



February 2018 NC Medicaid Bulletin Digest

[SPECIAL BULLETIN: Telephonic Evaluation and Management for Influenza Effective Feb. 26, 2018](#)

MONDAY, FEBRUARY 26, 2018

In response to the higher than normal number of influenza cases and influenza-related complications and deaths, North Carolina Medicaid is offering telephonic evaluation and management services to beneficiaries who are actively experiencing flu-like symptoms. The purpose of this service is to assist primary care providers assessing established patients over the telephone to gather additional information.

[More](#)

[SPECIAL BULLETIN: Correction: Flovent HFA Inhaler Moved to Preferred Status on the Preferred Drug List](#)

FRIDAY, FEBRUARY 23, 2018

The Special Medicaid Bulletin, Generic Dispensing Rate Adjustments and Flovent HFA Inhaler Moved to Preferred Status on the Preferred Drug List, had an incorrect date in the first sentence. Here is the article with the correct information.

[More](#)

[Updates to Clinical Coverage Policy 5A-2: Non-invasive Ventilator Policy](#)

THURSDAY, FEBRUARY 8, 2018

Clinical Coverage Policy 5A-2, Respiratory Equipment and Supplies, is updated to add policy guidelines for home ventilators with a non-invasive interface and to add HCPCS codes E0466 to the Durable Medical Equipment and Supplies fee schedule as a continuous rental.

[More](#)

[Pharmacy Behavioral Health Clinical Edits](#)

THURSDAY, FEBRUARY 8, 2018

Effective May 1, 2017, new pharmacy point of sale clinical edits for behavioral health medications were applied for pediatric and adult beneficiaries.

[More](#)

[Clinical Coverage Policies 3D - Hospice Services Policy Update](#)

THURSDAY, FEBRUARY 8, 2018

Effective Jan. 15, 2018, updates to [Clinical Coverage Policy 3D, Hospice Services](#), are approved. The amended policy is posted to the North Carolina Medicaid website.

[More](#)



[NCTracks Provider Training Available in February 2018](#)

THURSDAY, FEBRUARY 8, 2018

Registration is open for the February 2018 instructor-led provider training courses listed below. Slots are limited.

[More](#)

[Update to HIV Case Management Program](#)

THURSDAY, FEBRUARY 8, 2018

This article covers: Clinical Coverage Policy 12B and State Plan Amendment, 2018 Recertification Process, Stakeholder Engagement and, History and Purpose of HIV Case Management Services.

[More](#)

[Sterilization Consent Form Status and Denial Reasons Accessible to Facility Providers](#)

THURSDAY, FEBRUARY 8, 2018

Facility providers can now access Sterilization Consent Form status, including denial reasons, on the secure NCTracks Provider Portal.

[More](#)

[Clinical Coverage Policies \(February 2018\)](#)

THURSDAY, FEBRUARY 8, 2018

The following new or amended combined North Carolina Medicaid and NC Health Choice clinical coverage policies are available on North Carolina Medicaid's [Clinical Coverage Policy web pages](#).

[More](#)

[Update to Family Planning Services Policy](#)

THURSDAY, FEBRUARY 8, 2018

Effective April 1, 2018, when performing a wet mount screening, providers serving Family Planning Medicaid (MAFDN) beneficiaries shall bill procedure code 87210 (smear, primary source with interpretation; wet mount for infectious agents [e.g., saline, India ink, KOH preps]).

[More](#)

[Avoid Delays in the Processing of Provider Enrollment Applications](#)

THURSDAY, FEBRUARY 8, 2018

If a provider's enrollment application or Manage Change Request (MCR) is clean and does not contain errors, it will process more quickly. The NCTracks Enrollment Team identified common errors that cause delays in processing applications and MCRs.

[More](#)



[Provider Guidelines for Post-Payment Audits](#)

THURSDAY, FEBRUARY 8, 2018

At various times of the year, Medicaid providers may receive notification of participation letters from the DMA Office of Compliance and Program Integrity which facilitates audits from various auditing agencies, e.g. Office of the Inspector General, Office of Internal Auditor, and Office of State Auditor.

[More](#)

[Update to NC Medicaid Electronic Health Record Incentive Program \(February 2018\)](#)

THURSDAY, FEBRUARY 8, 2018

Providers have until April 30, 2018, to submit a complete and accurate attestation for Program Year 2017.

[More](#)

[Rituximab \(Rituxan\) HCPCS code J9310 Rituximab, 100 mg, injection: Billing Guidelines](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-2, Rituximab (Rituxan), within the Physician Drug Program.

[More](#)

[Billing Guidelines: Methacholine chloride \(Provocholine\), HCPCS Code J7674](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with date of service June 1, 2016, the North Carolina Medicaid and NC Health Choice programs cover methacholine chloride (Provocholine) administered as inhalation solution, for use in the Physician's Drug Program when billed with HCPCS code J7674 (Methacholine chloride, neb, per 1 mg).

[More](#)

[Billing Guidelines: Gallium Ga 68 dotatate injection, for intravenous use kit \(NETSPOT\), HCPCS Code A4641](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with date of service, June 1, 2016, the North Carolina Medicaid and N.C. Health Choice programs cover NETSPOT for use in the Physician's Drug Program when billed with HCPCS code A4641, radiopharmaceutical, diagnostic, not otherwise classified.

[More](#)



[IncobotulinumtoxinA \(Xeomin\) HCPCS code J0588 incobotulinumtoxinA, 1 unit: Billing Guidelines](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with the date of service of April 31, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-1, Botulinum Toxin Treatment, within the Physician Drug Program.

[More](#)

[Billing Guidelines: Delafloxacin for injection, for intravenous use \(Baxdela\) HCPCS code J3490](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with date of service, Nov. 15, 2017, the North Carolina Medicaid and NC Health Choice programs cover delafloxacin for injection, for intravenous use (Baxdela), for use in the Physicians Drug Program when billed with HCPCS code J3490 - Unclassified Drugs.

[More](#)

[AbobotulinumtoxinA for injection, for intramuscular use \(Dysport\) HCPCS code J0586 - Injection, abobotulinumtoxinA, 5 units: Billing Guidelines](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with the date of service of April 31, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-1, *Botulinum Toxin Treatment*, within the Physician Drug Program.

[More](#)

[Billing Guidelines: Rolapitant injectable emulsion, for intravenous use \(Varubi\) HCPCS code J3490](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with date of service Nov. 15, 2017, the North Carolina Medicaid and NC Health Choice programs cover rolapitant injectable emulsion, for intravenous use (Varubi) for use in the Physician's Drug Program when billed with HCPCS code J3490 - Unclassified drugs

[More](#)

[Botulinum Toxin Type A \(Botox\) HCPCS code J0585 Botulinum Toxin Type A, per unit: Billing Guidelines](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with the date of service April 30, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-1, Botulinum Toxin Treatment, within the Physician Drug Program.

[More](#)



[Billing Guidelines: Zoster Vaccine Recombinant, Adjuvanted, Suspension for Intramuscular Injection \(Shingrix\) CPT code 90750](#)

WEDNESDAY, FEBRUARY 7, 2018

Effective with date of service Nov. 8, 2017, the North Carolina Medicaid program covers zoster vaccine recombinant, adjuvanted, suspension for intramuscular injection (Shingrix) for use in the Physician's Drug Program (PDP) when billed with CPT code 90750 - Zoster (shingles) vaccine, (HZV), recombinant, sub-unit, adjuvanted, for intramuscular injection.

[More](#)

[Iron Sucrose \(Venofer\) HCPCS code J1756: Billing Guidelines](#)

TUESDAY, FEBRUARY 6, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and Health Choice programs will be terminating Clinical Policy 1B-3, Intravenous Iron Therapy, within the Physician Drug Program.

[More](#)

[Iron Dextran \(INFeD\) HCPCS code J1750: Billing Guidelines](#)

TUESDAY, FEBRUARY 6, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-3, *Intravenous Iron Therapy*, within the Physician Drug Program.

[More](#)

[Updates to Pharmacy Prior Approval Submissions](#)

MONDAY, FEBRUARY 5, 2018

On Jan. 28, 2018, the NC Department of Health and Human Services (DHHS) implemented updates to NCTracks pharmacy prior approval (PA) requests for North Carolina Medicaid and NC Health Choice beneficiaries.

[More](#)

[Updates to Clinical Coverage Policy 5B Orthotics & Prosthetics: Compliance with Federal Regulation, 42 CFR, Part 455.410, and Final Rule 42 CFR, Part 440.70](#)

MONDAY, FEBRUARY 5, 2018

The following updates are in effect for the Orthotics & Prosthetics (O&P) policy to comply with the Centers for Medicare and Medicaid Services (CMS) Attending, Rendering, Ordering, Prescribing or Referring Providers Federal Regulation, [42 CFR, Part 455.410](#), and to clarify compliance with the CMS Home Health Final Rule, [42 CFR, Part 440.70](#).

[More](#)



[Ferric Carboxymaltose \(Injectafer\) HCPCS code J1439: Billing Guidelines](#)

MONDAY, FEBRUARY 5, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-3, Intravenous Iron Therapy, within the Physician Drug Program.

[More](#)

[Ferumoxytol, for treatment of iron deficiency anemia, injection \(Feraheme\) HCPCS code Q0138: Billing Guidelines](#)

MONDAY, FEBRUARY 5, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and N.C. Health Choice programs will be terminating Clinical Policy 1B-3, Intravenous Iron Therapy, within the Physician Drug Program.

[More](#)

[Accreditation Due Date Reminder](#)

MONDAY, FEBRUARY 5, 2018

By Feb. 28, 2018, non-accredited nursing service providers previously providing services under the Community Alternatives Program for Children (CAP-C) waiver must obtain accreditation and meet all required occupational licensing entity regulations.

[More](#)

[Verification of School Nursing Form and Instructions Added](#)

MONDAY, FEBRUARY 5, 2018

The Verification of School Nursing Form – Attachment I (DMA-3171), and Instruction Sheet (DMA-3171-I) are now on the NC Medicaid [PDN forms web page](#).

[More](#)

[Sodium Ferric Gluconate Complex in Sucrose \(Ferrlecit\) HCPCS code J2916: Billing Guidelines](#)

THURSDAY, FEBRUARY 1, 2018

Effective with the date of service of April 30, 2018, the North Carolina Medicaid and Health Choice programs will be terminating Clinical Policy 1B-3, Intravenous Iron Therapy, within the Physician Drug Program.

[More](#)