



Mississippi Medicaid Bulletin

Program and Policy Information

Volume 3, Issue 9

May 1997

Forrest and Stone Counties HealthMACS Workshops

Workshops

If you would like any additional information about the upcoming workshops for Forrest and Stone Counties, please contact the Managed Care Hotline at 1-800-627-8488.

The Mississippi Division of Medicaid and EDS staff will be conducting workshops and recruiting primary care providers (PCPs) for the Health through Medicaid Managed Access to Care and Services (HealthMACS) program. HealthMACS, a primary care case management program for AFDC/AFDC-related eligibles, will be implemented in **Forrest County on July 1, 1997** and in **Stone County on August 1, 1997**.

If you are interested in becoming a PCP for HealthMACS, the **9:00 a.m.** session will be geared toward PCPs and their billing staff. If you provide health care services to AFDC/AFDC-related Medicaid eligibles, your billing staff should attend the **1:00 p.m.** session. Due to the statewide implementation of HealthMACS, these will be the only workshops held in the area. **If you have not previously attended the workshops held in your area, it is very important that you attend now.**

The workshops will be held on Thursday, May 22, 1997 at the:

**University of Southern Mississippi
R. C. Cook Student Union
Hattiesburg, Mississippi
9:00 a.m. or 1:00 p.m.**

Workshops

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HealthMACS Workshops

The Mississippi Division of Medicaid and EDS staff will be in your area to conduct workshops and recruit primary care providers (PCP) for the managed care program Health Through Medicaid Managed Access to Care and Services (HealthMACS). HealthMACS, a primary care case management program for AFDC/AFDC-related Medicaid eligibles, will be implemented in selected counties in your area on **August 1, 1997**. The selected counties are: **Itawamba, Lee, Pontotoc, and Union**. HealthMACS links Medicaid eligibles with a PCP who is responsible for managing the health care needs of Medicaid eligibles assigned to him/her. HealthMACS offers better patient care by providing continuity of services and encouraging more appropriate use of the health care system.

The purpose of the workshops is to discuss the policies of the HealthMACS program, how it changes the way HealthMACS enrollees access care and services, and how medical care provided by health care specialists other than the PCP must be authorized by the PCP for Medicaid to reimburse for the services. Some Medicaid services are excluded from HealthMACS and do not require authorization by the PCP. These services include: podiatry, dental, psychiatry, ophthalmology, eyeglass, emergency services, nursing home, ICF/MR, and emergency/non-emergency transportation.

Medicaid providers who can be PCPs for HealthMACS are: family practitioners, general practitioners, pediatricians, obstetricians (OB), gynecologists (GYN), internists, and nurse practitioners (pediatric, adult, family, OB-GYN, and certified nurse midwives).

<p>If you are one of the provider types listed above, and are interested in being a PCP for HealthMACS, you and/or your representative may want to attend one of the workshops scheduled below. Detailed information about the HealthMACS program will be given during the workshop. PCP requirements and responsibilities will also be addressed. PCP applications and provider agreements will be available. Managed care provider representatives from EDS will be at the workshop to schedule one-on-one provider meetings, if you want such a meeting scheduled.</p> <p style="text-align: center;">May 28 & 29, 1997 - 9:00 a.m. Ramada Inn and Convention Center 854 North Gloster Street Tupelo, Mississippi</p>	<p>If you provide health care to AFDC/AFDC-related Medicaid eligibles in the counties listed above, you and/or representatives of your office/billing staff may benefit by attending one of the HealthMACS workshops scheduled below. If you are not sure you need to attend a workshop, please call the Managed Care Hotline, 1-800-627-8488, or the Division of Medicaid Managed Care staff, 1-800-421-2408, for additional information about the program and the workshops.</p> <p style="text-align: center;">May 28 & 29, 1997 -1:00 p.m. Ramada Inn and Convention Center 854 North Gloster Street Tupelo, Mississippi</p>
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If any additional information is needed, please contact the Managed Care Hotline at **1-800-627-8488**.



VFC Enrollment

The State Department of Health has taken responsibility for enrolling physicians/clinics for participation in the Vaccine for Children (VFC) Program. Clinics employing a group of physicians and/or nurse practitioners must take a second step to ensure that the Division of Medicaid is aware of all VFC participants. You must complete the MS Medicaid Provider Information Form. This document will ensure that each physician (or nurse practitioner) is assigned a Medicaid VFC indicator. With this indicator you will be assured of receiving Medicaid reimbursement for the administration of the VFC vaccines to Medicaid eligible children. If you have any questions about Medicaid Reimbursement for VFC vaccine administration, please call 359-6150.

New VFC Vaccines

The VFC Program has added inactivated polio vaccine (IPV) to the ACIP recommended schedule. Currently, Medicaid reimburses an administration fee for IPV using code W6119 (other ACIP recommended immunizations). Starting July 1, 1997, VFC providers should use the following codes for IPV:

- ~ W6026-Administration of IPV first dose
- ~ W6031-Administration of IPV second dose
- ~ W6036-Administration of IPV third dose
- ~ W6041-Administration of IPV fourth dose

For administration of whole cell DTP and DTP preparations containing acellular pertussis (DTaP) VFC providers should continue to bill using the following codes:

- ~ W6000-Administration of DTP/DTaP-first dose
- ~ W6005-Administration of DTP/DTaP-second dose
- ~ W6010-Administration of DTP/DTaP third dose
- ~ W6015-Administration of DTP/DTaP-fourth dose
- ~ W6020-Administration of DTP/DTaP-fifth dose

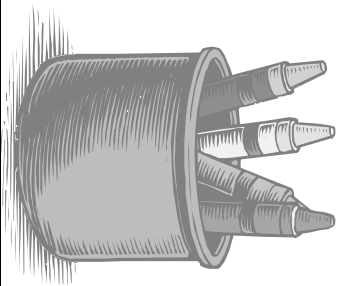
Varicella vaccine is now available through the VFC Program. The ACIP, AAP, and AAFP recommend administration of Varicella at 12-18 months of age. **Susceptible** children may receive Varicella vaccine during any visit **after the first birthday**, and unvaccinated persons who lack a reliable history of chickenpox should be vaccinated during the 11-12 year old visit. Susceptible persons ≥ 13 years of age should receive two doses, at least one month apart.

Use the following codes for administration of the Varicella vaccine:

- ~ W6086-Administration of Varicella 12-18 months
- ~ W6116-Administration of Varicella 1 year old-18 years old

Change in Immunization Reimbursement

Effective July 1, 1997, the reimbursement for the administration of immunizations through the VFC Program will be decreased to \$5.00 per vaccine administration. This reimbursement brings our state closer to the regional and national averages for vaccine administration.



Vaccine for Children Program

Pharmacy Reminders

1. The **EXACT** NDC numbers of the drugs dispensed must be used when filing a claim to Medicaid for payment.
2. All pharmacists must identify prescribers by provider numbers when submitting claims for payment.
3. Prenatal vitamins are covered only for obstetric patients.
4. "K" baby claims cannot be billed through POS.

**Diagnosis
and
Surgical
Procedure
Codes**

1997 ICD-9 Diagnosis and Surgical Procedure Codes

The new 1997 ICD-9 diagnosis and surgical procedure codes have been added to the Mississippi Medicaid system and are accepted effective April 1, 1997. The codes that have been deleted are not accepted after March 31, 1997.

CORRECTION-Managed Care and Certification for Inpatient Stays

There was an error in a phone number listed in the April Provider Bulletin. If a Medicaid recipient is in the HealthMACS program, inpatient certification is requested through the PRO at **1-800-844-0999**. This is the same as for Medicaid recipients who are not in managed care programs and is no different from what you are currently doing.

We apologize for any inconvenience caused by publication of the incorrect number.

**Reimbursement for Fetal Contraction
Stress and Non-Stress Tests**

A review of reimbursement for fetal contraction stress and non-stress tests in addition to reimbursement for an antepartum visit indicates that both the test and the visit will be reimbursed when medically indicated. Changes have been made so that the tests are no longer considered to be an integral part of an antepartum visit. Claims which have been denied may be resubmitted.



Mississippi Medicaid Bulletin

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<i>S</i>	<i>M</i>	<i>T</i>	<i>W</i>	<i>T</i>	<i>F</i>	<i>S</i>
				1	2	3
4	5 Checkwrite	6	7	8 ESC Cut-Off	9	10
11 <i>Mother's Day</i>	12 Checkwrite	13	14	15 ESC Cut-Off	16	17 <i>Armed Forces Day</i>
18	19 Checkwrite	20	21	22 HealthMACS Workshops 9 a.m. & 1 p.m. ESC Cut-Off	23	24
25	26 Memorial Day Observed Closed Checkwrite	27	28 HealthMACS Workshops 9 a.m. & 1 p.m.	29 HealthMACS Workshops 9 a.m. & 1 p.m. ESC Cut-Off	30	31

Checkwrites and Remittance Advices are dated every Monday. However, funds are not transferred until the following Thursday and Remittance Advices usually arrive the following Friday.