New York State Department of Health

Medicaid Update

January 2025
Volume 41 | Number 1

Inside this issue:

Policy and Billing

Inpatient Admission and Observation Policy for New York State Medicaid Providers (Cover)

eMedNY Provider Training Videos Available

Recipient Restriction Program Enhances Disease Self-management Program for Arthritis

Recipient Restriction Program Restriction Edits Restored

New York State Medicaid Evidence Based Benefit Review Advisory Committee Meeting on April 10, 2025

Pharmacy

NYRx, the Medicaid Pharmacy Prior Authorization Program

Notice for Incontinence Products (Cover)

NYRx Pharmacy Drug Coverage: Claims Processing Enhancements and Reminders

Provider Directory

All Providers

Inpatient Admission and Observation Policy for New York State Medicaid Providers

This document provides policy and billing guidelines for New York State (NYS) Medicaid providers to justify the medical necessity of inpatient or observation care, qualified for inpatient status, thus becoming eligible for inpatient reimbursement. Medicaid Managed Care (MMC) plans may use this document as guidance and provide comparable guidance for inpatient admission criteria and/or observation criteria.

Providers may encounter cases where patients require hospital care but do not meet inpatient criteria. In these cases, it is crucial to distinguish between formal inpatient admission, which is based on a documented medical order and meeting specific criteria, and observation care, which is significantly impacting billing and NYS Medicaid claims processing and payment.

Inpatient Admission Requirements

NYS Medicaid generally follows the Medicare Two Midnight Rule. Inpatient admission is typically reserved for services expected to span two midnights and to meet hospital care for at least two midnights, ensuring that admission is for medically necessary inpatient care. The decision to admit a patient should be based on the medical necessity of inpatient care, the patient's condition, and the expected duration of hospital care. Providers must document the rationale for inpatient admission, including the patient's medical condition, the services provided, and why these services cannot be provided in an outpatient setting. The documentation should also include the expected duration of hospital care and why it cannot be completed by a qualified physician (the "ordering practitioner") who

- is a practitioner enrolled in New York State Medicaid and
- is authorized under state law to order the patient's treatment, plan, and hospital needs, at the time of admission.

Back to Top

eMedNY Provider Training Videos Available

eMedNY offers recorded training videos on a variety of topics that allow providers and staff an alternative learning option that is easy to access and convenient to view at their own pace. The training videos are short, self-paced training content can be computer or any time. Recently added and currently available recorded training videos include:

- *Electronic Visits Verification (EVV) Overview*
- *Electronic EVVas a Vendor Remotely Administered Access Report Functionality*
- *Electronic EVVas a Vendor Remote Access Report Functionality*
- *eMEDEX Overview for Medicaid Managed Care Plans*
- *ePICES - How to Cancel a Direct Request for DME*
- *ePICES - How to Cancel a Direct Request for Home Health Services*
- *ePICES Overview*

To view the full list of recorded training videos, providers should visit the eMedNY *Provider Training Video*s web page. eMedNY strongly encourages providers to review the training videos prior to using the new functionality.

Questions
Questions regarding recorded training video should be directed to the eMedNY Call Center at (800) 343-9680.

Back to Top

New York State Medicaid Chronic Disease Self-Management Program for Arthritis

Reimplacement for the Chronic Disease Self-Management Program (CDSMP), as outlined by the Self-Management Resource Center (formerly Stanford Center for Chronic Illness and Disease Prevention), is a program for Medicaid members with arthritis who are not currently enrolled for state or managed care **as of March 1, 2025**. The New York State (NYS) Medicaid fee-for-service (FFS) and Value-Based Payment (VBP) programs will cover the cost of the program. The program is a six-week program that teaches participants how to manage their arthritis, reduce disease-related pain, improve their health, and actively participate in their care. Participants will receive a NYS Medicaid CDSMP provider. CDSMP providers conduct the NYS Medicaid CDSMP classes where participants can learn and practice self-management skills.

CDSMP is an evidence-based, self-management intervention program for adults that focuses on disease management skills. Its purpose is to enhance participants' self-efficacy, or their confidence in managing their health. The program teaches participants how to manage their symptoms, communicate effectively with their providers, make informed decisions, and set realistic goals. The program also teaches participants how to manage physical exercise, pain management, and emotional management. Participants can also learn how to evaluate treatments, and how to make informed decisions with their provider relationships, in addition to reducing health care expenditures. Policy and billing guidelines pertaining to NYS Medicaid coverage of CDSMP are provided in the Chronic Disease Self-Management Program (CDSMP) web page.

Stories in Behavioral Health Medicaid CDSMP Providers:

1. **Achieve SMART Recognition**
   Dr. Ellen Ryan, a CDSMP provider with Medicaid as a CDSMP provider the applying organization must be SMRC-licensed. Licensing requirements and additional SMRC requirements are provided in the Self-Management Resource Center Implementation Manual, Section 2.
2. **Apply to Become a NYS Medicaid CDSMP Provider**
   Dr. Ellen Ryan, a CDSMP provider with Medicaid as a CDSMP provider and her motivation for rendering CDSMP services to her patients.
3. **Become a Medicaid CDSMP Provider**
   Dr. Ellen Ryan, a CDSMP provider with Medicaid as a CDSMP provider and her motivation for rendering CDSMP services to her patients.

Clinics looking to render and be paid for CDSMP services must comply with NYS Medicaid provider enrollment requirements and **must** complete the Self-Management Resource Center Implementation Manual, Section 2 and submit the required documents. The Self-Management Resource Center and district NYS Medicaid providers will review the Self-Management Resource Center Implementation Manual Section 2 of the provider that may be active under a different NPI and CDS.

- Review the Self-Management Resource Center – Implementation Manual for Providers – General Billing document and
- comply with provider billing requirements.

Additional information about participating in the NYS Medicaid program as a CDSMP provider, including the required CDSMP provider enrollment forms, can be found on the Chronic Disease Self-Management Program (CDSMP) web page.

Please note: CDSMP services are provided as preventive services pursuant to 42 Code of Federal Regulations (CFR)1905(a) and must be ordered by a NYS Medicaid-enrolled provider. Providers who are not enrolled in NYS Medicaid cannot order services for their patients.

1. Provide NYS Medicaid CDSMP Services and Bill NYS Medicaid
Providers who are enrolled in NYS Medicaid as a CDSMP provider the applying organization must be SMRC-licensed. Licensing requirements and additional SMRC requirements are provided in the Self-Management Resource Center Implementation Manual, Section 2.

2. Apply to Become a NYS Medicaid CDSMP Provider
Providers who are enrolled in NYS Medicaid as a CDSMP provider, and Community-Based Organizations (CBOs) that have achieved SMRC CDSMP recognition can apply to become a NYS Medicaid CDSMP provider and be reimbursed for rendering CDSMP services to their patients.

3. Become a Medicaid CDSMP Provider
Providers who are enrolled in NYS Medicaid as a CDSMP provider, and Community-Based Organizations (CBOs) that have achieved SMRC CDSMP recognition can apply to become a NYS Medicaid CDSMP provider and be reimbursed for rendering CDSMP services to their patients.

Clinics looking to render and be paid for CDSMP services must comply with NYS Medicaid provider enrollment requirements and **must** complete the Self-Management Resource Center Implementation Manual, Section 2 and submit the required documents. The Self-Management Resource Center and district NYS Medicaid providers will review the Self-Management Resource Center Implementation Manual Section 2 of the provider that may be active under a different NPI and CDS.

- Review the Self-Management Resource Center – Implementation Manual for Providers – General Billing document and
- comply with provider billing requirements.

Additional information about participating in the NYS Medicaid program as a CDSMP provider, including the required CDSMP provider enrollment forms, can be found on the Chronic Disease Self-Management Program (CDSMP) web page.

Please note: CDSMP services are provided as preventive services pursuant to 42 Code of Federal Regulations (CFR)1905(a) and must be ordered by a NYS Medicaid-enrolled provider. Providers who are not enrolled in NYS Medicaid cannot order services for their patients.

Questions
Questions regarding recorded training video should be directed to the eMedNY Call Center at (800) 343-9680.

Back to Top

Recipient Restriction Program Restriction Edits Restored

Effective January 24, 2025, restriction edits supporting the Recipient Restriction Program have been restored. As a result, if restricted recipients are identified, claims will pend for review, or deny, based on the restriction.

Any assigned prescriber or pharmacy (PCP) is responsible for providing direct medical care or coordinating care through referral to another medical provider for specialty services. The assigned PCP is also responsible for ordering all non-emergency transportation, laboratory, durable medical equipment, medical supplies, home health care services, and prescribed medications for their patient. The assigned PCP is also responsible for providing prior authorization and concurrent review for services requiring prior approval, and for authorizing payment for services provided by other providers when they are on the claim as the referring provider.

Recipients restricted to a pharmacy for a restricted recipient is expected to coordinate with the assigned PCP to safely manage the delivery of medications. Pharmacies are required to dispense medications to restricted recipients in accordance with the prescribed quantities and dosage instructions. Failure to filling prescriptions without regard to restriction requirements if the prescriptions were written as part of an emergency department visit or by a non-assigned prescriber, may result in the pharmacy being placed on a restriction. Pharmacies are required to contact the assigned PCP for their patient, if they have questions about the medications prescribed. Pharmacies are also required to contact the assigned PCP when providing all non-emergency inpatient services to the restricted recipient except for services provided pursuant to an authorized referral.

Emergency services are defined as follows:

In the context of an emergency, such as drug shortages, unexpected pharmacy closures, and/or unprescribed brand medicines prescribed and pharmacy not in the network, the following exceptions are permitted:

During **normal business hours**, the restricted recipient must be reassigned to an alternate PCP in the provider network or an alternate pharmacy location by:

- **New York State (NYS) Office of the Medicaid Inspector General (OMIG)**
  - Call (833) 410-6464 or email: Recipient_Restriction@omig.ny.gov (Monday 9 a.m. through 5 p.m.)
- **the Local Department of Social Services (LDSS).** If the restricted recipient resides outside the LDSS (Upstate resident),
  - Call the Medicaid Restriction Program Coordinator at the LDSS to request reassignment to a new provider.
- **the New York State Medicaid Fee-for-Service (FFS) Program.** If the restricted recipient has a managed care Medicaid coverage (a MCO, HIV-PCP, HIV-related),
  - Call (800) 342-3715 (DOH).
- **the Managed Care Plan (MCP).** If the restricted recipient obtained health coverage via MCP/DOH,
  - Call the plan's member services.

Effective April 1, 2025, coverage will be limited to the following under the counter (OTC) products:

- **Removed from the** New York State Department of Health Limit of Medicaid Reimbursable Products, **Incontinence Products**
  - DYE and protective underwear/pants
  - DYE and products containing lotion/cream
  - DYE and products containing wipes
  - DYE and products containing barrier creams or ointments.
- **Remain on the** New York State Department of Health Limit of Medicaid Reimbursable Products, **Incontinence Products**
  - Disposable underpads, pads, liners, and protective underwear/pants for children ages 0 to 21 years of age. This age will state they are included under pediatric products.

Additional information and Questions:
Providers should refer to the NYS DOH Medicaid OUR Board, providers should refer to the NYS Department of Health Drug Utilization Review (DUR) Board.
For DME information on NYRx, the Medicaid Pharmacy PA program, providers should refer to the NYRx, the Medicaid Pharmacy Program Frequently Asked Questions (FAQs) and the NYRx Pharmacy Prior Authorization Program web page.
For prescriber-administered drug Clinical Criteria Utilization Reviews, providers should refer to the NYS DOH, New York State Medicaid Fee-for-Service Clinical Criteria Utilization Review Program web page.
Medicaid Managed Care Plan (MCP) members should contact their plan for information on their plan's specific rules and procedures.
Medicaid Managed Care Plan (MCP) members should contact their plan for information on their plan's specific rules and procedures.
Have your seals, and shifts with pharmacy technicians and pharmacists who will work with you in your quest to quickly obtain a PA.
NYS Medicaid-enrolled providers can also review the requests using the web based portal for Medicaid Fee-for-Service Prior Authorization Program Workspace or accessible via the eMEDNY Home page, by selecting the Workspace button on the bottom-right of the web page.

Back to Top

Notice for Incontinence Products

Back to Top

NYRx Pharmacy Drug Coverage: Claims Processing Enhancements and Reminders

This communication serves as a reminder to all pharmacies and prescribers of recent updates and enhancements, to adhere to the policies and procedures of the New York State (NYS) Medicaid program.

Billing Guidance

Pharmacy billing and claiming program, covers most medically necessary Food and Drug Administration (FDA)-approved drugs when used for NYS Medicaid-covered FDA-approved or compendia-supported indications.

The New York State Department of Health Limit of Medicaid Reimbursable Products, is maintained by the NYS Commissioner of Health, as previously stated in past Medicaid Update articles, including in the Medicaid Pharmacy List of Reimbursable Drugs article published in the June 2021 issue of the Medicaid Update. The Medicaid Pharmacy List of Reimbursable Drugs, is updated on a quarterly basis, and posted on the NYS Medicaid Pharmacy Program web page.

Only those prescription and non-prescription drugs, which appear on the list, with their 5-digit NDCs, are reimbursable under NYRx. The list also includes the maximum quantities allowed per prescription, and the number of refills allowed. Pharmacies are required to submit claims using the NDCs listed on the NYS Medicaid Website.

Drug Coverage Limitations

NYRx Medicaid provides reimbursement for drugs included on the New York State Department of Health List of Medicaid Reimbursable Products, which provides for a facility which includes the cost of drugs on their attendance rates. The following are exceptions to the Medicaid Pharmacy Program's coverage of drugs:

- Drugs used for the treatment of erectile dysfunction, except when medically necessary for a diagnosis of pulmonary hypertension.
- Drugs used for the treatment of anorexia, weight loss, or weight gain.
- Drugs without a federal rebate agreement or a rebate agreement with a State authorized by the Secretary pursuant to 42U.S.C.1396r-8(a)(1)(A) and (B) and (a)(2)(A) and (B) and (a)(3)(A) and (B).
- Any animal vaccine, except for veterinary rabies vaccine.
- Drugs packaged in unit doses for which bulk product exists.

Claims Processing

Pharmacy claims are processed through the Medicaid Fee-for-Service (FFS) Pharmacy Drug Coverage Claims Processing Enhancements and Reminders article in the monthly issue.

Resources:

- Medicaid Pharmacy Program Guide (DOH) Jan'21 Ed
- NYRx Pharmacy Program – How to identify and Monitor approved
- New York State eMEDNY Billing Guidelines – Pharmacy (the eMEDNY "Pharmacy Manual" web page)
- NYRx Medicaid Pharmacy Program Frequently Asked Questions

Questions and Additional Information:

- Questions regarding this pharmacy bulletin should be directed to NYRx@health.ny.gov.
- Questions regarding the pharmacy billing guidelines should be directed to eMEDNY at (800) 343-9680. The **eMedNY Call Center** hours are Monday through Friday from 8 a.m. to 5 p.m., and Saturday through Sunday from 8 a.m. to 4:30 p.m.

Back to Top

Provider Directory

- **Office of the Medicaid Inspector General**
  Report Medicaid fraud or abuse: Call toll-free at (877) 87-FRAUD, (877-873-7283), or visit Office of Medicaid Inspector General (OMIG) web site.
- **Provider Relationship/Complaint Guides, Enrollment Information/Forms/Training Schedules**
  Please visit the eMedNY website.
- **Physicians wishing to listen to the current week's check/EFT amounts:**
  Please call the eMedNY Call Center at (800) 343-9680 (listen to the current week's amount).
- **For questions about billing and performing MEDITI on-line:**
  Please call the eMedNY Call Center at (800) 343-9680.
- **Provider Training:**
  Please contact the Provider Relations & provider seminar, For individual training requests, call (800) 343-9680.
- **Beneficiary Eligibility:**
  Call the Touchtone Telephone Verification System at (800) 807-111.
- **Medicaid Prescriber Education Program:**
  Please contact the Medicaid Prescriber Education Program at:
  - DOH Prescriber Education Program
  - Prescriber Education Program in partnership with SUNY
- **Pharmacy:**
  Information of services, including drugs, allowable dosages, updating an enrollment file for an existing provider, changes in ownership, enrolling another NPI, or revalidating an existing enrollment, please visit eMedNY's Provider Enrollment page and choose the appropriate link based on provider type.
- **Comments and Suggestions Regarding This Publication:**
  Please contact the editor, Angela Lincoln, at medicaidupdate@health.ny.gov.

Like and Follow on Social Media:

NY State of Health | NYSDOH Medicaid

The Medicaid Update is a monthly publication of the New York State Department of Health

James McDonald, M.D., M.P.H.
Director
New York State
Medicaid Program

Anne Sumner
Deputy Director
Office of Health Insurance Programs

Kathy Hochul
Governor
State of New York

Mary Mahoney
Commissioner
New York State Department of Health