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New York State Medicaid Update

The official newsletter of the New York Medicaid Program

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State of New York

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Governor Cuomo Announces Medicaid Redesign Web Site to Track Progress and Invite Public Participation

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The Medicaid Redesign Team has been tasked by Governor Cuomo to identify ways to reduce costs and increase quality and efficiency in the New York State Medicaid program for the upcoming 2011-12 Fiscal Year. As part of its work, the Team is seeking ideas from the public at large, as well as experts in health care delivery and insurance, the health care workforce, economics, business, consumer rights and other relevant areas.

New York State Medicaid spends more than \$53 billion annually to provide health care to more than 4.7 million people in need. In effect, Medicaid is the largest health insurance program in New York State. The costs are borne by state, county and federal taxpayers. The Team will undertake the most comprehensive examination of New York Medicaid since its inception. The Team must submit its first report with findings and recommendations to the Governor by March 1 for consideration in the budget process, and shall submit quarterly reports thereafter until the end of Fiscal Year 2011-12, when it will disband.

As part of its collaborative approach, the Team wants to hear reform ideas, big and small, from health care professionals, administrators, stakeholders, and the general public through regional public hearings and an online survey. As ideas are collected, the Medicaid Redesign Team will evaluate the feedback and approve a final package to be reviewed and approved by the Governor and the Legislature.

Please visit http://www.health.ny.gov/health_care/medicaid/redesign/ to participate and learn more about this important initiative.

New York State Medicaid offers a new solution for enrolling physicians

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Effective January 1, 2011, New York State Medicaid will utilize the Council for Affordable Quality Healthcare (CAQH) Universal Provider Datasource® (UPD) to electronically collect data to enroll physicians. The UPD utilizes an online credentialing application process that supports administrative simplification efforts by eliminating the need to fill out multiple, redundant and timeconsuming forms, saves money by reducing administrative costs, minimizes paperwork through online updates, and ensures that provider credentialing data stays current and accurate.

Currently 64,000 New York State physicians are enrolled with CAQH. Many providers in New York are already familiar with UPD; the credentialing application is accepted by health plans, hospitals, and other healthcare organizations operating throughout New York State.

Physicians interested in enrolling with New York State Medicaid must complete the standardized UPD application available on the CAQH Web site at: www.upd.caqh.org/oas/. Physicians must also complete the Physician Request for Enrollment form available at: www.emedny.org.

For additional practitioner enrollment information (i.e., dentist, nurse practitioner, etc.) or changes to existing enrolled physician information, please continue to use the enrollment applications and forms available online at: www.emedny.org.

Questions? Please contact the eMedNY Call Center at (800) 343-9000.

Hospice Care for Children in Medicaid, Family Health Plus and Child Health Plus

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EDITOR'S NOTE: The date listed in the [December 2010 Medicaid Update](#) for the following article was incorrect. The proper effective date is listed below. We regret any inconvenience this may have caused.

Effective March 23, 2010, New York State

Medicaid including Medicaid managed care, Family Health Plus (FHPlus), and Child Health Plus (CHPlus) covers all medically necessary curative services, in addition to palliative care, for children under age 21 who receive hospice care. This change in coverage policy complies with recent changes to Section 2302 of the federal Affordable Care Act, entitled "Concurrent Care for Children."

This new provision applies **ONLY** to Medicaid, Medicaid managed care, FHPlus and CHPlus recipients under age 21 and allows hospice care to be available without forgoing any other medically necessary curative services to which the child is entitled under Medicaid, or under the enrollee's FHPlus or CHPlus benefit package, for treatment of the terminal illness.

There is no change in the eligibility criteria for electing hospice care. The child must be certified by a physician as terminally ill, defined as a medical prognosis for a life expectancy of six months or less if the illness runs its normal course. Hospice provides palliative and supportive care that focuses on pain and symptom management related to the terminal illness and related conditions.

Prior to enactment of the new law, curative treatment of the terminal illness ceased upon election of the hospice benefit. Curative care refers to treatment with intent to cure the child's terminal illness. Palliative care does not aim to cure but rather is focused on relieving pain and symptoms related to the terminal illness with the goal of improving quality of life. The goal of this change in coverage is to provide a blended package of curative, palliative and support services for children, as needed.

FHPlus and CHPlus enrollees receive both hospice and covered curative services through their managed care plan. Hospice services are carved-out of the Medicaid managed care benefit package and billed directly to eMedNY, while covered curative services are billed to the health plan. Individuals receiving hospice services may not be newly enrolled in Medicaid managed care, but individuals already enrolled in Medicaid managed care may remain enrolled after they begin receiving hospice services.

General questions? Please call the Office of Long Term Care, Division of Home and Community Based Services at (518) 408-1638 or e-mail: homecare@health.state.ny.us.

Medicaid program questions? Please call the Office of Health Insurance Programs, Division of Financial Planning and Policy at (518) 473-2160.

Medicaid Managed Care and FHPlus questions? Please call the Office of Health Insurance Programs, Division of Managed Care at (518) 473- 0122.

Child Health Plus (CHPlus) questions? Please call the Bureau of Child Health Plus Enrollment at (518) 473-0566.

Medicaid billing questions? Please call the eMedNY Call Center at (800) 343-9000.

Bariatric Surgery Procedure Change

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Effective **January 1, 2011**, Partial Gastrectomy (sleeve resection of the stomach, ICD-9-CM procedure code 43.89) procedures, when accompanied by a primary diagnosis of obesity, unspecified (278.00), morbid obesity (278.01) or overweight (278.02), will be included as part of APR-DRG 403 "Procedures for Obesity." Version 28.0 of the APR-DRG classification system now includes this procedure as a procedure for obesity and this