



# North Carolina Medicaid Bulletin

*An Information Service of the Division of Medical Assistance  
Published by EDS, fiscal agent for the North Carolina Medicaid Program*

Visit DMA on the Web at: [www.dhhs.state.nc.us/dma](http://www.dhhs.state.nc.us/dma)

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*Providers are responsible for informing their billing agency of information in this bulletin.*

**Attention: All Providers**

**H**oliday Observance

The Division of Medical Assistance (DMA) and EDS will be closed on Wednesday, July 4, in observance of Independence Day.

**EDS, 1-800-688-6696 or 919-851-8888**

**Attention: Nursing Facilities, ICF/MR Facilities, and Cost Report Preparers**

**D**ivision of Medical Assistance Audit Section Website

The Division of Medical Assistance (DMA) is developing a website, which will allow providers to download Medicaid cost reporting software. A completed diskette must be mailed to DMA's Audit Section within the same timeframe as in the past. Software will not be mailed to providers effective with the 2001 cost reports. A transition period during the first year of implementation will allow DMA's Audit Section to mail the diskette and user manual upon request. A hard copy of the certification letter will continue to be a requirement.

Providers and cost report preparers will be notified when development is completed and available for use.

**Harold Wiggins, Audit Section Chief**  
**DMA, 919-733-6390**

**Attention: All Providers Serving Medicaid Recipients in Guilford, Forsyth, Davidson, and Rockingham Counties**

**H**MHO Update

Effective July 1, 2001, United HealthCare of North Carolina, Inc. is no longer serving as an HMO to Medicaid recipients in Guilford, Forsyth, Davidson, and Rockingham counties. Therefore, HMO enrollment is not a Medicaid Managed Care option in these counties.

**Julia McCollum, Managed Care Section**  
**DMA, 919-857-4022**

**Attention: All Prescribers**

**A**llowable Days Supply to Change on Prescriptions

Effective July 1, 2001, the maximum days supply for all drugs, except birth control pills, will be changed from a 100-day supply to a 34-day supply. Up to a 100-day supply (three packs) of birth control pills will still be allowed. All new prescriptions will need to be changed to reflect this quantity limitation.

**Benny Ridout, Pharmacy Director**  
**DMA, 919-857-4020**

**Attention: Medicaid HMOs and Therapy Providers who Serve Children Enrolled in a Medicaid HMO**

**C**larification Regarding Therapy Services Provided to Medicaid HMO Enrollees

Except for therapy services that are billed with the place of service "99," physical therapy (PT), occupational therapy (OT), and speech therapy (ST) services provided to HMO-enrolled Medicaid recipients under the age of 21 are included in the capitation rates paid to the HMOs. Therefore, the HMOs are responsible for payment of all therapy services that are rendered in an office or home setting which is not school-related. The Division of Medical Assistance's definition of place of service "99" includes schools, head start programs, developmental daycare centers, and regular daycare centers. Therapy providers serving HMO-enrolled children must contact the HMO for authorization to provide nonschool-related services.

**Jency L. Abrams, RN, BSN, MS, Medical Policy Section**  
**DMA, 919-857-4020**

**Anne B. Rogers, RN, Managed Care Section**  
**DMA, 919-857-4022**

## Attention: All Providers

# Information on the Health Insurance Portability and Accountability Act

### What is HIPAA?

In response to the growing need for health care reform and cost reductions, on August 21, 1996, Congress enacted the Health Insurance Portability and Accountability Act of 1996 (HIPAA). HIPAA's Administrative Simplification provisions address the need for consistency throughout the health care industry and require the U.S. Department of Health and Human Resources to establish national standards for electronic data exchange while protecting the security and privacy of health care information.

While electronic health care transactions can be a more efficient way to process claims and payment information, providers are faced with many different health plans, each of which may have different coding and data content requirements. HIPAA will improve administrative efficiency and reduce operating costs for all health care providers by standardizing the data elements, code sets, and identifiers used throughout the health care industry.

The federal regulation introducing electronic health transaction standards became effective on October 16, 2000. These standards apply to:

- Eligibility information
- Health care claims
- Health care claim attachments
- Health care payments and remittance advices
- Health plan premium payments
- Referral authorizations
- Coordination of benefits
- First report of injury

The use of electronic technology to transmit health information has also created a need to address security and privacy issues. HIPAA seeks to protect the confidentiality of individual medical information by addressing privacy standards not only for electronic transactions but for verbal and paper exchanges as well.

The federal regulation establishing standards for the privacy of individually identifiable health information became effective on April 14, 2001. The regulation establishes accountability and responsibility for the disclosure of health information where the information is used to protect public health, to conduct medical research, and to improve the quality of consumer health care. Any health information that can be used to identify a person is covered by this regulation.

### Who Must Comply with HIPAA?

All health plan providers, payers, and clearinghouses that process health data **electronically** must comply with the national standards for electronic data transactions by October 16, 2002. Business associates who are contracted to perform a function on behalf of these entities must also comply with HIPAA regulations. Small health plans – those with less than \$5 million in annual receipts – have an additional 12 months to comply with the regulation.

HIPAA also requires health care plans, providers, clearinghouses, and contracted business associates to implement the provisions of the privacy regulation by April 13, 2003. Small plan providers have an additional 12 months to comply with the regulation.

**What is the N.C. Medicaid Program Doing to Comply with HIPAA?**

The N.C. Medicaid program is committed to implementing HIPAA regulations in a timely manner without disruption to the day-to-day business of providers enrolled with Medicaid or to the delivery of services to the citizens of North Carolina. Medicaid providers, as well as recipients, will benefit from the Division of Medical Assistance's enhanced ability to monitor utilization, costs, fraud, and the coordination of care.

As part of the process to implement HIPAA standards, the Division of Medical Assistance (DMA) is evaluating and will convert state-created codes to the standard national data sets listed below. Providers will be alerted to code conversions through articles in the monthly Medicaid bulletin.

- Diagnosis codes** – *International Classification of Disease, Ninth Edition, Clinical Modification (ICD-9-CM)*
- Medical procedure codes** – *Health Care Procedural Coding System (HCPCS) and Current Procedural Terminology, Fourth Edition (CPT-4)*
- Dental codes** – *Current Dental Terminology (CDT-3)*
- Drug codes** – *National Drug Codes (NDC)*

DMA staff have also completed an assessment of HIPAA's impact to the business units within DMA, and are working on the business and technical design in order to move forward with a plan to implement HIPAA standards. Once the conversion has been completed, DMA will be capable of receiving, processing, and sending standard transactions in accordance with HIPAA standards.

**What Should Providers Do to Ensure HIPAA Compliance?**

Providers are urged to begin evaluating their billing systems and privacy policies to ensure that they are in compliance with HIPAA for electronic transaction standards and privacy regulations by the implementation deadline dates of October 16, 2002 and April 13, 2003, respectively. Providers may want to begin or expand their use of electronic data interchange (EDI) as part of the evaluation process. The following guidelines will help providers begin the process of HIPAA implementation.

- Education** – Determine what type of training your staff need to facilitate changes to your business practices.
- Privacy and Security** – Designate a privacy officer for your organization.
- Documentation** – Evaluate and document policies and procedures related to the protection of health care information within your organization, including procedures for disaster recovery, facility security, workstation security, and access controls. Develop a notice of information practice.
- Individual Rights** – Allow individuals to inspect, copy, correct, and amend their protected health information.
- Disclosure** – Implement measures to account for disclosure of information for purposes other than treatment, payment or health care administration.
- Business Systems** – Evaluate your billing system for compliance.
- Electronic Data Interchange (EDI)** – Evaluate the benefits of using or expanding the use of EDI for business transactions.

**How to Get More Information**

Additional information on HIPAA regulations, transaction standards, and privacy and security issues can be found on the Health Care Financing Administration (HCFA) website at [www.hcfa.gov](http://www.hcfa.gov) or the U.S. Department of Health and Human Service's website at [www.aspe.os.dhhs.gov/admsimp/](http://www.aspe.os.dhhs.gov/admsimp/).

Information on EDI vendors can be obtained from the Electronic Commerce Unit at EDS by calling 1-800-688-6696 or 919-851-8888.

**Tom Lambert, HIPAA Coordinator**  
**DMA, 919-857-4013**

## Attention: All Prescribers

### Quantity Limits Put in Place for Oxycontin

Effective July 1, 2001, Medicaid will pay for a maximum of six tablets per day for all strengths of Oxycontin. Under the new 34-day supply limit, this means that a maximum of 204 tablets per month will be allowed.

Only in extreme cases will exceptions to this limit be approved. The prescriber will be required to submit a request for prior approval accompanied by documentation of medical necessity for this drug. This request must be signed by the prescriber and sent to the following address:

Benny Ridout, R.Ph  
Pharmacy Director  
Division of Medical Assistance  
2511 Mail Service Center  
Raleigh, NC 27699-2511  
FAX: 919-733-2796

An authorization code will be assigned to all prior authorizations that are approved. This code must be included on the prescription to notify the pharmacist that the prescription has been approved for dispensing.

**Benny Ridout, Pharmacy Director**  
**DMA, 919-857-4020**

Attention: Hospitals, Nursing Facilities, Physicians, Community Alternatives Program Providers, Area Mental Health Programs, ICF/MR Facilities, County Departments of Social Services, and Adult Care Home Facilities

## Change in FL2 and MR2 Process

Effective July 1, 2001, FL2 forms requesting prior approval for nursing facility level of care and MR2 forms requesting prior approval for ICF-MR level of care will no longer be routed initially through the recipient's county department of social services (DSS). **The signed FL2 or MR2 and any necessary attachments should be forwarded directly to EDS.** The new procedures are outlined below:

### 1. Prior Approval for Level of Care

- FL2s requesting nursing facility level of care prior approval must be sent directly to EDS once they have been signed and dated by the physician. Community Alternatives Program (CAP) case managers will send FL2s to EDS.
- MR2s requesting ICF-MR level of care prior approval must be sent directly to EDS once they have been signed and dated by the physician. MR2s also need to be signed by the single portal representative.

### 2. Level of Care Change Outside The Resident's Utilization Review Schedule

Nursing facilities requesting a level of care change outside the resident's regular utilization review schedule must send the signed and dated FL2 directly to EDS.

The original copy of the signed and dated FL2 or MR2 must be mailed to EDS at the address listed below within ten days of telephone or fax prior approval.

EDS  
Attn: Prior Approval  
P.O. Box 31188  
Raleigh, NC 27622

EDS will continue the current practice of sending the stamped pink and blue copies of reviewed FL2s and MR2s to the county department of social services (DSS) in which eligibility is maintained. Each DSS will continue forwarding these stamped FL2s and MR2s to the appropriate facility or CAP case manager.

These changes do not affect the current telephone or fax prior approval processes. **FL2s may still be telephoned in to EDS for preliminary approval. EDS will continue to accept MR2s only by fax or mail.**

**These changes do not affect FL2s needed for admission to adult care homes.** Completed FL2s for adult care home admission do not need to be approved by EDS and will continue to go directly to the county DSS.

For instructions on completing an FL2, refer to pages 6-4 through 6-6 of *the N.C. Medicaid Nursing Facility Manual*, June 2000 update. CAP program case managers may refer to the instructions on completing an FL2 in the CAP/AIDS, CAP/C or CAP/DA manuals and instructions for completing an MR2 in the CAP/MR-DD manual.

**EDS, 1-800-688-6696 or 919-851-8888**

## Attention: All Providers

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**EDS, 1-800-688-6696 or 919-851-8888**

## Attention: All Providers

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## ublication Request Form

### **Manuals and Handouts**

The form on page 13 lists bulletins, manuals, and handouts that are available for purchase from EDS. Please note that prices are subject to change. Some manuals (as indicated by an asterisk) can be downloaded at no charge from the Division of Medical Assistance's website at [www.dhhs.state.nc.us/dma](http://www.dhhs.state.nc.us/dma).

### **Bulletins**

Please note that past issues of the general Medicaid bulletin, beginning with January 2000, as well as special Medicaid bulletins, can be downloaded at no charge from the Division of Medical Assistance's website at [www.dhhs.state.nc.us/dma](http://www.dhhs.state.nc.us/dma). Printed versions of most bulletins are available through EDS Provider Enrollment. All bulletins are \$1.00 each, with the exception of the *Special Medicaid Bulletin II, Modifiers, April 1999*, which is \$4.00. If you would like to order a copy of a past bulletin, please complete and return the form below. Please note that not all past issues of the bulletin may be available.

**EDS, 1-800-688-6696 or 919-851-8888**

**PUBLICATION REQUEST FORM**

**NOTE: PHONE REQUESTS ARE NOT ACCEPTED**

**Manuals**

| Name of Manual             | Cost  | Number Ordered |
|----------------------------|-------|----------------|
| * Adult Care Home          | 7.00  |                |
| * Ambulance                | 6.00  |                |
| * Community Care/Revisions | 20.00 |                |
| * Dental                   | 10.00 |                |
| * DME/Revisions            | 11.00 |                |
| HIV-Case Management        | 11.00 |                |
| * Pharmacy                 | 6.00  |                |
| Hearing Aid                | 5.00  |                |
| * Hospital                 | 9.00  |                |
| Mental Health              | 7.00  |                |
| Physicians                 | 7.00  |                |
| Chiropractic               | 5.00  |                |
| Independent Practitioners  | 4.00  |                |
| Optical                    | 5.00  |                |

**Handouts**

| Name of Handout           | Cost  | Number Ordered |
|---------------------------|-------|----------------|
| Basic Medicaid            | 6.00  |                |
| Public Schools/Head Start | 6.00  |                |
| Personal Care Services    | 3.00  |                |
| OB/GYN                    | 6.00  |                |
| Health Check              | 5.00  |                |
| Hospital                  | 2.00  |                |
| Nursing Facility          | 6.00  |                |
| Dental                    | 1.00  |                |
| Dialysis                  | 6.00  |                |
| FQHC/RHC                  | 11.00 |                |

**Bulletins**

|  |      |  |
|--|------|--|
| Special Medicaid Bulletin II, Modifiers, April 1999                        | 4.00 |  |
| All other Special and General Medicaid Bulletins (indicate month and year) | 1.00 |  |

\* These manuals can also be downloaded free of charge from the Division of Medical Assistance's website at [www.dhhs.state.nc.us/dma](http://www.dhhs.state.nc.us/dma).

Amount of enclosed check: \$ \_\_\_\_\_

Provider Name \_\_\_\_\_

Provider Number \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

City, Zip Code \_\_\_\_\_

E-mail Address \_\_\_\_\_

Telephone Number (\_\_\_\_) \_\_\_\_\_

Fax Number (\_\_\_\_) \_\_\_\_\_

**Return to:      Provider Enrollment  
EDS  
P.O. Box 300009  
Raleigh, NC 27622**



# Travel Directions to the Personal Care Services Seminar Schedule

The registration form for the Personal Care Services Seminars is on page 14 of this bulletin.

## ***WILLIAMSTON, NORTH CAROLINA***

### **MARTIN COMMUNITY COLLEGE**

Highway 64 into Williamston. Martin Community College is approximately 1 to 2 miles west of Williamston. The Auditorium is located in Building 2.

## ***WINSTON-SALEM, NORTH CAROLINA***

### **RAMADA INN PLAZA**

I-40 Business to Cherry Street exit. Continue on Cherry Street for approximately 2 to 3 miles. Turn left at the IHOP Restaurant. The Ramada Inn Plaza is located on the right.

## ***WILMINGTON, NORTH CAROLINA***

### **COAST LINE CONVENTION CENTER**

Take I-40 East into Wilmington to Highway 17 – just off I-40. Turn left onto Market Street. Travel approximately 4 or 5 miles to Water Street. Turn right onto Water Street. The Coast Line Inn is located one block from the Hilton on Nutt Street behind the Railroad Museum.

## ***RALEIGH, NORTH CAROLINA***

### **WAKEMED ANDREWS CONFERENCE CENTER (FORMERLY MEI CONFERENCE CENTER)**

#### **Driving and Parking Directions**

Take the I-440 Raleigh Beltline to New Bern Avenue, exit 13A (New Bern Avenue, Downtown). Travel toward WakeMed. Turn left onto Sunnybrook Road.

Parking is available at the former CCB Bank parking lot, a short walk to the conference facility. The entrance to the Conference Center is at the top of the stairs to WakeMed's Andrews Conference Center.

Parking is also available on the **top two levels** of Parking Deck P3. To reach this deck, exit the I-440 Beltline, exit 13A. Proceed to the Emergency entrance of the hospital (on the left). Follow the access road up the hill to the gate for Parking Deck P3. After parking in P3, walk down the hill past the Medical Office Building and past the side of the Andrews Conference Center. Turn right at the front entrance of the building and follow the sidewalk to the Conference Center entrance.

**Illegally parked vehicles will be towed.** Parking is **not** permitted at East Square Medical Plaza, Wake County Human Services, the P4 parking lot or in front of the Conference Center.

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### Checkwrite Schedule

|               |                 |                    |
|---------------|-----------------|--------------------|
| July 10, 2001 | August 7, 2001  | September 5, 2001  |
| July 17, 2001 | August 14, 2001 | September 11, 2001 |
| July 26, 2001 | August 23, 2001 | September 18, 2001 |
|               |                 | September 27, 2001 |

### Electronic Cut-Off Schedule

|               |                 |                    |
|---------------|-----------------|--------------------|
| July 6, 2001  | August 3, 2001  | August 31, 2001    |
| July 13, 2001 | August 10, 2001 | September 7, 2001  |
| July 20, 2001 | August 17, 2001 | September 14, 2001 |
|               |                 | September 21, 2001 |

*Electronic claims must be transmitted and completed by 5:00 p.m. on the cut-off date to be included in the next checkwrite. Any claims transmitted after 5:00 p.m. will be processed on the second checkwrite following the transmission date.*

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Paul R. Perruzzi, Director  
Division of Medical Assistance  
Department of Health and Human Services



Ricky Pope  
Executive Director  
EDS



P.O. Box 300001  
Raleigh, North Carolina 27622

**Presorted Standard**

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