

# October 2019 NC Medicaid Bulletin Digest

# Billing Code Update

### **TUESDAY, OCTOBER 1, 2018**

NC Medicaid has received calls concerning claim denials for some services provided by nurse practitioners (NPs) and physician assistants (PAs).

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# **Sterilization Consent Form**

# **TUESDAY, OCTOBER 1, 2019**

Providers were notified in the August Medicaid bulletin that as of May 1, 2019, the sterilization consent form was updated with an expiration date of April 30, 2022. The sterilization consent form found on the U.S. Department of Health & Human Services (HHS) website has been updated. Providers should now be using this version when submitting the sterilization consent form to the NC Medicaid fiscal agent.

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Billing for Nexplanon Implants - Long Acting Reversible Contraceptives (LARCs)

### **TUESDAY, OCTOBER 1, 2019**

Effective Oct. 1, 2019, two additional ICD-10 codes will be added to the LARC DRG reimbursement retroactive date of Oct. 1, 2018. Providers must bill with the following HCPCS code, and the appropriate ICD-10 PCS code on the inpatient hospital claim to receive the LARC DRG reimbursement.

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Updates to NC Medicaid Electronic Health Record (EHR) Incentive Program

# **TUESDAY, OCTOBER 1, 2019**

The NC Medicaid EHR Incentive Payment System (NC-MIPS) is only accepting Program Year 2019 Stage 3 Meaningful Use (MU) attestations. All eligible professionals (EPs) attesting in Program Year 2019 will be required to attest to Stage 3 MU and use a 2015 Edition of certified EHR technology (CEHRT).

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Updates to Clinical Coverage Policy 5A-3, Nursing Equipment and Supplies

### **TUESDAY, OCTOBER 1, 2019**

On Oct. 1, 2019, an amended version of Clinical Coverage Policy 5A-3, Nursing Equipment and Supplies, was posted to the North Carolina Medicaid website. In addition to correcting numbering, grammatical and style errors, several changes have been made.

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# ICD-10 Update for 2020

# **TUESDAY, OCTOBER 1, 2019**

The 2020 ICD-10 update will be in place effective Oct. 1, 2019 through Sept. 30, 2020, for provider use. Providers can access the list of ICD-10 codes on the Centers for Medicare and Medicaid Services (CMS) website.

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Procedures for Prior Authorization of Synagis® (palivizumab) for Respiratory Syncytial Virus Season 2019-2020

### TUESDAY, OCTOBER 1, 2019

The clinical criteria used by NC Medicaid for the 2019-2020 Respiratory Syncytial Virus (RSV) season are consistent with guidance published by the *American Academy of Pediatrics (AAP): 2018 – 2021 Report of the Committee on Infectious Diseases, 31st Edition.* This guidance for Synagis use among infants and children at increased risk of hospitalization for RSV infection is available online by subscription. The coverage season is Nov. 1, 2019, through March 31, 2020. Providers are encouraged to review the AAP guidance prior to the start of the RSV season.

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**Clarification on Family Supplementation of PCS Medicaid Benefit** 

### **TUESDAY, OCTOBER 1, 2019**

On Jan. 29, 2013, NC Medicaid issued a memorandum giving guidance on the subject of Guidance for Family Supplementing Payment to the Medicaid Benefit. Several adult care home (ACH) providers have recently referenced this memorandum when inquiring about payment supplements specifically related to the provision of Personal Care Services (PCS) to recipients of special assistance.

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Trastuzumab-anns for Injection, for Intravenous Use (Kanjinti™) HCPCS code J9999 - Not Otherwise Classified, Antineoplastic Drugs: Billing Guidelines

### **TUESDAY, OCTOBER 1, 2019**

Effective with date of service July 22, 2019, the North Carolina Medicaid and NC Health Choice programs cover trastuzumab-anns for injection, for intravenous use (Kanjinti<sup>™</sup>) for use in the Physician Administered Drug Program (PADP) when billed with Healthcare Common Procedure Coding System (HCPCS) code J9999 - not otherwise classified, antineoplastic drugs.

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**Clinical Coverage Policy Update** 

### TUESDAY, OCTOBER 1, 2019

Several new or amended clinical coverage policies are available on NC Medicaid's website.

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Bevacizumab-awwb injection, for Intravenous Use (Mvasi™) HCPCS Code Q5107 - Injection, Bevacizumab, (Mvasi™), 10 mg: Billing Guidelines

# **TUESDAY, OCTOBER 1, 2019**

Effective with date of service July 22, 2019, the North Carolina Medicaid and NC Health Choice programs cover bevacizumab-awwb injection, for intravenous use (Mvasi<sup>™</sup>) for adult use in the Physician Administered Drug Program when billed with HCPCS code Q5107 - Injection, bevacizumab, (Mvasi<sup>™</sup>), 10 mg.

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SPECIAL BULLETIN: Community Alternatives Program for Disabled Adults Waiver Renewed by CMS

# **TUESDAY, OCTOBER 1, 2019**

The Community Alternatives Program for Disabled Adults (CAP/DA) §1915(c) Home and Community-Based Services (HCBS) waiver application has been renewed by the Centers for Medicare and Medicaid Services (CMS), effective Nov. 1, 2019 through Oct. 31, 2024.

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