

# Vermont Medicaid Banner

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**April 12, 2024**

## Dental Provider Open Forum Webinar

Gainwell Technologies will be hosting an open forum webinar for the dental provider community. This will be an open discussion, so we ask that you bring questions around billing, policy, and enrollment. To comply with HIPAA regulations, we will not be able to address any specific claim denials as this will require protected health information (PHI).

This forum will be on April 25, 2024, at 10:00AM EDT. If you are interested in attending, register at <https://attendee.gotowebinar.com/register/9133388443504476758>. Space is limited, so be sure to register as soon as possible.

We look forward to seeing you there!

## Has your Office Heard from Cotiviti about Medical Record Retrieval?

Cotiviti is the record retrieval contractor for VT Medicaid and began outreaching selected providers on 03/29/24 to request the submission of medical records in support of VT Medicaid's Medical Record Review (MRR). If you have received a record request, please submit the requested records within ten (10) business days. Please pay close attention to the HEDIS Measure Requirements and Date of Service fields and only submit the type of record requested within the stated timeframe. Please note that providers are required to participate at no cost as stated in your signed Provider Enrollment Agreement. VT Medicaid may enforce a 10% withholding of all VT Medicaid payments for all providers that do not submit the required medical records within ten business days. For more info please visit: <https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

## Server Maintenance - April 14, 2024

The Provider Web Portal server maintenance is scheduled from midnight to 8:00AM on Sunday, April 14, 2024. During this time, all Provider Web Services will be unavailable. Providers wishing to check eligibility, receive other insurance information or determine if service limits have been reached are advised to use the automated Voice Response System (VRS). The VRS can be accessed by dialing 800.925.1706, option 1 and then option 1 again.

## April 5, 2024

### H2019 Audio-Only List Addition

Effective 7/1/2023, Vermont Medicaid added Healthcare Common Procedure Coding System (HCPCS) code H2019 Therapeutic Behavioral Services, per 15 minutes to the list of Audio-Only covered codes. Refer to the Fee Schedule for coverage criteria <https://vtmedicaid.com/#/feeSchedule>. Current Procedural Terminology (CPT) Code Modifier 93 should be billed for clinically appropriate services delivered via telephone. A list of audio-only covered codes can be found on the Department of Vermont Health Access website: <https://dvha.vermont.gov/providers/telehealth>.

### Psychotherapy and Documentation Standards Update to General Billing and Forms Manual

The Department of Vermont Health Access (DVHA) has updated the Vermont Medicaid General Billing and Forms Manual, Section 5.3.46.2 Psychotherapy to address the use of therapeutic tools and Section 5.3.46.7 Documentation standards for Mental Health and Substance Abuse Health Records to further clarify documentation requirements. The updated manual can be located at: <https://vtmedicaid.com/#/manuals>.

### VT Medicaid & Cotiviti Launching the Medical Record Retrieval Campaign

Cotiviti is the record retrieval contractor for VT Medicaid and will begin outreaching selected providers in April 2024 to request the submission of medical records in support of VT Medicaid's Medical Record Review (MRR). Cotiviti will call each provider to confirm they have reached the correct office before faxing a record request letter and a member request form or a member list with the names of the Medicaid members for whom they are requesting records. This cover letter will be on VT Medicaid letterhead and will be signed by our Chief Medical Officer. Please pay close attention to the HEDIS Measure Requirements and Date of Service fields and only submit the type of record requested within the stated timeframe. For more info visit <https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

## March 29, 2024

### Timely Filing Reconsideration Documentation Requirements

When requesting reconsideration of a timely filing denial, providers are required to include both a detailed description of the circumstances resulting in their failure to meet timely filing requirements for the claim and supporting documentation showing claims issues were addressed in a timely manner. This requirement is described in Section 3.3.2 of the Vermont Medicaid General Billing and Forms Manual (<https://vtmedicaid.com/assets/manuals/GeneralBillingFormsManual.pdf>). Acceptable forms of supporting documentation include billing account notes, Gainwell call reference numbers, other insurance correspondence and/or emails with the Department or fiscal agent. If providers do not include the required documentation with their request for reconsideration, the Agency will deny the request and no further recourse will be available.

## Out-of-Network Office Visits

Out-of-network office visits require a PA via the Elective Out-of-Network Medical Office Visit Form (<https://dvha.vermont.gov/forms-manuals/forms/clinical-prior-authorization-forms>), completed by both the referring in-network specialist or PCP and the out-of-network provider. Reminder that coverage determination is delayed if the in-network provider does not attest to medical necessity of out-of-network care. Coverage for out-of-network services may be considered for indications such as no in-network available, in-network treatment options have been exhausted and unsatisfactory course, level of expertise unavailable, or care not timely. Full coverage criteria can be found here:

<https://dvha.vermont.gov/forms-manuals/forms/prior-authorizations-tools-and-criteria/procedure-criteria>. DVHA reserves the right to confirm in-network specialist availability.

## VT Medicaid and Cotiviti Partnering to Complete the 2024 Medical Record Review (MRR)

In 2024, VT Medicaid is producing five Healthcare Effectiveness Data and Information Set (HEDIS) hybrid measures. Hybrid measures combine administrative claims data with data abstracted from member records during a Medical Record Review (MRR). Cotiviti is the medical record retrieval contractor for VT Medicaid. They will begin outreaching selected providers in April and requesting the submission of medical records to support VT Medicaid's Medical Record Review (MRR). Please note that providers are required to participate at no cost, as stated in your signed Medicaid Provider Enrollment Agreement. VT Medicaid may enforce a 10% withholding of all payments for providers that do not submit the required medical records at no cost within ten (10) business days. For more info please visit:

<https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

## March 22, 2024

### Open Forum Webinar for Independently Billing High-Technology Nurses

Gainwell Technologies will be providing an open forum webinar for the following provider type: T36 Independently Billing High-Technology Nurses. This will be an open discussion, so we ask that you bring questions around billing, policy, and enrollment. To comply with HIPAA regulations, we will not be able to address any specific claim denials as this will require protected health information (PHI).

This forum will be on March 28, 2024, at 10:00AM EDT. If you are interested in attending, register at <https://attendee.gotowebinar.com/register/1817046756795943007>. Space is limited, so be sure to register as soon as possible.

We look forward to seeing you there!

## March 15, 2024

### Discontinued Coverage for Select Vaccine Codes

The DVHA will be changing currently covered codes to non-covered for select CPT vaccine codes for the following reason: the drug has been discontinued, replaced, or no longer available. Please make sure you are billing the correct codes and your system is up to date.

90477, 90586, 90630, 90649, 90650, 90655, 90656, 90657, 90658, 90660, 90661, 90673, 90733, 90736, and 90748.

## **VT Medicaid Producing Hybrid Measures by Completing a Medical Record Review (MRR)**

In 2024, VT Medicaid is producing five Healthcare Effectiveness Data and Information Set (HEDIS) hybrid measures as well as running the full set of administrative measures. Hybrid measures combine administrative claims data with data abstracted from member records during a Medical Record Review (MRR). The 5 hybrid measures are Controlling High Blood Pressure (CBP), Hemoglobin A1c Control for Patients with Diabetes (HBD), Diabetes Care for People with Serious Mental Illness: Hemoglobin A1c Poor Control (HPCMI), Prenatal & Postpartum Care (PPC), and Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC). Cotiviti is the medical record retrieval contractor for VT Medicaid. They will begin outreaching selected providers in April to request the submission of medical records. For more info please visit:

<https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

## **March 8, 2024**

### **2024 VT Medicaid's Medical Record Review (MRR)**

VT Medicaid produces health plan performance measures each year to help gauge our members' well-being. To successfully run some of these measures, we need to access information from our members' medical records. Cotiviti is the medical record retrieval contractor for VT Medicaid. They will begin outreaching selected providers in April and requesting the submission of medical records to support our Medical Record Review (MRR). Please note that providers are required to participate at no cost as stated in your signed Provider Enrollment Agreement: Article VI. Audit Inspection. For more info please visit:

<https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

### **Silver Diamine Fluoride Coverage**

Effective July 1, 2023, Vermont Medicaid added CPT code 0792T for the application of silver diamine fluoride to the Medicaid Fee Schedule. The Medicaid fee schedule can be found here:

<https://vtmedicaid.com/#/feeSchedule>. More information about silver diamine fluoride and

Medical/Dental Health integration can be found on the Vermont Department of Health's website

<https://www.healthvermont.gov/wellness/oral-health/resources-health-professionals>.

### **Server Maintenance - March 10, 2024**

The Provider Web Portal server maintenance is scheduled from midnight to 8:00AM on Sunday, March 10, 2024. During this time, all Provider Web Services will be unavailable. Providers wishing to check eligibility, receive other insurance information or determine if service limits have been reached are advised to use the automated Voice Response System (VRS). The VRS can be accessed by dialing 800.925.1706, option 1 and then option 1 again.

## **March 1, 2024**

### **2024 HEDIS Performance Measure Production Includes a Medical Record Review (MRR)**

Healthcare Effectiveness Data and Information Set (HEDIS) is one of the most widely used sets of health care performance measures in the United States. VT Medicaid produces these measures to evaluate health plan processes and member health outcomes. To produce some of the HEDIS measures, DVHA must request members' medical records from providers and then trained clinicians review and abstract data from the member's record that does not show up in claims data. Cotiviti is the record retrieval contractor for VT Medicaid and will begin outreaching selected providers in April and requesting the

submission of medical records to support VT Medicaid's 2024 Medical Record Review (MRR). For more info, please visit: <https://dvha.vermont.gov/providers/audits/hedis-hybrid-measure-medical-record-review-mrr>.

## **Closed for Town Meeting Day - Tuesday, March 5, 2024**

The Department of Vermont Health Access (DVHA) and Gainwell Technologies offices' will be closed on Tuesday, March 5, 2024, for Town Meeting Day.

## **February 23, 2024**

### **How to Bill for Independently Billing Dental Hygienists**

Gainwell Technologies will be hosting a webinar on How to Bill for Independently Billing Dental Hygienists. In this webinar, we will be providing a step-by-step introduction on how to complete the 2019 ADA dental claim form, along with the most common mistakes seen with this claim type.

This webinar will be on Wednesday, February 28th, 2024, at 10:00 am. If you are interested in attending, register at <https://attendee.gotowebinar.com/register/8828823721421678430>. Space is limited, so please be sure to register as soon as possible. We look forward to seeing you there!

### **Enrollment Maintenance Reminder**

This is a reminder to maintain your enrollment information in a timely manner, through the Provider Management Module Provider Portal. This includes, but is not limited to, changes to name, licensure, ownership, demographics, and provider rosters.

Gainwell has received an increase in Group/Individual within a Group enrollment types requesting retro closures of their roster affiliations. Gainwell needs to be notified immediately when a provider is no longer affiliated to a Group in order for members to have accurate primary care information. In addition, it's equally important to maintain status on whether your practice is accepting new patients. This information is shared directly with members to assist in finding providers. If you have questions regarding access to update your enrollment information, please contact the Gainwell enrollment team at [vtproviderenrollment@gainwelltechnologies.com](mailto:vtproviderenrollment@gainwelltechnologies.com).

### **Out of State Pharmacy Requirements**

Please be aware that any pharmacy distributing drugs in Vermont must have a Vermont license issued by the Secretary of State, Office of Professional Regulation. The Vermont license must be obtained even if a pharmacy has a valid license in another state. The Vermont Medicaid General Provider Agreement, Section 4.1(d), requires that all providers comply with applicable statutes and regulations. Further, Section 4.1(f) mandates that providers maintain all applicable licenses. Vermont statutes require all drug outlets to obtain a license to distribute drugs in the state. See, Title 26, Chapter 36 of Vermont Statutes Annotated. License information can be found on the Secretary of State, Office of Professional Regulation website at <https://sos.vermont.gov/pharmacy/>. If you have any questions regarding the licensing process, please contact Gainwell Provider Services at 800-925-1706.

## February 16, 2024

### 2024 You First Fee Schedule

The 2024 You First Fee Schedule has been added to the Vermont Medicaid Fee Schedule page. Providers are encouraged to review the fee schedule. If you have questions, call You First at 800-508-2222 or email [YouFirst@vermont.gov](mailto:YouFirst@vermont.gov).

### Supervised Billing Additional Guidance

The Department of Vermont Health Access (DVHA) continues to work on a new version of HCAR 9.103, Non-Licensed and Non-Certified (NLNC) providers can continue to provide clinical services under the extension until 12/31/25 in accordance with HCAR 9.103 and all other relevant manuals and rules.

To take advantage of the extension and submit new claims for pro-bono services provided by NLNC providers under Supervised Billing:

- For dates of service within the last 180 days, claims may now be submitted electronically to Gainwell following correct coding.
- For dates of service between the last 180-365 days, PLEASE REACH OUT TO YOUR GAINWELL PROVIDER REPRESENTATIVE.

DVHA requires that all new claims for pro-bono services provided by a NLNC provider be submitted and received by Gainwell within one year from the date of service or by May 1, 2024, whichever comes first.

### Closed for Presidents' Day - Monday, February 19, 2024

The Department of Vermont Health Access (DVHA) and Gainwell Technologies offices' will be closed on Monday, February 19, 2024, in observance of Presidents' Day.

## February 9, 2024

### Telehealth Coding Update

Effective 1/1/24, Telehealth coding for place of service and modifier guidance given during the Public Health Emergency (PHE) period no longer applies. Vermont Medicaid updated the following changes to telehealth coding:

- Place of Service code 10 - Telehealth Provided in Patient's Home
- Place of Service code 02 - Telehealth Provided Other than in Patient's Home

Current Procedural Terminology (CPT) Code Modifier 93 for Telemedicine services delivered via audio-only telecommunications should be billed for clinically appropriate services delivered via telephone. Modifier 93 replaces the use of modifier V3. A list of allowable audio-only service codes can be found on the DVHA website. VT Medicaid follows Medicare place of service guidelines, CPT, and Healthcare Common Procedure Coding System (HCPCS) modifiers as indicated in the VT Medicaid General Billing and Forms Manual.

### New Supervised Billing Modifier Requirement to Include HM

Vermont Medicaid has added the HM modifier as a required modifier for all applicable supervised billing claims. The HM modifier will be required on all supervised billing claims for clinical services provided by Apprenticed Addiction Professionals (AAPs) and billed under their supervising provider. The addition of this modifier will align AAPs with billing requirements under [HCAR 9.103](#). Following the rate schedule set out for other modifiers under Supervised Billing, the AAPs will be paid at 56% of the rate on file.

## **Server Maintenance - February 11, 2024**

The Provider Web Portal server maintenance is scheduled from midnight to 8:00AM on Sunday, February 11, 2024. During this time, all Provider Web Services will be unavailable. Providers wishing to check eligibility, receive other insurance information or determine if service limits have been reached are advised to use the automated Voice Response System (VRS). The VRS can be accessed by dialing 800.925.1706, option 1 and then option 1 again.

## **February 2, 2024**

### **Dental Place of Service Home**

Effective 2/1/2024, Vermont Medicaid enrolled dental providers can deliver dental services in the home. This change is intended for members who are homebound and not able to visit a dental office to receive dental care. Services may be delivered as medically necessary by dentists, dental therapists, or dental hygienists working within their scope of practice. Providers can bill using the place of service "12 home", defined as "location, other than a hospital or other facility, where the patient receives care in a private residence". Medicaid enrolled dental providers must deliver services within their scope of practice and bill with the appropriate place of service on claims according to correct coding. Vermont Medicaid does not limit dental codes by place of service.

## **January 26, 2024**

### **Vermont Medicaid Supervised Billing Forum**

The Department of Vermont Health Access (DVHA) is currently revising the Medicaid Supervised Billing Rule (HCAR 9.103). For DVHA to conduct the necessary outreach and stakeholder engagement required to revise the rule, the Department has issued a retroactive extension to allow non-licensed non-certified (NLNC) providers to continue to bill Vermont Medicaid until the new rule is in place. DVHA will be hosting an open forum to allow individuals the opportunity to ask any questions they may have about how the extension will work and how it will apply to different situations. Please join us for this open forum on Thursday, January 25, 2024, from 11:00am – 12:00pm, EST. You may access the virtual meeting link details using the below link. If you require accommodations to participate, please contact [Grace.E.Johnson@vermont.gov](mailto:Grace.E.Johnson@vermont.gov).

<https://dvha.vermont.gov/news/medicaid-supervised-billing-open-forum>

### **LCMHC and LMFT Secondary Billing Webinar**

Gainwell Technologies will be hosting a webinar to discuss the process of secondary billing for Licensed Clinical Mental Health Counselors (LCMHC) and Licensed Marriage and Family Therapist (LMFT), on Wednesday, January 31st at 10am. The discussion will consist of Medicare crossover claims, billing requirements, timely filing guidelines, and Medicare Attached Summary Forms. If you are interested in attending, register at <https://attendee.gotowebinar.com/register/8715237572582873949>. Space is limited, so be sure to register as soon as possible. We look forward to seeing you there!

### **Provider Enrollment Portal Registration Form to be Removed**

As of 02/23/24, the Provider Enrollment Portal Registration form will be removed from the vtmedicaid.com website. All requests for portal registration are now being maintained through the application process and/or ongoing maintenance through an existing provider portal account. Any

questions related to portal access can be sent to the Gainwell Enrollment Team at [vtproviderenrollment@gainwelltechnologies.com](mailto:vtproviderenrollment@gainwelltechnologies.com).

## January 12, 2024

### **Closed for Martin Luther King Jr. Day - Monday, January 15, 2024**

The Department of Vermont Health Access (DVHA) and Gainwell Technologies offices' will be closed on Monday, January 15, 2024, in observance of Martin Luther King Jr. Day.

### **Server Maintenance - January 14, 2024**

The Provider Web Portal server maintenance is scheduled from midnight to 8:00AM on Sunday, January 14, 2024. During this time, all Provider Web Services will be unavailable. Providers wishing to check eligibility, receive other insurance information or determine if service limits have been reached are advised to use the automated Voice Response System (VRS). The VRS can be accessed by dialing 800.925.1706, option 1 and then option 1 again.

## January 5, 2024

### **Important Coverage Changes to Prescription Biosimilar Drugs**

Effective 01/01/2024, Vermont Medicaid will make the following changes to the physician fee schedule and Hospital Based Outpatient Services (OPPS) fee schedule. Information such as coverage or prior authorization requirements may be found on the fee schedules posted on the Vermont Medicaid Portal.

Prior authorization will be required for: Riabni (rituximab-arrx) Q5123, Herceptin (trastuzumab) J9355, Ontruzant (trastuzumab-dttb) Q5112, and Ogivri (trastuzumab-dkst) Q5114.

Preferred alternative products without prior authorization: Ruxience (rituximab-pvvr) Q5119, Truxima (rituximab-abbs) Q5115, Herzuma (trastuzumab-pkrb) Q5113, Kanjinti (trastuzumab-anns) Q5117, and Trazimera (trastuzumab-qyyp) Q5116.