New Resource: Medicaid Pharmacy Program Opioid Management Webpage and Non-Opioid Alternative Chart

The Medicaid Pharmacy Program has developed a web page that provides links to resources for the treatment of substance use disorder and the use of opioids/non-opioids for the management of pain. This website can be found at: https://health.ny.gov/health_care/medicaid/program/opioid_management/.

The New York State Department of Health has developed the reference chart, “Medicaid Non-Opioid Alternative Treatment Options,” to aid in selecting non-opioid treatment options for the management of pain. This chart lists Federal Drug Administration (FDA)/Compendia-supported medications that can be used for pain management. This chart can be found at: https://health.ny.gov/health_care/medicaid/program/opioid_management/docs/non_opiod_alternatives_to_pain_management.pdf.

Links to these resources can also be found under the “Helpful Links” section of the New York State Medicaid Managed Care (MMC) Pharmacy Benefit Information Center website at: http://mmcdruginformation.nysdoh.suny.edu/news/.
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Transportation Provider Record Keeping Requirements: Use of Electronic Signatures

As indicated by the current provisions of the Medicaid Transportation Manual cited below, effective March 1, 2016 the New York State Department of Health (the Department) required that the records kept by transportation providers include: (1) the full printed name and signature of the driver providing the transport, and (2) the signed attestation of the driver that the trip was completed.

Effective February 1, 2019, the Department will allow transportation providers to comply with these record keeping requirements by: (1) substituting the written signature of the driver providing the transport with a unique identifying electronic signature, and (2) requiring drivers attest that the trip has been completed by using an electronic verification transmission that records both the trip drop-off and pick-up destination coordinates.

Therefore, the driver “clicking” to confirm trip completion verification at the end of each ride can be used as long as it satisfies the Department’s requirement for a “contemporaneous, complete, acceptable, verifiable” record that the driver has both provided the trip and attested to its completion to support Medicaid claims - and that the transportation provider can produce this documentation with an accurate, system-generated, unmodifiable date and time stamp for each leg of a billable trip, including the pickup and drop-off, for the required six-year period.

Please understand that use of the electronic signature option does not exempt transportation providers from any of the current record keeping requirements or prospective audit of such record keeping by enforcement agencies.

Medicaid Transportation Manual Record Keeping Requirements
In accordance with Title 18 NYCRR §504.3(a) and 517.3(b), transportation providers will be reimbursed only when contemporaneous, complete, acceptable, verifiable records are available upon request to the State in connection with an audit, investigation, or inquiry. The documentation below is required for every leg of a trip and must be maintained for a period of six years following the date of payment. If any of the required information is incomplete or deemed unacceptable or false, any relevant paid reimbursement will be recouped, and the provider may be subject to other statutory or regulatory liability, financial damages, and sanctions.

Ambulette, Taxi/Livery Providers
Effective March 1, 2016, in addition to historically required acceptable trip verification, the Department will now require the full printed name and signature of the driver providing the transport attesting that the referenced trip was completed. The full list of required trip verification information now includes, at a minimum:

- The Medicaid enrollee’s name and Medicaid identification number;
- The date of the transport;
- Both the origination of the trip and time of pickup;
- Both the destination of the trip and time of drop-off;
- The vehicle license plate number;
- The driver’s license number;
- The full printed name and signature of the driver providing the transport; and
- An attestation from the driver that the trip was completed.

Electronic Records
The use of electronic record-keeping methodology is becoming more prevalent. Transportation vendors using electronic methods to prepare and maintain contemporaneous documentation to support Medicaid claims must
produce documentation with an accurate system-generated, unmodifiable date and time stamp for each leg of a billable trip, including the pickup and drop-off, as well as driver attestation as required.

**Supplemental Documentation**
The following items presented as the only evidence of a trip are *not* considered acceptable documentation. However, these documents may be considered supplemental to additional required documentation and can be presented to supplement required documentation:

- A driver/vehicle manifest or dispatch sheet;
- Issuance of a prior authorization by an approved official with subsequent checkmarks;
- A prior authorization roster; or
- An attendance log from a day program.

For questions related to this policy please contact: medtrans@health.ny.gov.
Clarification: NYS Medicaid Fee-for-Service Retroactive Repricing Per Prior Changes Made to Pharmacy Reimbursement

Changes to the Medicaid fee-for-service (FFS) pharmacy reimbursement methodology were implemented on February 22, 2018, as noted in the January 2018 Medicaid Update. These reimbursement changes, which went into effect on April 1, 2017, were a result of the implementation of the Centers for Medicare and Medicaid Services (CMS) Covered Outpatient Drug Final Rule and the enacted State Fiscal Year (SFY) 2017/18 budget.

The New York State Department of Health (the Department) will start the process to retroactively adjust pharmacy claims that were adjudicated effective April 1, 2017 through February 21, 2018. The Department expects this repricing to take place over the course of several months and anticipates that it will be completed by the end of December 2019. Providers will begin to see adjustments beginning with remittance cycle 2159 on January 21, 2019 via the electronic format and January 23, 2019 for mailed.

Adjustments made to affected claims will be found on the remittance statement beginning with claim date April 1, 2017. Adjustments will progress forward from that date with each cycle completion. All remit types (Paper/PDF/835) will show a claim that retracts the initial payment, and then a new claim at the new amount. For Paper and PDF (Portable Document Format) remittance receivers, the edit “01999” will appear on the remit. For electronic remit (835) receivers, only the normal adjudication HIPAA (Health Insurance Portability and Accountability Act) codes will appear. Adjustments can be tracked by the claim dates.

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NY Medicaid Billing Training Available to Providers

Do you have billing questions? Are you new to Medicaid billing? Would you like to learn more about the Electronic Provider Assisted Claim Entry System (ePACES)? If you answered "yes" to any of these questions, please consider registering for a Medicaid billing training session. eMedNY (Electronic Medicaid of New York) offers various types of educational opportunities for providers and their staff. Training sessions are available at no cost to providers and include information regarding claim submission, Medicaid Eligibility Verification System (MEVS), and using the eMedNY website.

Seminars
Seminars provide a valuable opportunity to meet personally with CSRA (CSRA Inc.) eMedNY regional representatives in your area. Seminars are conducted as in-person training sessions with groups of providers and billing staff and are available at various locations throughout New York State. For a list of upcoming seminars by location please check the eMedNY website at: http://www.emedny.org/training/index.aspx.

Webinar Training
Webinar training sessions are also available online to give participants the opportunity to participate remotely from their computer and/or telephone. Webinars require registration. After registration is completed, attendees will receive an email with instructions and a link to join the online meeting at the designated time. No travel is required.

Many webinar sessions offer detailed instruction about Medicaid's free web-based program ePACES, which allows enrolled providers to submit the following types of transactions:

- Claims
- Eligibility Verifications
- Claim Status Requests
- Prior Approval/DVS Requests

A calendar with upcoming webinar dates and times, as well as registration links, is available on the eMedNY website at: http://www.emedny.org/training/index.aspx. The website is updated quarterly with new sessions.

eMedNY regional representatives look forward to working with you at an upcoming training session. If you are unable to access the internet to register or have questions about registration, please contact the eMedNY call center at: 1 (800) 343–9000.

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The New York Medicaid Electronic Health Record (EHR) Incentive Program promotes the transition to EHRs by providing financial incentives to eligible professionals (EPs) and hospitals. Providers who demonstrate Meaningful Use (MU) of their EHR systems are leading the way towards interoperability, which is the ability of healthcare providers to exchange and use patient health records electronically. The ultimate goal is to increase patient involvement, reduce costs, and improve health outcomes.

How does using EHR promote interoperability?
- Providers are ensuring that Protected Health Information (PHI) is private, secure, and easily usable by the patient, their family, and by other providers - current and future;
- There is full and easy access to all electronic health information that is authorized for such; and
- There is protection against information blocking – when a provider, vendor, or information technology (IT) developer knowingly and unreasonably interferes with the exchange and use of electronic health information. Examples of information blocking include: fees that make data exchange cost prohibitive; organizational policies that prohibit the exchange of information; or when patients or health care providers become “locked in” to a specific technology or health care network because data are not portable.

Important Note:
All EPs attesting to Payment Year (PY) 2019 Stage 3 MU must use 2015 Certified Electronic Health Record Technology (CEHRT).

Register in MURPH: Stage 3 Objective 8 (Public Health)
EPs must register their intent to submit data to the appropriate Public Health registries before or within 60 days from the start of their EHR Reporting Period. Providers who are using the EHR period starting January 1, 2019 for PY 2019 MU, must register by March 1st, 2019. EPs who previously registered with the Meaningful Use Registration System for Public Health (MURPH) must use or update their existing MURPH registration rather than start a new registration.

For questions please contact the New York Medicaid EHR Incentive Program Support Team at: 1-877-646-5410 (option 3), or via email at: MUPublicHealthHelp@health.ny.gov

NYS RECs
New York State (NYS) Regional Extension Centers (RECs) offer support to help providers meet their objectives. Answers to questions regarding the program and requirements, assistance on selecting and using CEHRT, or help meeting program objectives is available? NYS RECs offer free assistance for all practices and providers located within New York.

RECs were established nationwide to assist primary care providers in the adoption and meaningful use of EHRs. RECs work to optimize the use of EHRs so that providers can become meaningful users, engage in new health care transformation and quality initiatives, and participate in payment delivery reform programs. NYS has two RECs that provide support services to healthcare providers as they navigate the EHR adoption process and achievement of MU.

NYC REACH
New York City Regional Electronic Adoption Center for Health (NYC REACH) offers support services to providers located inside the five boroughs of New York City. NYC REACH supports and enhances the healthcare delivery system to improve population health by assisting New York City based independently-owned private practices, community health centers, and hospital-based ambulatory sites with adopting and implementing health
information systems, quality improvement, and practice transformation initiatives. To accomplish these goals, NYC REACH provides technical expertise and guides healthcare practices to utilize delivery models that emphasize care coordination, patient engagement, and community resource linkages.

For more information please visit the NYC REACH website at: https://www.nycreach.org. For questions related to NYC REACH please call 1-347-396-4888 or email pcip@health.nyc.gov.

NYeC
New York eHealth Collaborative (NYeC) offers support services to providers located outside the five boroughs of New York City. NYeC is a non–profit organization, working in partnership with the New York State Department of Health to improve healthcare collaboratively leading, connecting, and integrating health information exchange (HIE) across the state.

NYeC’s Healthcare Advisory Professional Services (HAPS) team supports providers in navigating the complex landscape of healthcare information technology provider assistance programs, incentives and penalties, vendor selection, attestation and quality measurement reporting, and health information exchange utilization. To date, the HAPS team has supported over 10,000 providers in practices of all sizes in implementing technologies and processes to improve healthcare delivery across New York State.

For more information please visit the NYeC website at: https://www.nyehealth.org. For questions related to NYeC please call 1-646-619-6400 or email hapsinfo@nyehealth.org.

Why Providers Should Complete the NY Medicaid EHR Incentive Program Satisfaction Survey
- The EHR program needs to know its providers so that it can give them the information and support that best suits their needs.
- The EHR program needs to know the topics that providers would like to see highlighted. The SRA Webinar was created based on EP feedback.
- The EHR program wants feedback on its services. Provider input on the EHR support line, website, and webinars is necessary to ensure services are at their peak.
- The survey is short – it takes less than two minutes to complete!

The EHR program values provider insight. The survey can be found at: https://www.surveymonkey.com/r/NY_EHR.

Education Series, Webinars, and Q&A Sessions
A calendar with the date and times of each webinar listed below, as well registration information, can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/ehr/calendar/. Available courses include: Meaningful Use Stage 3, 2018 MU Public Health Reporting, Security Risk Analysis (SRA), and NY Medicaid EHR Program Post-Payment Audit Education Series.

Meaningful Use Stage 3: This webinar provides guidance to Eligible Professionals (EPs) about the requirements to attest to MU Stage 3 for the NY Medicaid EHR Incentive Program. Topics covered include:
- Medicaid Eligibility Criteria
- Brief Overview of the Centers for Medicare and Medicaid Services (CMS) Regulations
- MU Objectives and Measures
- Clinical Quality Measures (CQMs)

2018 MU Public Health Reporting: This webinar will provide an in-depth review of the MU Modified Stage 2 and Stage 3 Public Health Reporting Objectives, which are available to EPs in 2018. The webinar will also include information on how EPs can meet the Public Health Reporting Objective in 2018.
Security Risk Analysis (SRA): This webinar provides guidance to EPs about the security risk analysis requirements to meet MU Measure 1: Protect Patient Health Information. Topics covered include:

- MU Objective 1: Protect PHI
- SRA Toolkit
- Safety Measures to Consider
- Common Considerations and Creating an Action Plan

NY Medicaid EHR Incentive Program Post-Payment Audit Education Series: NY Medicaid EHR Incentive Program has produced a series of Post-Payment Audit Educational tutorials to help you prepare in the event of a post-payment audit.

- Part 1: Audit Process Overview
- Part 2: Understanding the Audit Notification Email – Adopt, Implement, Upgrade (AIU)
- Part 3: Understanding the Audit Notification Email – Meaningful Use
- Part 4: Completing the Medicaid Patient Volume Spreadsheet
- Part 5: Submitting Documentation

Visit the Website
Additional information about the NY Medicaid EHR Incentive Program can be found at: https://www.health.ny.gov/ehr.

Website Highlight: The Frequently Asked Questions (FAQ) section is easy to navigate and has answers to a number of common questions. A link to the FAQ section can be found in the left-hand navigation menu of program home page. The FAQ section has been organized into the following categories: NY Medicaid EHR Incentive Program, Public Health Reporting, Post-Payment Audit Guidance, CMS EHR Incentive Program FAQ, and Archived FAQ. The FAQ section can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/ehr/faqs/phr.htm.

Information related to the following is also available:

- PY 2018 Requirements
  o Modified Stage 2
  o Stage 3
- 2017 MU MEIPASS Tutorial Series
- Eligible Hospital Requirements
- Public Health Reporting Objective Information
- Post-Payment Audit Guidance
- Frequently Asked Questions (FAQ)
- Document Repository
- Sign up to receive LISTSERV® messages
  o NY Medicaid EHR Incentive Program
  o MU Public Health Reporting

Questions? The EHR Incentive Program has a dedicated support team ready to assist. Please contact the program at: 1-877-646-5410 (Option 2) or via email at: hit@health.ny.gov.

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Provider Directory

Office of the Medicaid Inspector General:
For suspected fraud or abuse complaints/allegations, call 1-877-87FRAUD, (877) 873-7283, or visit www.omig.ny.gov.

Provider Manuals/Companion Guides, Enrollment Information/Forms/Training Schedules:
Please visit the eMedNY website at https://www.emedny.org/.

Providers wishing to listen to the current week’s check/EFT amounts:
Please call (866) 307-5549 (available Thursday PM for one week for the current week's amount).

For questions about billing and performing MEVS transactions:
Please call the eMedNY Call Center at (800) 343-9000.

Provider Training:
To sign up for a provider seminar, please enroll online at https://www.emedny.org/training/index.aspx. For individual training requests, call (800) 343-9000.

Beneficiary Eligibility:
Call the Touchtone Telephone Verification System at (800) 997-1111.

Medicaid Prescriber Education Program:
For current information on best practices in pharmacotherapy, please visit the following websites:
http://www.health.ny.gov/health_care/medicaid/program/prescriber_education/presc-educationprog
http://nypep.nysdoh.suny.edu/home

eMedNY
For a number of services including: change of address, updating an enrollment file due to an ownership change, enrolling another NPI, or revalidating an existing enrollment please visit: https://www.emedny.org/info/ProviderEnrollment/index.aspx and choose the appropriate link based on provider type.

Medicaid Electronic Health Record (EHR) Incentive Program questions?
Contact the New York Medicaid EHR Call Center at (877) 646-5410 for assistance.

Comments and Suggestions Regarding This Publication?
Please contact the editor, Georgia Wohnsen, at medicaidupdate@health.ny.gov.