a mental health disorder and be from a household that is in crisis and at risk of major dysfunction that could lead to disruption of the current family makeup; **and/or**
- Have a mental health disorder and be in family that has experienced dysfunction that has resulted in disruption of the family.

*You can contact the Customer Support Center for assistance from a Human Service Zone with the WHODAS 2.0. It can be done via telehealth.

Email: applyforhelp@nd.gov
Phone: 1.866.614.6005

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Provider qualifications

Service must be recommended by a practitioner of the healing arts

This requirement is unique in that it allows for the leverage of a broader workforce to deliver the services.

Medicaid requirements - behavioral health rehabilitative services can be delivered by unlicensed practitioners so long as they are qualified to furnish services and their qualifications include a brief summary of

- Certification,
- Registration,
- Education,
- Training, or
- Experience; and
- Applicable supervisory requirements for unlicensed practitioners.

Qualified Providers

Other Licensed Providers (OLPs)	Non-OLP Providers
Licensed Clinical Social Workers (LCSWs)	Licensed Baccalaureate Social Workers (LBSWs)
Licensed Professional Clinical Counselors (LPCCs)	Licensed Master Social Workers (LMSWs)
Licensed Professional Counselors (LPCs)	Licensed Exempt Psychologist
Licensed Marriage and Family Therapists (LMFTs)	Licensed Associate Professional Counselor (LAPC)
Licensed Addiction Counselors (LACs)	Registered Nurses (RN)
Psychologists (excluding school psychologists)	Behavioral Modification Specialists
	Mental Health Technicians

Non-OLP Provider Table

Provider Types	Licensure/ Certification Authority	Education/ Degree Required
Licensed Exempt Psychologist	Eligibility for licensure exemptions as determined by the ND Board of Psychologist Examiners	
Behavior Modification Specialist (BMS)		Master's degree in psychology, social work, counseling, education, child development and family science, human services, or communication disorders. Or a bachelors' degree in one of the above fieldsand two years of work experience in the respective discipline. The work experience must be in a professional setting and supervised by a licensed practitioner in a related field.
Licensed Baccalaureate Social Worker (LBSW)	Licensure as a LBSW by the ND Board of Social Work Examiners.	
Licensed Master Social Worker (LMSW)	Licensure as a LMSW by the ND Board of Social Work Examiners.	
Registered Nurse (RN)	Licensure as a RN by the ND Board of Nursing.	
Licensed Associate Professional Counselor (LAPC)	Licensure as a LAPC by the ND Board of Counselor Examiners.	
Mental Health Technician (MHT)	Certification as a Mental Health Technician and supervised by a licensed practitioner within their scope of practice.	

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Provider limitations

OLP Providers

- May only bill for covered services allowed within their scope of practice
- Are not required to enroll as behavioral health rehabilitative service providers

Non-OLP Providers*

- Must enroll and submit appropriate attestation based on the provider type
- May only bill Medicaid for services indicated for their practitioner type on the behavioral health rehabilitative services table. (cannot bill under supervising practitioner's NPI)

*Practitioners who are governed by a state licensing board must follow the board's requirements for supervision.

Qualified Providers – Required Attestations

Behavioral Health Rehabilitative Service providers – LBSWs, LMSWs, Behavior Modification Specialists, Mental Health Technicians and RNs will need to complete the appropriate Attestations for their provider types. https://www.hhs.nd.gov/healthcare/medicaid/provider/enrollment-information

Individual Enrollment Information –

These are required to provide Behavioral Health Rehabilitative Services.

Required Documents

- Fax or Email Coversheet
- Individual Provider Form Packets
- Urgent Medicaid Expansion Prescriber Fill out and attach for Medicaid expansion enrollment.
- Licensed Addiction Counselor (LAC) Packet (1,925kb pdf)
- Licensed Associate Professional Counselor (LAPC) Packet (1.951kb pdf)
- LAPC Attestation (for LAPC applications and affiliations)
- Licensed Baccalaureate Social Worker (LBSW) Packet (1.946kb pdf)
- LBSW Attestation (for LBSW applications and affiliations)
- Licensed Master Social Worker Attestation (for Individual Provider Form applications and affiliations)
- Behavior Modification Specialist Attestation (for Individual Provider Form applications and affiliations)
- Mental Health Technician Attestation (for Individual Provider Form applications and affiliations)
- Physical Therapist Packet (1.933kb pdf)
- Registered Nurse Packet (2.27mb pdf)
- Non-Emergent Medical Transportation Checklists (2,194kb pdf)
- Targeted Case Management Checklists and Attestations (2045kb pdf)
- 1915(i) Checklists and Attestations (2.152kb pdf)

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Enrollment Maintenance

https://www.hhs.nd.gov/healthcare/medicaid/provider/enrollment-information

Additional Information and Resources

Enrollment Maintenance −

Fax or Email Coversheet

Instructions: How to Update Contact Information in MMIS Web Portal

Add Affiliation (583kb pdf)

Sample Affiliation Form (121kb pdf)

Terminate Affiliation (no longer providing services) (562kb pdf)

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Service Name	Definition of Services	Billing Code
Skills Restoration	Skills restoration is a time-limited service that assists an individual with restoring needed and desired skills such as daily living/independent living skills to improve the functional impairments affected by the individual's behavioral health diagnoses and symptoms to meet rehabilitation goals. Skills restoration is a systematic series of instructional activities, which include a mixture of education, confirmation, and demonstration of learned skills and capacity for observed learning over time to ensure lasting results that translate to the living environment. Skills restoration interventions used should be based on evidence-based practice. Skills restoration is considered an individual service and if provided in a group setting, must be billed with the appropriate modifiers. Services are limited to four hours per day and must be within each practitioner's scope of practice in accordance with licensure and certification. If additional services are medically necessary, the provider may request service authorization from the North Dakota Medicaid Program.	H2014*
Skills Integration	A service designed to support an individual in the community in their efforts to apply and integrate those life skills that have been learned in their therapy programs. The individual typically requires support for cueing/modeling of appropriate behavioral and life skills to maximize their skills and prevent need for higher levels of care. The service reduces disability and restores an individual to previous functional levels by assisting the individual in ongoing utilization and application of learned skills in normalized living situations. This strengthens the skill development that has occurred and promotes skill integration in various life roles. Services are limited to four hours per day and must be within each practitioner's scope of practice in accordance with licensure and certification. If additional services are medically necessary, the provider may request service authorization from the North Dakota Medicaid Program. Skills integration is considered an individual service and if provided in a group setting, must be billed with the appropriate modifiers.	H2017*

Service Table

- Service name
- Description
- Code & Indicators
  - If service may be provided in an individual or group setting
  - If service can be delivered via telehealth

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Code	Service Name	OLPs - include LCSWs, LPCCs, LPCs, LMFTs, LACs, and psychologists	LBSW	LMSW	Licensed Exempt Psychologist	LAPC	RN	BMS	MHT
H2014 *	Skills Restoration	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x	x	x	
H2017	Skills Integration	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x		x	x
H2019	Behavioral Intervention	OLPs may bill for covered Rehabilitative Services within their scope of practice.			x			x	
99499 (must append modifier 32)	Assessment for Alleged Abuse and/or Neglect and Recommended Plan of Care (formerly known as Forensic Interview)	OLPs may bill for covered Rehabilitative Services within their scope of practice.	x	x		x			

* Service may be provided in individual or group setting. If group setting is provided, modifier UA must be appended to the line and the reimbursement will be 25% of the allowed amount.

^ Service may be delivered via telehealth. See the Telehealth chapter in the ND Medicaid General Information for Providers Manual for more info.

ABBREVIATIONS:
BMS - Behavior Modification Specialist
LAC - Licensed Addiction Counselor
LAPC - Licensed Association Professional Counselor
LBSW - Licensed Baccalaureate Social Worker
LCSW - Licensed Clinical Social Worker
LMFT - Licensed Marriage and Family Therapist
LMSW - Licensed Master Social Worker
LPC - Licensed Professional Counselor
LPCC - Licensed Professional Clinical Counselor RN - Registered Nurse
MHT - Mental Health Technician
OLP - Other Licensed Practitioner

Provider Table

- Service name
- Providers eligible to deliver the service indicated by

x

- Code & Indicators
  - If service may be provided in an individual or group setting
  - If service can be delivered via telehealth

Health Tracks Benefit (ages 0 to through age 20)

Help ensure families of Medicaid-eligible students know about the Health Tracks (EPSDT) benefit which offers early and periodic screening, treatment, and diagnostic services to get each child the health care they need when they need it.

Help ensure students get their annual screenings! Treatment referrals coming out of these screenings ensure kids get needed care and that any issues are identified sooner rather than later.

Health Tracks Information for Members or Families webpage

Did you know? – Health Tracks

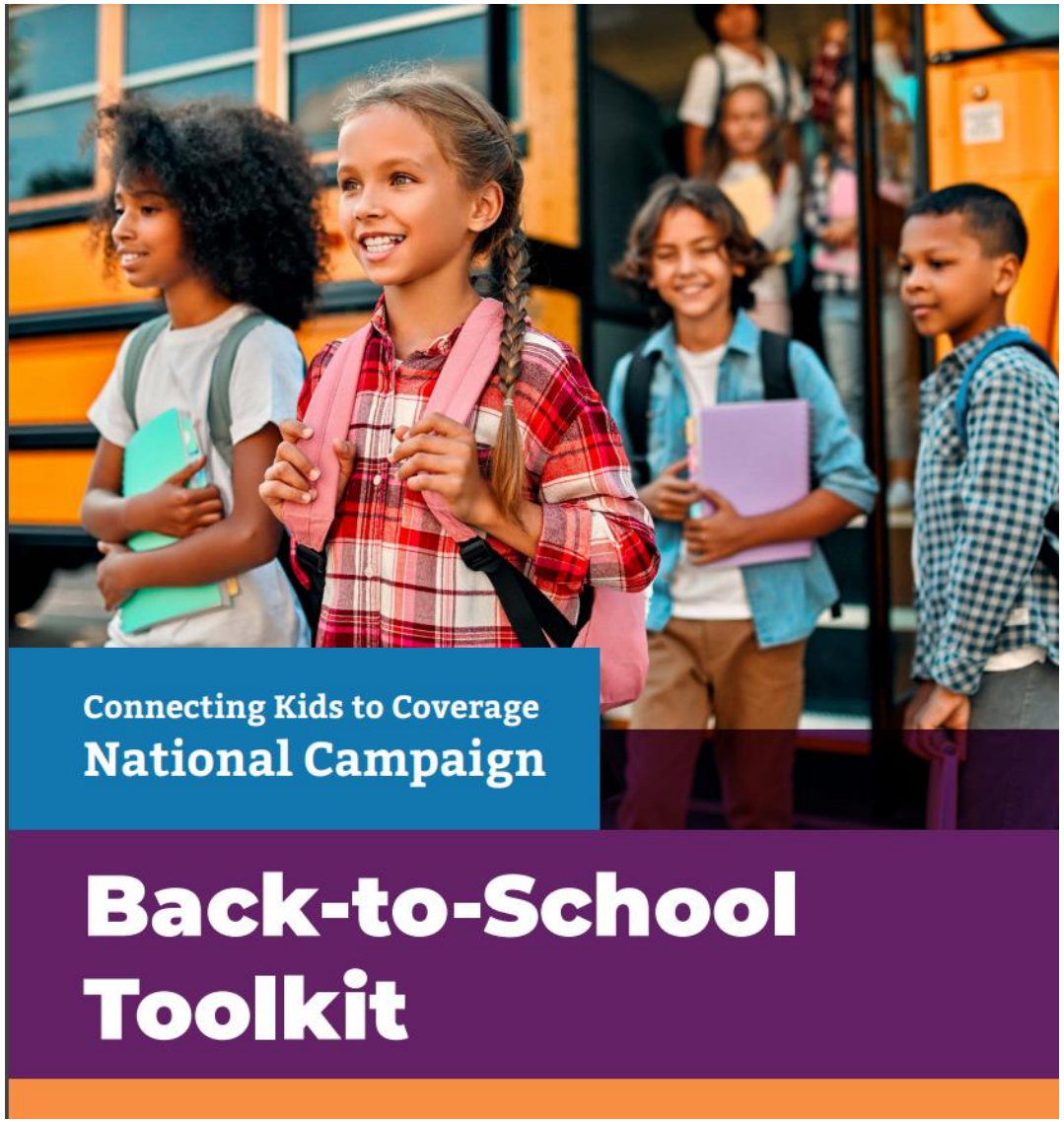
ND Health Tracks Member Outreach will:

- Assist families in finding a provider
- Provide interpretation services so families can visit with a Health Tracks team member
  - Call (701) 328-2014 (then press 1) or email HTmemberoutreach@nd.gov

Families can contact the Customer Support Center for transportation assistance.

- Call (866) 614-6005 or email applyforhelp@nd.gov

Partnering to increase well-child screenings and school wellness



Back to school time is a great time to encourage families to get their children in for a well-child visit!

All children, Medicaid and non-Medicaid eligible, benefit from regular visits with a primary care provider.

Download and use the Connecting Kids to Coverage Back to School Toolkit (click image)

https://www.insurekidsnow.gov/initiatives/back-school-school-based-outreach/index.html

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Checklists

School Medicaid Checklist

- ❑ Visit ND Medicaid's Provider webpage for resources on Enrollment, Education & Training, Guidelines & Policies, and School-Based Care
- ❑ Review this presentation for other helpful resources
- ❑ Complete enrollment paperwork if your school is not currently billing Medicaid or reactivate your enrollment if you haven't billed for a while
  - ❑ If you are billing IEP and non-IEP services, ensure you have separate National Provider Identifiers and that you have a separate non-IEP enrollment with ND Medicaid
- ❑ Determine if your school will self-bill using the web portal/MMIS or use a billing agent
- ❑ If your school will be self-billing ND Medicaid claims, please see the Billing and Claims portion of our Education and Training website

Billing Checklist

- ❑ Verify the student is Medicaid-eligible on the date of service
- ❑ Verify that the rendering (provider delivering the service) provider is Medicaid-enrolled (and affiliated, if applicable) on the date of service
- ❑ Ensure that the service is covered by ND Medicaid and identify whether it is an IEP or non-IEP service
  - ❑ Make sure to bill non-IEP services under the school's non-IEP enrollment so that the Medicaid Match does not apply
- ❑ If a claim is denied, double check the first two checkboxes
- ❑ If a claim is rejected, check for third-party insurance and bill if appropriate

Medicaid Contacts

Provider Enrollment
Phone: 701-277-6999
Fax: 701-433-5956
NDMedicaidenrollment@noridian.com

Send written inquiries to:
Noridian Healthcare Solutions
ATTN: ND Medicaid Provider Enrollment
PO Box 6055
Fargo, ND 58108-6055

Provider Relations
For questions about recipient eligibility, payments, denials or general claims questions:
(800) 755-2604 or (701) 328-7098

Send written inquiries to:
Provider Relations
Medical Services
ND Dept. of Human Services
600 E Boulevard Ave Dept. 325
Bismarck ND 58505-0250

Call Center
For questions about member eligibility, payments, denials or general claims questions:
(701) 328-7098
(877) 328-7098
or e-mail inquiries to:
mmisinfo@nd.gov

Surveillance/Utilization Review
To report suspected Medicaid provider or recipient fraud and abuse:
(701) 328-4024 or (800) 755-2604
medicaidfraud@nd.gov

Send written inquiries to:
Fraud & Abuse
Surveillance/Utilization Review
Medical Services
ND Dept. of Human Services
600 E Boulevard Ave Dept. 325
Bismarck, ND 58505-0250

Third Party Liability
For questions about private insurance, Medicare, or other third-party liability:
(800) 755-2604 or (701) 328-2347

Send written inquiries to:
Third Party Liability Unit
Medical Services
ND Dept. of Human Services
600 E Boulevard Ave-Dept 325
Bismarck ND 58505-0250
or e-mail inquiries to:
medicaidtpl@nd.gov

Prior Authorization Contacts

Behavioral Health (701) 328-7068 (ph)
(701) 328-1544 (fax)

1915(i) Services nd1915i@nd.gov

Client Eligibility
Enrolled Providers can access eligibility information through the MMIS web portal at
https://mmis.nd.gov/portals/wps/portal/EnterpriseHome

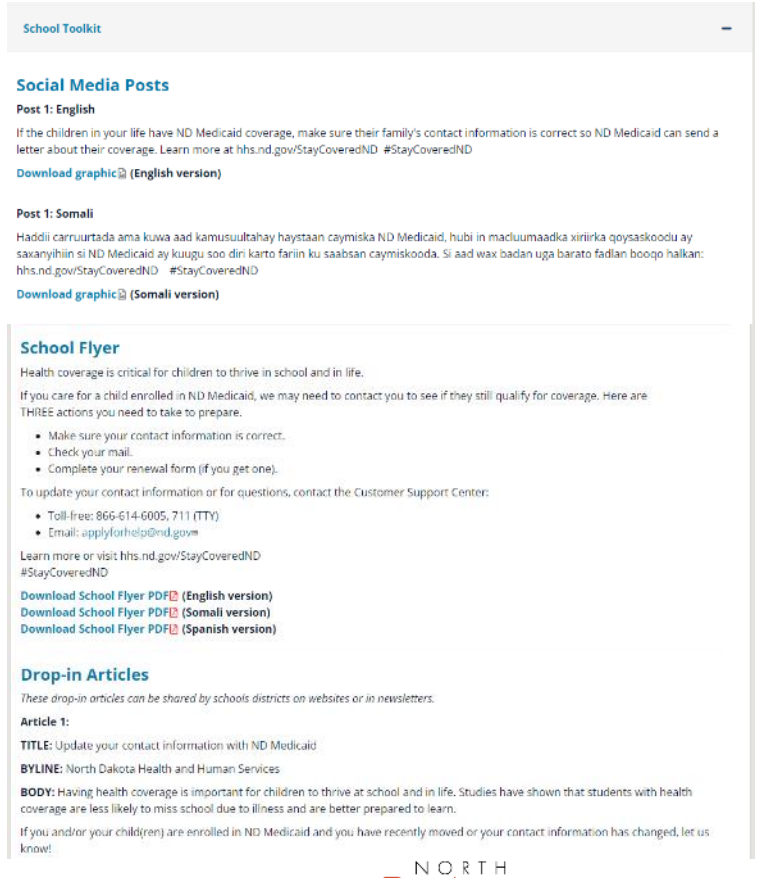
To verify recipient eligibility call:
(701) 328-2891 or (800) 428-4140

Health Tracks Member Outreach

Call (701) 328-2014 (then press 1) or email HTmemberoutreach@nd.gov

Stay Covered ND – how schools can help children stay covered!

https://www.hhs.nd.gov/human-services/medicaid/StayCoveredND



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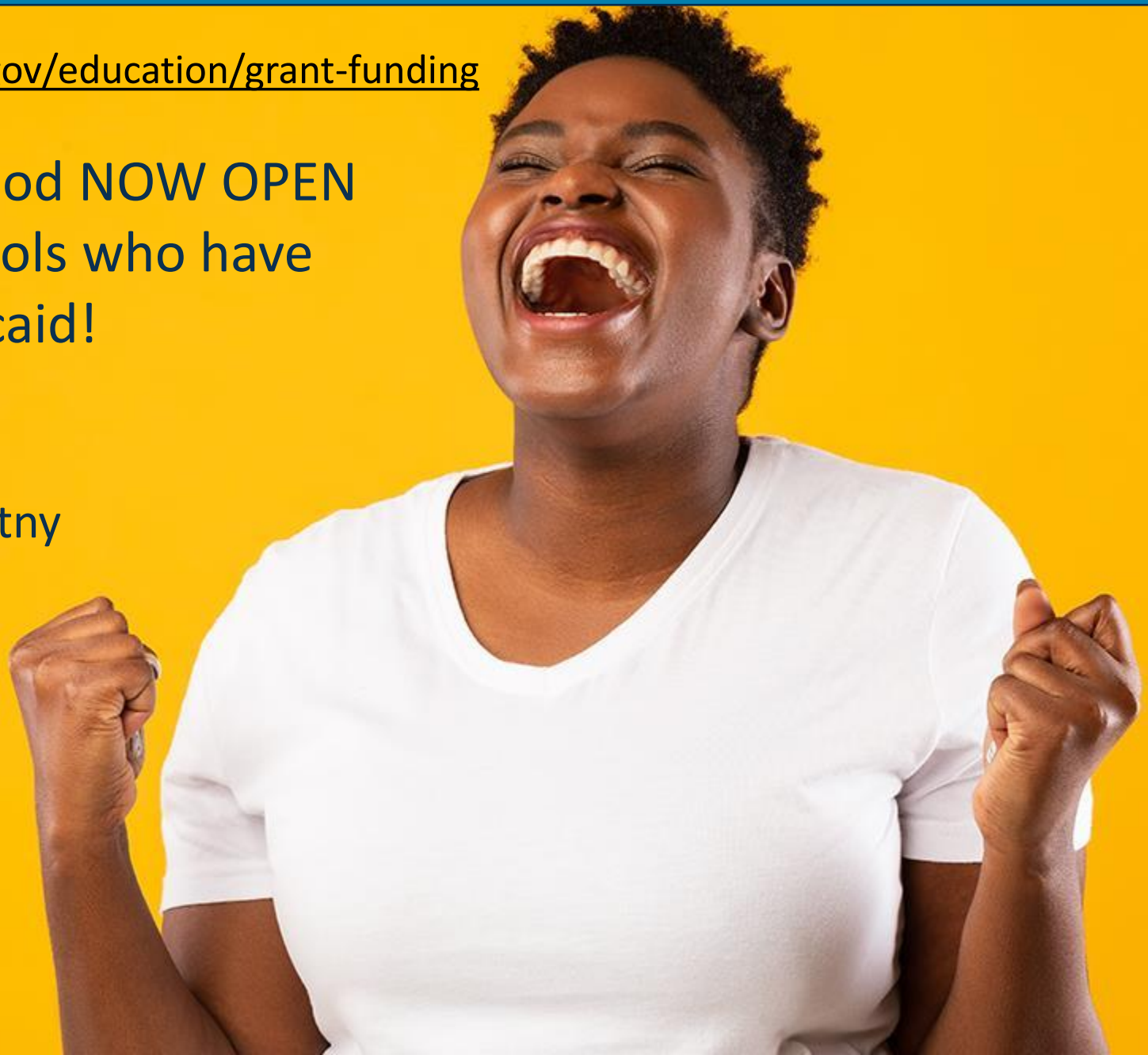
School Behavioral Health Grant time!

https://www.hhs.nd.gov/education/grant-funding

Application period NOW OPEN for eligible schools who have billed ND Medicaid!

Questions?
Contact Kayla Stastny
kastastny@nd.gov



Resources

ND Medicaid Policies webpage.

ND Medicaid Reimbursement Fee Schedules
https://www.hhs.nd.gov/healthcare/medicaid/provider/fee-schedules

Make sure you are signed up for quarterly Medicaid Provider newsletters. Signing up is easy.

Go to the Provider website

https://www.hhs.nd.gov/healthcare/medicaid/provider

Enter your email address

Sign Up for our Medicaid Newsletter

To sign up for updates or to access your subscriber preferences, please enter your contact information below.

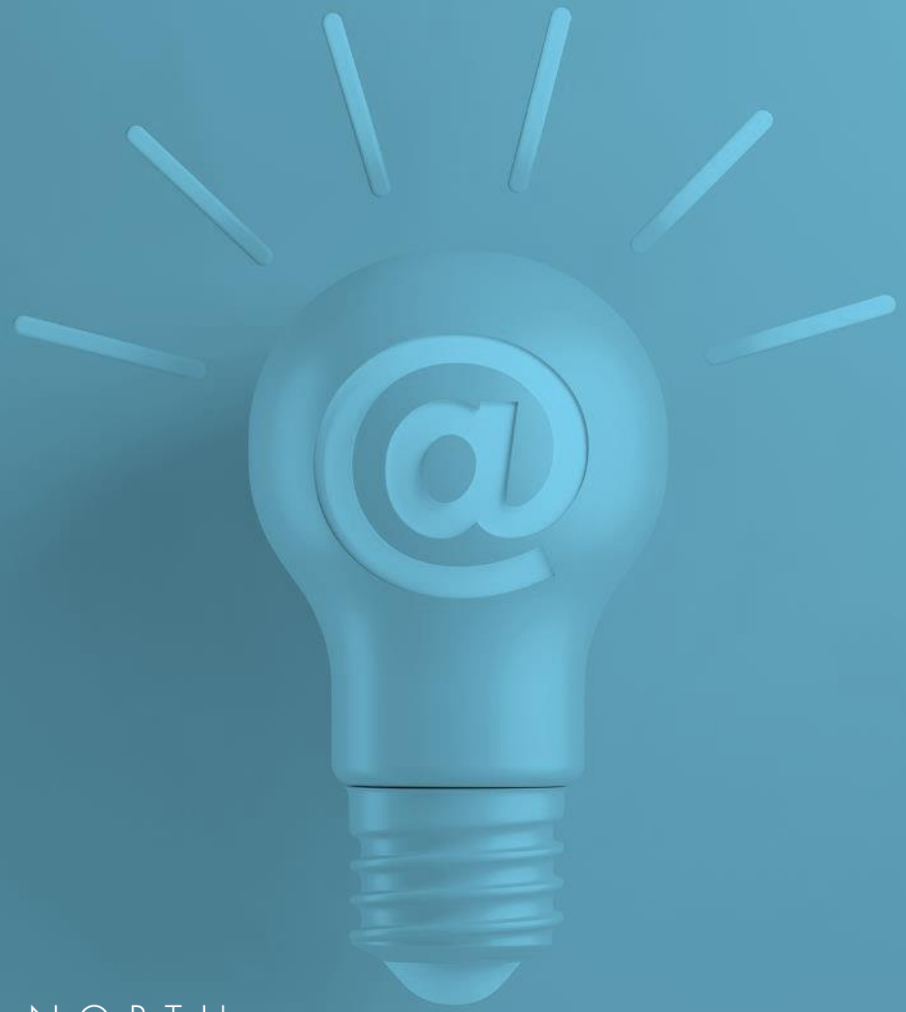
* Email Address

Submit

Click Submit and follow directions to set up and choose your subscription options.

- [ ] **Medicaid**
  - [x] Medicaid Newsletter
  - [ ] News - Medicaid

Stay in the loop!



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Contact

Mandy Dendy mrdendy@nd.gov
Coverage Policy Director – Medical Services

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Final Webinar in this Series:

1915(i) Services and Supports

Register here

9/28/2023 at10:00am CST

Presented by Monica Haugen