



State of New Jersey
Department of Human Services
Division of Medical Assistance & Health
Services

NEWSLETTER

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TO: All Providers – **For Action**
Health Maintenance Organizations – **For Information Only**

SUBJECT: **New Affordable Care Act Requirements**

EFFECTIVE: Claims with service dates on or after January 1, 2013

PURPOSE: To notify all providers regarding new Affordable Care Act requirements for New Jersey Charity Care (NJCC)/NJ FamilyCare (NJFC)/Medicaid fee-for-service (FFS) beneficiaries effective January 1, 2013. The Patient Protection and Affordable Care Act (PPACA) of 2010 (42 CFR 455 Subpart E) requires that State Medicaid Programs utilize federally-approved databases to screen their provider files to identify ineligible providers of NJCC/NJFC/Medicaid FFS-covered healthcare services.

BACKGROUND: PPACA requires that all healthcare professionals who provide, refer, order, operate, or prescribe any type of service for a NJCC/NJFC/Medicaid FFS beneficiary enroll in the NJFC/Medicaid program by no later than January 1, 2013 as a 'non-billing' provider, unless already enrolled in the NJFC/Medicaid program as a 'billing' provider.

A 'non-billing' provider is a healthcare professional (i.e. physician or advanced practice nurse) who refers, orders, operates, prescribes, or attends to the medical needs of a FFS NJCC/NJFC/Medicaid beneficiary. A 'non-billing' provider is a healthcare professional who may prescribe a NJCC/NJFC/Medicaid-covered service, such as a medication; complete a physician order for a beneficiary's care; act as a referral source for a beneficiary or otherwise attend to a beneficiary's healthcare needs. Those professionals who only enroll in NJFC/Medicaid as a 'non-billing' provider are not eligible to receive payments from the NJCC/NJFC/Medicaid program. However, the enrollment of a professional who refers, orders, operates, prescribes, or attends to the medical needs of a FFS NJCC/NJFC/Medicaid beneficiary is required in order for a covered service to be paid to a 'billing' provider by the NJFC/Medicaid program or the NJ Charity Care fund.

For example, the physician who prescribes medication must be enrolled as a 'non-billing' provider or already be enrolled as a 'billing' provider in order for a pharmacy to receive payment for the medication dispensed.

Both “billing” and “non-billing” providers are authorized to refer, order, operate, prescribe or attend to the medical needs of a FFS NJCC/NJFC/Medicaid beneficiary.

The Patient Protection and Affordable Care Act (PPACA) of 2010 also requires all healthcare professionals participating in State Medicaid programs as ‘billing’ or ‘non-billing’ providers to be identified by the National Provider Identifier or NPI.

ACTION: Effective for FFS healthcare claims with service dates on or after January 1, 2013:

(1) Providers who refer, order, operate, prescribe or attend to the healthcare needs of NJCC/NJFC/Medicaid beneficiaries must be enrolled as either a participating ‘billing’ or non-participating ‘non-billing’ provider in the NJFC/Medicaid Program. A healthcare claim shall be denied FFS payment if the prescriber of the healthcare service is not enrolled as an eligible prescriber in the NJFC/Medicaid FFS Program. **A healthcare service is NOT a covered service when the referring, ordering, operating, prescribing or attending physician or advanced practice nurse is banned or otherwise not enrolled in the NJCC/NJFC/Medicaid program.**

(2) Healthcare claims shall be denied payment by the NJCC/NJFC/Medicaid programs when the NPI is not appropriately reported as part of a healthcare claim for any professional who refers, orders, operates, prescribes or attends to the healthcare needs of a NJCC/NJFC/Medicaid FFS beneficiary. **Failure to include a valid NPI on your claim shall result in a denial of your claim payment.**

Responses from the New Jersey Division of Medical Assistance and Health Services to commonly asked questions about the new PPACA requirements are provided below.

1. Who is a ‘fee-for-service’ (FFS) provider?

Fee-for-service (FFS) providers are enrolled as NJFC/Medicaid providers and provide covered benefits to NJCC/NJFC/Medicaid beneficiaries who are not enrolled in a Medicaid managed care plan (HMO). FFS providers are paid directly by Molina Medicaid Solutions, the State’s fiscal agent.

2. Why should I enroll in the NJFC/Medicaid program as a ‘non-billing’ provider?

When a FFS provider is requesting a NJCC/NJFC/Medicaid payment and the referring, ordering, operating, prescribing or attending practitioner reported on the claim is not enrolled as a NJFC/Medicaid provider, the FFS provider who rendered the prescribed, ordered or referred service **will not be paid** by the NJCC/NJFC/Medicaid program. The NPI of the ‘non-billing’ provider must be appropriately reported by the provider rendering a service on a healthcare claim, including pharmacy claims.

3. Is there a cost for enrolling in the NJFC/Medicaid program as a ‘non-billing’ provider?

There is no cost for enrolling in the NJFC/Medicaid program as a ‘non-billing’ provider.

4. If I am currently enrolled as an active ‘billing’ provider, do I have to re-enroll as a ‘non-billing’ provider?

No. Healthcare professionals who have submitted claims to the NJCC/NJFC/Medicaid programs in the last 18 months are considered active ‘billing’ providers. Active ‘billing’ providers who also refer, order, prescribe, or attend to the healthcare needs of a NJCC/NJFC/Medicaid beneficiary are not required to re-enroll in the NJFC/Medicaid program as ‘non-billing’ providers.

5. I currently participate with a NJFC/Medicaid HMO as a member of its provider network. I am not a provider in the NJFC/Medicaid FFS program. Am I still required to enroll as a ‘non-billing’ provider if I choose to refer, order or prescribe a service to a NJFC/Medicaid FFS beneficiary?

Yes. You are required to complete an abbreviated provider enrollment application, referred to as the ***Prescribing/Ordering/Referring/Attending Physician or Other Professional Application (Form FD-20B)*** that will be available on the web at www.njmmis.com (See Provider Enrollment Application). As of the writing of this Newsletter, the Application is available through a link under the Announcement Section of the home page.

A ‘non-billing’ provider may also call Molina Medicaid Solutions Provider Enrollment Unit at 609-588-6036.

6. If I intend to participate in the NJCC/NJFC/Medicaid program as a ‘non-billing’ provider and my NJFC/Medicaid provider number on file with the program is no longer active, do I still need to submit an enrollment application?

Yes, you will need to submit the Prescribing/Ordering/Attending Physician or Other Professional Application (FD-20B Rev. 11/16/2012) to establish “non-billing” provider status with the NJFC/Medicaid program. Your closed provider number will be re-activated and become your ‘non-billing’ provider number.

7. Is a ‘non-billing’ provider eligible to receive NJCC/NJFC/Medicaid FFS payments?

A ‘non-billing’ provider is not eligible to receive NJCC/NJFC/Medicaid FFS payments. Providers requesting payments from the NJCC/NJFC/Medicaid FFS programs must enroll as a ‘billing’ provider. To request a provider enrollment application for the purpose of billing Molina Medicaid Solutions to request NJFC/Medicaid payments, go to

www.njmmis.com (see Provider Enrollment Application) or call the Molina Medicaid Solutions Provider Enrollment Unit at 609-588-6036.

8. I am a medical resident practicing in a hospital setting. I refer, order, or prescribe both inpatient and outpatient services. What NPI should I report to a 'billing' provider?

Hospitals should continue to report the NPI of the supervising physician on hospital claims for inpatient services referred, ordered or prescribed by a medical resident practicing in a hospital setting. When a medical resident practicing in a hospital refers, orders or prescribes outpatient services, the resident may report his or her NPI; or the NPI of his or her supervising physician. For outpatient pharmacy services, the medical resident may also report the hospital NPI to the community pharmacy.

9. I am a physician assistant practicing in a hospital and/or community setting. I refer, order, or prescribe both inpatient and outpatient services. What NPI should I report to a 'billing' provider?

Hospitals should continue to report the NPI of the supervising physician on hospital claims for inpatient services referred, ordered or prescribed by a physician assistant in a hospital setting. For outpatient services referred, ordered, or prescribed by a physician assistant, the NPI of the supervising physician must be reported to the 'billing' provider rendering a healthcare service.

10. Are all attending physicians practicing in a hospital setting required to enroll in NJCC and/or the NJFC/Medicaid FFS program as a 'non-billing' provider?

Yes, all attending physicians providing healthcare services to NJCC/NJFC/Medicaid FFS beneficiaries in a hospital setting must enroll as a 'non-billing' provider in the NJFC/Medicaid program.

11. If I enroll as a 'non-billing' provider, will my name or practice be listed anywhere as a NJFC/ Medicaid billing provider on a State website or directory?

Your practice will not be listed on any public website as a NJFC/Medicaid billing provider. Access to a 'non-billing' provider directory will be provided only to those enrolled NJFC/Medicaid providers who need to bill the program for payment. The directory may be found through a secure portal on the State Fiscal Agent website, www.njmmis.com. The secured 'non-billing' directory will be accessible to billing providers sometime in December 2012.

12. Is my practice obligated to provide medical care to a NJFC/Medicaid FFS beneficiary if I enroll as a 'non-billing' provider?

Your practice is not obligated to provide medical care to a NJFC/Medicaid FFS beneficiary after enrolling in the NJFC/Medicaid program as a 'non-billing' provider.

Enrolling as a 'non-billing' provider only offers a practitioner the opportunity to refer, order, operate, prescribe or in some way attend to the medical needs of a NJFC/Medicaid FFS beneficiary without anticipating a payment from the NJFC/Medicaid program.

13. If a physician does not enroll as a 'non-billing' provider, will the hospital be paid by NJCC or the NJFC/Medicaid Program for inpatient or outpatient services provided by the hospital?

If a physician does not enroll as a 'non-billing' provider, the hospital will not be paid by NJCC and/or the NJFC/Medicaid FFS program for inpatient or outpatient services referred, ordered or prescribed by that attending physician.

14. How will the NJCC/NJFC/Medicaid program monitor compliance with the new PPACA requirements?

The hospital is required to report on hospital claims the National Provider Identifier (NPI) of the referring, ordering, prescribing, operating or attending physician. The NPI and/or the Medicaid Provider Number of the physician is used to determine if a physician is enrolled as a 'non-billing' provider.

15. What accommodations have been made by the NJFC/Medicaid program for situations where a prescriber of a pharmacy service has not completed his/her enrollment in NJFC/Medicaid as a 'non-billing' provider?

To minimize possible disruptions in pharmacy services on or after January 1, 2013, the Division is implementing a fifteen (15) day "grace period" for NJFC/Medicaid beneficiaries to receive medications in cases where the prescriber is not enrolled. FFS beneficiaries are eligible to receive up to a 30-day supply of any medications prescribed during the 15-day grace period.

The pharmacy may request that the prescriber contact the Molina Medicaid Solutions Provider Enrollment Unit at 609-588-6036 to determine the status of their enrollment application or to request a copy of the ***Prescribing/Ordering/Referring/Attending Physician or Other Professional Application (Form FD-20B)***.

Pharmacies or prescribers not yet enrolled as a 'non-billing' provider may also request prior authorization for any prescriptions in which (1) a drug quantity greater than 30 days is medically necessary; or (2) a prescription needs to be dispensed outside the 15-day grace period and the prescriber has not completed the enrollment process. The pharmacy or prescriber may contact the Molina Medical Exception Process (MEP) Unit at 877-888-2939 for prior authorization.

The New Jersey Division of Medical Assistance and Health Services (DMAHS) offers two (2) Provider Directories that may be used to identify prescribers authorized to

prescribe medications for NJFC/Medicaid FFS beneficiaries. Both Directories may be found at www.njmmis.com.

- A public web directory that identifies FFS “**billing**” **providers** that may be accessed by clicking on “Provider Directory”; choosing a “County”; choosing a “Provider Type”; and choosing “Organization Name or a Last Name.”
- A new web directory found in the secure area of the website that identifies FFS “**non-billing**” **providers (not accessible to the public)**. Providers not currently registered may register at www.njmmis.com to be assigned a UserName and Password to access the SECURE area of the website. After receiving authorization to access the SECURE area of the website, the pathway for accessing the “Provider Directory” for “**non-billing**” **providers** is the same as the public website. The secured ‘non-billing’ directory will be accessible to billing providers on or after January 1, 2013.

On the website homepage, there is also an explanatory message regarding the ACA requirements and a link to the ***Prescribing/Ordering/Referring/Attending Physician Or Other Professional Application*** (FD-20B 11/16/2012) for prescribers to enroll in Medicaid as “non-billing” providers.

If you have any questions concerning this Newsletter, please contact Molina Medicaid Solutions (formerly Unisys) Provider Services at 800-776-6334.

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