



MO HealthNet Division (MHD)

Rhonda Schenewerk

Provider Education Representative

Missouri Medicaid Audit and Compliance (MMAC)

Home and Community Based Services (HCBS)

Annual Update Meeting April 19, 20, 21- 2016

MO HealthNet Website Provider Participation Page

<http://dss.mo.gov/mhd/providers/index.htm>



Provider Participation

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- [Electronic Health Records Incentive Program](#)
- [Pre-Certification Criteria Documents](#)
- [Implementation of S010 and D.0](#)

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- [RA remark codes and claim adjustment reason codes](#)
- [Nursing Facility Claims FAQ](#)
- [MO HealthNet Training Workshops](#) updated 12/24/15
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- [Webinar Training](#) updated 01/04/16
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General Information

- [Exempt Diagnosis Table](#) updated 01/05/16
- [Fee Schedules](#)
- [Outpatient Hospital Radiology Fee Schedule](#) updated 05/10/15
- [MO HealthNet Guide — Puzzled by the Terminology?](#) updated 07/07/15
 - This printable guide explains the various MO HealthNet terms and codes.
- [Benefit Matrix](#)
 - shows the various benefits for each of the MO HealthNet programs, and if they also have cost sharing or any co-pays.
- [Provider FAQ](#)

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- [Civil rights, compliance information](#)
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<http://dss.mo.gov/mhd/providers/pages/bulletins.htm>

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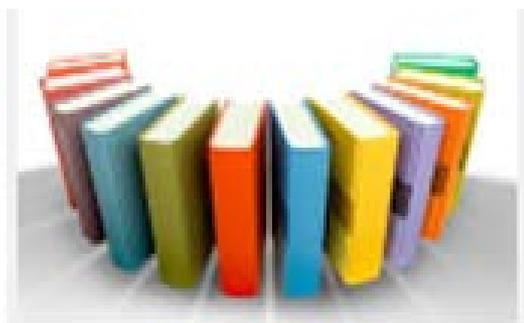
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AIDS Waiver

Adult Day Care Waiver

Adult Day Health Care - Note: This program ended June 30, 2013

Aged and Disabled Waiver

Ambulance

Ambulatory Surgical Center

Behavioral Health Adult Targeted Case Management

Behavioral Health Services

CSTAR

Community Psych Rehab Program

Comprehensive Day Rehab

DD Waiver Manual

Dental

Durable Medical Equipment

Environmental Lead Assessment

Hearing Aid

Home Health

Hospice

Hospital

Medically Fragile Adult Waiver

Nurse Midwife

Nursing Home

Optical

Personal Care

Pharmacy

Physician

Private Duty Nursing

Rehabilitation Centers

Rural Health Clinic Independent

Rural Health Clinic Provider-Based

School District Administration Claiming

School District Administrative Claiming Manual - Effective April 1, 2015

Therapy

Transplant

Youth Targeted Case Management



Hot Tips Webpage

<http://dss.mo.gov/mhd/providers/pages/provtips.htm>

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Provider Education (573) 751-6683



Email:

mhd.provtrain@dss.mo.gov

Register for Training Today!

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Audio/Visual Training

The audio/visual training tool allows you to view/listen to short presentations and tips at your own pace to help you better understand certain aspects of MO HealthNet billing. Basically, the trainings are PowerPoint presentations with a voice to explain each slide. All you need is a computer with Internet access and a sound card. As additional audio/visual trainings are developed, they will be added to this page. To get started, choose one of the trainings below:

If you do not have PowerPoint, you can download the [free PowerPoint viewer](#) 

Training on Proper Completion of Forms and/or Claims

- [Assistant Surgeon & Related Post-Operative Care](#)  file size: 1.72MB*
- [Determining Eligibility](#)  updated: 12/05/12 file size: 6.6MB*
- [Determining Eligibility](#)  read-only updated: 12/05/12 file size: 6.6MB*
- [Hospice Program: Forms & Certification](#) file size: 5.08MB*
- [Hysterectomy Consent Form](#) file size: 5.58MB*
- [Inpatient Medicare Part A Crossover Claim Filing on eProvider](#) 
updated: 03/13/12, file size: 3.36MB*
- [Medicare Part B Crossover Claim Filing](#)  updated: 06/05/12, file size: 5.13MB*
- [Medicare Part B of A Crossover Claim Filing](#)  updated: 03/13/12, file size: 5.31MB*
- [Multiple Surgical Procedures](#) file size: 2.45MB*
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- [PI-118 Form \(Restricted Participant Form\)](#) file size: 3.91MB*
- [Provider ICD-10 Resources](#)  file size: 3.82MB
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- [Psychology/Counseling Prior Authorization](#) file size: 5.64MB*
- [Sterilization Consent Form](#) file size: 5.43MB*



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Puzzled by the Terminology? A Guide for Providers

MO HealthNet

Missouri's Medicaid Program

MO HealthNet provides health care access to low income individuals that are elderly, disabled, members of families with dependent children, low-income children, uninsured children, pregnant women, refugees, or children in state custody. Adults in ME (Medical Eligibility) categories that pertain to persons who are in the Aid to the Blind or pregnant women receive a full comprehensive benefit package including primary, acute and preventive care, hospital care, dental, prescriptions, and vision. Adults other than those in the Aid to the Blind and pregnant women receive a limited benefit package of services depending on their ME category. Services are received through a fee-for-service (FFS) or managed care delivery system. Providers can determine whether members are covered by Managed Care or FFS by calling the Interactive Voice System (IVR) at 573-751-2896 and using option "1" or through the internet at <https://emomed.com>.

The MO HealthNet Fee-For-Service program serves participants not enrolled in MO HealthNet Managed Care, and provides some services not included in MO HealthNet Managed Care. All of Missouri's MO HealthNet providers are automatically enrolled as approved providers eligible to treat MO HealthNet FFS participants. Participants may freely choose which approved provider they go to for care under the FFS delivery system.

MO HealthNet Managed Care serves MO HealthNet Managed Care members in 54 counties of Missouri (see the chart below). MO HealthNet Managed Care members may be seen by any MO HealthNet FFS provider until the member's enrollment is effective in a MO HealthNet Managed Care health plan. MO HealthNet Managed Care members must select a MO HealthNet Managed Care health plan and a primary care provider (PCP) within the Managed Care health plan. Managed Care providers may refer the member to other providers based on care needed.

The ME codes for adults included in the MO HealthNet program are as follows:

Full Comprehensive Package

<u>ME Code</u>	<u>Description</u>
03	Aid to the Blind
12	MO HealthNet - Aid to the Blind
15	Supplemental Nursing Care - Aid to the Blind
18	MO HealthNet for Pregnant Women
43	Pregnant Woman - 60 Day Assistance (MHF criteria)
44	Pregnant Woman - 60 Day Assistance - Poverty
45	Pregnant Woman - Poverty
61	MO HealthNet for Pregnant Women - Health Initiative Fund (HIF)

Limited Benefit Package

<u>ME Code</u>	<u>Description</u>
01	Old Age Assistance
02	Blind Pension
04	Permanently and Totally Disabled
05	MO HealthNet for Families – Adult
10	Refugees other than Cuban, Haitian, Russian Jew, or Ethiopian
11	MO HealthNet Old Age Assistance

Limited Benefit Package Continued

<u>ME Code</u>	<u>Description</u>
13	MO HealthNet - Permanently and Totally Disabled
14	Supplemental Nursing Care – Old Age Assistance
16	Supplemental Nursing Care – Permanently and Totally Disabled
19	Cuban Refugee
21	Haitian Refugee
24	Russian Jew
26	Ethiopian Refugee
55	Qualified Medicare Beneficiary (QMB)
58	Presumptive Eligibility (Subsidized)
59	Presumptive Eligibility (Non-Subsidized)
80	Extended Women's Health Services
81	Temporary Assignment Category
82	Missouri Rx (MoRx) – (Medicare Part D wrap –around benefits)
83	Breast or Cervical Cancer Control Project (BCCCP) - Presumptive
84	Breast or Cervical Cancer Control Project (BCCCP) - Regular
85	Ticket to Work Health Assurance –Premium
86	Ticket to Work Health Assurance – Non-Premium
89	Uninsured Women's Health Services

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Services	MO HealthNet Health Plan Covered Services This column indicates whether the service is covered by MO HealthNet Managed Care Health Plans. To determine coverage for specific ME codes see additional columns.	MO HealthNet for Adults Medical Assistance for Families Transitional Medical Assistance Refugee Assistance	MO HealthNet for Pregnant Women	MO HealthNet for Kids Medical Assistance for Families Transitional Medical Assistance MO HealthNet for Newborns, Refugee Assistance State Custody, Foster Care, Adoption Subsidy Juvenile Courts	CHIP Kids (Birth through age 18) ≤ 150% FPL (71, 72) ≤ 185% FPL (73) Note 4 ≤ 225% FPL (74) Note 4 < 300% FPL (75) Note 4	Fee for Service Only MO HealthNet for Uninsured Women Women's Health Services	Fee for Service Only Traditional Medicaid Note 20
		ME Codes	ME Codes	ME Codes	ME Codes	ME Codes	ME Codes
		05, 10, 19, 21, 24, 26	18, 43, 44, 45, 61, 95, 96, 98	06, 07, 08, 29, 30, 36, 37, 38 40, 50, 52, 56, 57, 60, 62, 64, 65, 66, 68, 69, 70	71, 72, 73, 74, 75, 97	80, 89	01, 04, 11, 13, 14, 16, 85, 86
Applied Behavior Analysis (ABA)	No 12	Yes 26	Yes 26	Yes 26	Yes 26	No	Yes 26
Ambulance (emergency only)	Yes	Yes	Yes	Yes	Yes	No	Yes
Ambulatory Surgical Care	Yes	Yes	Yes	Yes	Yes	Limited 23	Yes
Birthing Center	Yes	Yes	Yes	Yes	Yes	No	Yes
Targeted Case Management - Foster Care	No 12	No	No	Limited 16	No	No	No
Targeted Case Management - HCY & Lead	Yes	No 5	No 5	Yes	Yes	No	No 5
Targeted Case Management - MRDD	No 12	Yes	Yes	Yes	Yes	No	Yes
Targeted Case Management - MI & SED	No 12	Yes	Yes	Yes	Yes	No	Yes
Targeted Case Management - Prenatal	Yes	Yes	Yes	Yes	Yes	No	Yes
Certified nurse practitioners	Yes	Yes	Yes	Yes	Yes	Limited 23	Yes
Community psychiatric rehabilitation services	No 12	Yes	Yes	Yes 3	Yes	No	Yes
Comprehensive day rehabilitation services for head-injured	Yes	No 5	Yes	Yes	Yes	No	No 5
Comprehensive substance treatment and rehabilitation	No 12	Yes	Yes	Yes 3	Yes	No	Yes
Dental	Yes	Limited 19	Yes	Yes	Yes	No	Limited 19
Dentures	Yes	No 5	Yes	Yes	Yes	No	No 5
Diabetes self management training	Yes	No 5	Yes	Yes	Yes	No	No 5
Durable medical equipment	Yes	Yes	Yes	Yes	Yes	No	Yes
Environmental lead assessments	No 12	No 5	No 5	Yes	Yes	No	No 5
Family planning	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hearing aid (audiology)	Yes	No 5	Yes	Yes	Yes	No	No 5
Home health	Yes	Yes 21	Yes	Yes	Yes	No	Yes 21
Hospice	Yes	Yes	Yes	Yes	Yes	No	Yes
ICF/MR	No	No	No	Limited 18	No	No	Yes
Inpatient hospital	Yes	Yes	Yes	Yes	Yes	No	Yes
Lab/X-ray	Yes	Yes	Yes	Yes	Yes	Limited 23	Yes
Non emergency medical transportation	Yes	Yes	Yes	Yes 3	Yes 14	No	Yes
Nurse midwife	Yes	Yes	Yes	Yes	Yes	Limited 23	Yes
Nursing facility	No	No	No	No	No	No	No
Optical	Yes	Yes 5,15	Yes 25	Yes	Yes	No	Yes 5,15
Orthodontics	Yes	No 5	No 5	Yes	Yes	No	No 5
Outpatient hospital	Yes	Yes	Yes	Yes	Yes	Limited 23	Yes
Personal care	Yes	Yes	Yes	Yes	Yes	No	Yes
Pharmacy Note 2	No 12	Yes	Yes	Yes	Yes	Limited 23	Yes
Physician/Certified Nurse Practitioner/clinic/FQHC/RHC	Yes 8	Yes	Yes	Yes	Yes	Limited 23	Yes
Podiatry	Yes	Yes	Yes	Yes	Yes	No	Yes
Private duty nursing	Yes	No 5	No 5	Yes	Yes	No	No 5
Psychologists	Yes 6	Yes	Yes	Yes	Yes	No	Yes
Rehabilitation Center	Yes	No 5	Yes	Yes	Yes	No	No 5
Social Workers/Counselors	Yes 6	Yes 5,11	Yes 5,11	Yes	Yes	No	Yes 5,11
Therapy-Occupational, Physical, & Speech (Independent Practice)	Yes 13	No 5	No 5	Yes	Yes	No	No 5
Transplants	No 7	Yes	Yes	Yes 17	Yes	No	Yes



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Department of Social Services
MO HealthNet Division

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- Provider Enrollment Application
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Inbound Trading Partner Agreement (eMomed BATCH Users only)

10/19/2015
Medicare Part C Batch claims can be submitted starting 10/19/15.

09/30/2015
ICD-10 MO HealthNet Provider Resources

07/05/2015
ERA Process for 835s posting to INET eMOMED

03/24/2015
Requesting & Accepting NPI Access

03/24/2015
eMOMED Training and Assistance Utilities

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Welcome to the New MO HealthNet Web Portal

The complete source for all MO HealthNet Participant and Provider related services.

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Public Survey

List of available surveys

i No Surveys available at this time.

Clinical Scenarios

Attention : Coders ICD-10 Survey
Clinical Scenarios to assist in gauging readiness for ICD-10 [Click Here!](#)

eProvider ePassport eMMIS MMS Apps Home / eProvider

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External Links

State of Missouri Web site
Department of Social Services
MO HealthNet Division

- Provider Information
- Provider Enrollment Application
- Participant Information

eProvider News

eNews

10/01/2015
Date Changes For ICD-10 Testing

09/30/2015
ICD-10 MO HealthNet Provider Resources

08/31/2015
835 Posting Dates based on 370 EFT & ERA
REA ASSOCIATION (CCD+835) RULE

07/02/2015
HIPAA Compliant Remittance Advice
Remark Codes (RAR/C) and Claim
Adjustment Reason Code (CARC)

03/25/2015
Removing a User's Access to an NPI

03/24/2015
Requesting & Allowing NPI Access

03/24/2015
eMOMED Training and Assistance Utilities

eProvider Welcome

Welcome to eProvider



	Claim Management Submit new claims. View claim status. Void/Replace existing claims.		Nursing Home Management Manage participants. Submit nursing home claims.
	Attachment Management Submit new stand-alone attachments. View attachment status.		File Management Send and receive batch files. Print/View/Download Remittance Advice.
	Participant Eligibility Verify participant eligibility.		Payment Information View the payment information for the two most recent payments.
	Prior Authorization Status Check the prior authorization status for participants.		Available Surveys
	Provider Communications Management Send Your Inquiries...		Provider Enrollment Status Verify Provider Eligibility.
	Participant Annual Review Date View participant annual review dates.		

Interactive Voice Response (IVR) (573) 751-2896

Determining Eligibility PowerPoint

<http://dss.mo.gov/mhd/providers/education/avtrain.htm>

Provider responsibility to verify eligibility on the date services are rendered

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	<p>Participant Annual Review Date View participant annual review dates.</p>		

Provider Communications Unit
(573) 751-2896

Providers Initial Contact for claim filing inquiries or questions, claims resolutions and disposition, and participant verification and questions.

Provider Communications Unit PO Box 5500 Jefferson City, MO 65102-2500

Contact: (888) 581-9797 or (573) 632- 9797

Email: CyberAccessHelpdesk@xerox.com

Web address: www.cyberaccessonline.net

Tips: <http://dss.mo.gov/cd/info/forms/reference/cyberaccess-helpful-tips.pdf>

CyberAccess

Protect your patients by following a few simple rules

Log In

User Name:

Password:

[Forget Your Password?](#)

- Always choose passwords that are difficult for others to guess. You can change your password on the "My Account" screen after you log in.
- Never give your user name and password to others because it could be used without your knowledge.
- Never leave patient information unprotected on the computer screen while you step away.
- Place all printed documents containing patient information in secure storage or shred them daily to prevent accidental disclosure.
- Obey the golden rule: always handle information about your patients with the same care that you expect from your own physician.

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Department of Social Services



Fee-For-Service

Participant Handbook

Participant Quick Links

- [Managed Care Consumer Advisory Committee Flyer](#) updated 02/16/12
- [Médica Controlada Comité Asesor para el Consumidor folleto](#)
- [Spend down Automatic Withdrawal Form](#) 10/17/12
- [MO HealthNet Premium Automatic Withdrawal Form](#) updated 10/17/12
- [Ticket to Work Health Assurance Automatic Withdrawal Form](#) updated 10/17/12
- [Participant Handbook](#) updated 12/05/11
- [Manual del Participante](#)
- [Change of Address](#)
- [Health Insurance Premium Payment \(HIPP\) Program](#)
- [Non-Emergency Medical Transportation](#)

Participant Services Unit
(800) 392-2161

Family Support Division

(855) 373-4636

May apply at www.mydss.mo.gov

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[Eligibility Resources](#)

[Premiums for members of a federally-recognized American Indian or Native Alaskan tribe](#)

[Participants Frequently Asked Questions](#)

[Missouri Medicaid Audit & Compliance](#)

[Mo HealthNet Provider Search](#)

[Other Helpful Contact Information](#)



Find out if you are eligible
for health benefits

MO HealthNet Help Desk (573) 635-3559

Email: internethelpdesk@momed.com

- Technical support and assistance with www.emomed.com
 - Establish required electronic claims
 - Remittance Advice formats
 - Network communication
 - HIPAA trading partner agreements



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environment for claims submission

Business and IT process automation for a Midwestern US State Department of Social Services

Read More



MO HealthNet (Medicaid) for People with Disabilities

Additional Forms

[MO HealthNet Application](#) 

[Appointment of Authorized Representative](#) 

[Authorized Representative Revocation](#) 

If you do not receive SSD or SSI, the following forms may be needed:

[Disability Questionnaire](#) 

[Work History-Past 10 Years](#) 

[Hospitals, Medical Facilities & Physicians Seen](#) 

[Authorization for Disclosure of Medical Information](#) 

Spend Down

[Provider Bulletin introducing Spend Down Unit](#) 

[Regional Spend Down Unit List](#) 

[MO HealthNet Spend Down Provider Form](#) 

[Provider Attestation of Physician's Order of Medical Necessity](#) 

[MO HealthNet Spend Down Transportation Expense Log](#) 

Additional Program Information

[Aged, Blind and Disabled Program Descriptions](#) 

[Aged, Blind and Disabled Income and Asset Limit Chart](#) 

Other Programs

[Medicare Cost Savings Programs](#)

[Nursing Home Coverage](#)

[Home and Community Based Services](#)

[Adult Supplemental Payments](#)

[Prevention of Spousal Impoverishment](#)

Family Support Services

 [Child Support](#)

 [Food Assistance](#)

 [Health Care](#)

 [Temporary Assistance](#)

 [Blind Services](#)

 [Child Care](#)

 [All Services](#)

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Do I qualify for assistance?

Family Support Division, MHD for the Aged, Blind and Disabled webpage
<http://dss.mo.gov/fsd/health-care/mo-healthnet-for-people-with-disabilities.htm>

(Email) SpendDown.Unit@dss.mo.gov

(Fax) 855-600-3754

(Phone) 855-600-4412

Spenddown Unit

- Review expenses to meet spenddown, determine MHD coverage dates and authorize coverage
- Scan and email Provider Spenddown form to **sesd@ip.sp.mo.gov**, including receipts and bills
- Fax form and documentation to the number below:
(855) 660-3754

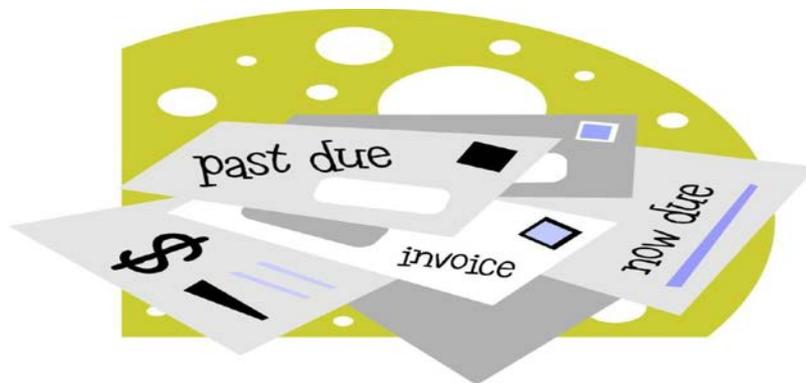
Email and phone number set up just for providers:

- Email any questions or issues to
SpendDown.Unit@dss.mo.gov
- Call FSD Spenddown Unit: (855) 600-4412

Provider Spenddown Form

- Incurred medical expenses
- SDU activates coverage, providers submit claims to MHD for services rendered
- Access form on :

<http://dss.mo.gov/fsd/health-care/mo-healthnet-for-people-with-disabilities.htm>



Spenddown Amounts

- FSD determines spenddown amounts based on income.
- Any income changes need to be reported to FSD.
- Participants should contact FSD with questions or concerns about their spenddown amounts.
- Explanations should be directed to FSD at 1-855-FSD-INFO. (1-855-373-4636)



What is Spenddown?



- Spenddown is a program for individuals with income exceeding the allowable amount required to meet the qualifications for MO HealthNet coverage
- Spenddown amount is the dollar amount of medical expenses that are a participant's financial responsibility.
- Spenddown amount must be met or paid before MHD starts reimbursing claims.

Options to meet Spenddown

- 1) Submit Invoice with payment for monthly coverage.
- 2) Incurred medical expenses may be submitted to meet monthly spenddown \$\$ amount. Expenses could be paid or unpaid medical bills. MO HealthNet coverage is effective when the Spenddown is met and ends on the last day of that month.
- 3) Automatic withdraw of payment from the participants' bank account. Spenddown Automatic Withdraw Form found on the Participant Eligibility webpage, under Participant Quick Links, at

<http://dss.mo.gov/mhd/participants/>





Questions

