Billing Telehealth as a Teledental Encounter

This notice serves as a reminder to all Medicaid dental providers that **teledental is a reimbursable service under the recent expansion of telehealth**, as published in the February 2019 *Special Edition Medicaid Update*.

General Billing Guidelines
The New York State Medicaid Dental Fee Schedule will be updated to reflect the Current Dental Terminology (CDT) codes **"D9995"** and "D9996" for the ***distant site*** and a Healthcare Common Procedure Coding System (HCPCS) code "**Q3014"** for the ***originating site*** to use to bill Medicaid for a teledental encounter.

CDT Codes:
- **"D9995"** *Teledentistry - Synchronous; real time encounter*
  Report **"D9995"** and procedure(s) rendered to the patient on the date of service. Reimbursement will be for the procedure(s) rendered.
- **"D9996"** *Teledentistry – Asynchronous; information stored and forwarded*
  Report "**D9996"** and procedure(s) rendered to the patient on the date of service. Reimbursement will be for the procedure(s) rendered and will be reduced by 25 percent. **"D9996"** must be the first line item on the claim.

HCPCS Code:
- **"Q3014"** is a valid 2019 HCPCS code for Telehealth originating site facility fee.

Place of Service (POS) Code:
- **"02"** is used on professional claims to specify the entity where service(s) were rendered.

Place of Service	Site	Indicate Teledental Encounter	Services Rendered
02	**ORIGINATING SITE** (location of the member)	**"Q3014"** *telehealth originating-site facility fee.*	Use CDT code for additional services rendered during the encounter.
02	**DISTANT SITE** (location of the provider)	**"D9995"** *tele-dentistry synchronous. No fee attached.*	Use CDT code for additional services rendered during the encounter.
		"D9996" *tele-dentistry asynchronous. No fee attached.*	Place as first line item then use CDT code for additional services rendered during the encounter.

Questions:
- Questions regarding billing or to dental policy should be directed to the Office of Health Insurance Programs (OHIP), Bureau of Medical, Dental, and Pharmacy Policy at (518) 473-2160 or via email at Dentalpolicy@health.ny.gov.
- Questions regarding Medicaid Managed Care (MMC) reimbursement and/or documentation requirements should be directed to the enrollee's MMC plan.

In This Issue…

Coverage of Smoking Cessation Counseling and Medications: E-Cigarettes and Vaping

Smoking cessation treatment includes screening, behavioral interventions and Food Drug and Administration (FDA)-approved pharmacotherapy for adults, and behavioral interventions for school-aged children and adolescents, as appropriate. This notice is intended to clarify Medicaid coverage of smoking cessation counseling and medications to include the treatment of members who utilize e-cigarettes and vaping of nicotine products. Reimbursement for smoking cessation counseling for e-cigarette and vaping must meet the following criteria:

- Smoking cessation counseling must be provided face to face by a physician, dentist, registered physician assistant (PA), registered nurse practitioner (RNP), or licensed midwife (LM) either with or without an Evaluation and Management procedure code.
- Current smoking cessation counseling includes a maximum of two quit attempts per 12 months, which includes up to four face-to-face counseling sessions per quit attempt. Dental practitioners are allowed to provide two smoking cessation face-to-face counseling sessions per 12 months.
- Smoking cessation counseling may take place during individual or group counseling sessions.
- Only one procedure code per day may be billed:
  - Dental practitioners may only provide individual counseling sessions and should continue to bill **"D1320"** for smoking cessation counseling.
  - Medical practitioners should bill "**99406**" or **"99407"**.
- Claims must include the appropriate **"ICD-10-CM"** diagnosis code for nicotine dependence.

Medicaid coverage includes all medications to treat smoking cessation listed on the Medicaid Pharmacy List of Reimbursable Drugs found at: https://www.emedny.org/info/formfile.aspx. Criteria for FDA approved pharmaceutical medications used to treat smoking cessation can be found in the March 2017 *Medicaid Update*.

Additional Resources:
- The National Cancer Institute (NCI) website (http://www.smokefree.gov/) provides e-cigarette users with online cessation support as well as links to other helpful resources.
- The slide deck from the September 19, 2019 CDC Clinician Outreach and Communication Activity (COCA) webinar, *Outbreak of Lung Injury Associated with E-cigarette Product Use or Vaping: Information for Clinicians,* can be found at: https://emergency.cdc.gov/coca/ppt/2019/COCA_Call_Outbreak_of_lung_injury_ecigarettes_09.19.19_Final.pdf.
- Assistance with nicotine addiction is available by contacting the New York State Smokers' Quitline at (866) NY-Quits/(866) 697-8487 or by visiting the web site at: https://www.nysmokefree.com/.

Questions:
- Medicaid fee-for-service (FFS) policy questions should be directed to the Office of Health Insurance Programs (OHIP), Division of Program Development and Management at (518) 473-2160.
- FFS billing questions should be directed to the eMedNY Call Center at (800) 343-9000.
- Medicaid managed care (MMC) reimbursement questions should be directed to the member's MMC plan.
- MMC policy questions should be directed to the specific MMC plan in question. A directory by plan can be found on the Department of Health's website at: https://www.emedny.org/ProviderManuals/All Providers/PDFS/Information_for_All_Providers_Managed_Care_Information.pdf.
- Dental policy questions should be directed to OHIP's Dental Policy Unit at dentalpolicy@health.ny.gov.

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New York Medicaid EHR Incentive Program

Distribution to Eligible Professionals & Eligible Hospitals Since the Start of the Program in 2011*

Number of Payments:	Distributed Funds:
42,504	$1,002,032,698

*As of 01/02/2020

Through the New York (NY) Medicaid Electronic Health Record (EHR) Incentive Program, eligible professionals (EPs) and eligible hospitals (EHs) in New York who adopt, implement, or upgrade certified EHR technology (CEHRT) and subsequently become meaningful users of CEHRT, can qualify for financial incentives. The Centers for Medicare and Medicaid Services (CMS) is dedicated to improving interoperability and patient access to health information. The NY Medicaid EHR Incentive Program is a part of the CMS Promoting Interoperability Program, but will continue to operate under the current name, NY Medicaid EHR Incentive Program.

2019 Attestations
The Medicaid EHR Incentive Program Administrative Support Service (MEIPASS) will begin accepting attestations for 2019 Meaningful Use (MU) on February 3, 2020. Providers can access MEIPASS at: https://meipass.emedny.org/ehr/login.xhtml.

Before attestation in MEIPASS, providers should make sure the following items are available and up to date:
- CMS registration
- Medicaid fee-for-service (FFS) enrollment
- Electronic/Paper Transmitter Identification Number (ETIN) certification
- ePACES/MEIPASS credentials
- Payee affiliation
- CEHRT ID for 2019 MU
- Contact information in Meaningful Use Registration for Public Health (MURPH)
- Security Risk Assessment (SRA) for calendar year 2019

Over $1 Billion in EHR Incentive Payments
The New York State (NYS) Department of Health (DOH) is happy to announce that over $1 Billion in EHR incentive payments have been made to EPs and EHs participating in the NY Medicaid EHR Incentive Program. Over 42,000 incentive payments have been disbursed to almost 19,000 healthcare providers across NYS since the program began in 2011. DOH applauds the tireless efforts put forth by the provider community and program stakeholders who have contributed to this remarkable milestone and the overall success of the program. DOH extends a sincere thank you to providers for their commitment to the NY Medicaid EHR Incentive Program.

Frequently Asked Questions (FAQ)
The FAQ web pages serve as informational resources for EPs participating in the NY Medicaid EHR Incentive Program. Providers looking for a refresher on the NY Medicaid EHR Incentive Program and Public Health Reporting should refer to the following FAQ web pages:
- NY Medicaid EHR Incentive Program:
  https://www.health.ny.gov/health_care/medicaid/redesign/ehr/faqs/ehr.htm
- Public Health Reporting:
  https://www.health.ny.gov/health_care/medicaid/redesign/ehr/faqs/phr.htm

Program Information by Payment Year 2020 – Stage 3

The program information for **2020 MU - Stage 3** is now available on the NY Medicaid EHR Incentive Program web site. Guidance on attesting to 2020 MU - Stage 3 can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/ehr/2020_stage3.htm.

Webinars and Q&A Sessions

Upcoming NY Medicaid EHR Incentive Program webinars include:

- Payment Year 2019 Program Discussion
- EP Meaningful Use – Stage 3
- Security Risk Analysis
- 2019 Public Health Reporting
- Patient Engagement for Eligible Professionals
- Health Information Exchange (HIE)

A calendar with the date and times of these webinars, as well as registration information, can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/ehr/calendar/.

NY Medicaid EHR Incentive Program Tutorial Series

The NY Medicaid EHR Incentive Program has produced a series of tutorials to assist providers on a variety of topics. These tutorial series include:

- Post-Payment Audit Education Series
- MURPH Audit Report Card
- Eligible Professional MURPH Registration Video Guide
- Eligible Hospital MURPH Registration Video Guide

Additional information on the available tutorials can be found at: https://www.health.ny.gov/health_care/medicaid/redesign/ehr/tutorials.htm.

NYS Regional Extension Centers (RECs)

NYS RECs offer free support to help providers achieve Meaningful Use of CEHRT. Support provided by NYS RECs includes, but is not limited to, the following:

- Answers to questions regarding the program and requirements
- Assistance on selecting and using CEHRT
- Help meeting program objectives

NYS RECs offer *free* assistance for all practices and providers located within New York State.

For Providers Located:	
Inside the five boroughs of NYC	*Outside* the five boroughs of NYC
Contact: **NYC REACH** Phone: (347) 396-4888 Website: https://www.nycreach.org Email: pcip@health.nyc.gov	Contact: **New York eHealth Collaborative (NYeC)** Phone: (646) 619-6400 Website: https://www.nyehealth.org Email: ep2info@nyehealth.org

Questions

The EHR Incentive Program has a dedicated support team ready to assist as needed. The program may be contacted at: **(877) 646-5410 (Option 2)** or via email at: hit@health.ny.gov.

Please Complete the New York Medicaid EHR Incentive Program Customer Satisfaction Survey
The NY Medicaid EHR Incentive Program values provider insight. The survey can be found at: https://www.surveymonkey.com/r/NY_EHR.

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Attention Submitters of X12 Transactions:
Provide Proper Electronic Data Interchange (EDI) Contact Information

The *Submitter Name* and *Submitter Electronic Data Contact Information* contained in Loop 1000A, PER Segment of all X12 837 claim transactions is the first source eMedNY references to attempt to contact submitters who have files that require immediate intervention. Providers should ensure that information populated within this section contains the contact details of someone available to assist an eMedNY analyst in the event that EDI/X12 data content troubleshooting is required. This will ensure that if a problem is identified with the submitted file, and an outbound call is necessary, minimal delay is experienced. Providers who utilize a service provider to submit transactions should ensure this notice is shared with all appropriate parties.

Questions regarding this notice should be directed to the eMedNY Call Center at (800) 343-9000 or via email at emednyproviderservices@csra.com.

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Pre-Adjudication Editing Regarding the
Medicare Beneficiary Identifier (MBI)

The Centers for Medicare and Medicaid Services (CMS) has replaced the Social Security Number (SSN)-based Health Insurance Claim Numbers (HICNs), with a new Medicare Beneficiary Identifier (MBI). The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 required CMS to remove SSNs from all Medicare cards.

Effective January 1, 2020, in alignment with the CMS Medicare Card Replacement Initiative, the electronic Medicaid System of New York State (eMedNY) began to reject all inbound claims with Medicare coordination of benefits (COB) data that contained the HICN of the Medicare member. The MBI is **now required** for all COB reporting for clients with Medicare reported on a claim as "COB".

For submitters of the *X12 837 Claim*, the 277 Claims Status Acknowledgment rejection coding is: **"A7|162|GB"**. For the 837, the MBI is located in **LOOP ID - 2330A OTHER SUBSCRIBER NAME**.

For Electronic Provider Assisted Claim Entry System (ePACES) users, a message on the "Claim Status" screen will read:
- **A7 Acknowledgement/Rejected for Invalid Information - The claim/encounter has invalid information as specified in the Status Details and has been rejected.**
- **162 Entity's Health Insurance Claim Number (HICN)**
- **GB Other Insured**

ePACES users may correct the Medicare ID/MBI on the "Other Payer" tab. For institutional claims, the MBI is identified as the **"Member ID"** field. For professional claims the MBI is identified as the **"Primary ID"** field.

Questions regarding this notice should be directed to the eMedNY Call Center at (800) 343-9000.

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Provider Directory

Office of the Medicaid Inspector General:
For suspected fraud or abuse complaints/allegations, call 1-877-87FRAUD, (877) 873-7283, or visit
www.omig.ny.gov.

Provider Manuals/Companion Guides, Enrollment Information/Forms/Training Schedules:
Please visit the eMedNY website at https://www.emedny.org/.

Providers wishing to listen to the current week's check/EFT amounts:
Please call (866) 307-5549 (available Thursday PM for one week for the current week's amount).

For questions about billing and performing MEVS transactions:
Please call the eMedNY Call Center at (800) 343-9000.

Provider Training:
To sign up for a provider seminar, please enroll online at https://www.emedny.org/training/index.aspx. For
individual training requests, call (800) 343-9000.

Beneficiary Eligibility:
Call the Touchtone Telephone Verification System at (800) 997-1111.

Medicaid Prescriber Education Program:
For current information on best practices in pharmacotherapy, please visit the following websites:
- http://www.health.ny.gov/health_care/medicaid/program/prescriber_education/presc-educationprog
- http://nypep.nysdoh.suny.edu/home

eMedNY
For a number of services, including: change of address, updating an enrollment file due to an ownership
change, enrolling another NPI, or revalidating an existing enrollment, please visit: https://www.emedny.org
/info/ProviderEnrollment/index.aspx and choose the appropriate link based on provider type.

NY Medicaid Electronic Health Record (EHR) Incentive Program
Contact the New York Medicaid EHR Call Center at (877) 646-5410 for assistance.

Comments and Suggestions Regarding This Publication
Please contact the editor, Georgia Wohnsen, at medicaidupdate@health.ny.gov.