



# **MO HealthNet**

# Navigating Provider Resources

September 2022 Education & Training

## **PowerPoint Overview**

- Provider Information Page
- Provider Manual
- CyberAccess
- Forms
- Fee Schedules
- Provider Resource Guide
- Contact Information

# Log On to eMOMED



eMOMED | Contact | Troubleshooting



### **eMOMED** Path to Resources



# **Provider Information Page**



Pregnant Women & Newborns

Uninsured Women

Families

Fee-For-Service vs. Managed Care – Click on appropriate selection

· People with Disabilities

Blind & Visually Impaired

. Women with Breast or Cervical Cancer

# Managed Care Provider Page

### **Managed Care Providers**

home » mo healthnet division » providers » managed care providers

If you provide services to kids, pregnant women & newborns, uninsured women, and families who get their health care services through MO HealthNet, you can provide services through the MO HealthNet Managed Care Program.

MO HealthNet Managed Care services are provided in accordance with the terms and conditions of the contract between MO HealthNet and the Managed Care health plans. Managed Care participants get their services through the health plan's provider network. A participant cannot be billed for the difference between the MO HealthNet payment and the provider's billed charges, sometimes called "budget billing."

If you would like to contract with a Managed Care health plans you should contact the health plan directly. You will need to sign a contract with them to be considered in network for that health plan. Providers are not currently required to enroll with MO HealthNet to serve members through the Managed Care health plans but are encouraged to do so.

Listed below are the different MO HealthNet Managed Care health plans participants can choose from. Each health plan provides services in every Missouri County. All MO HealthNet Managed Care health plans are required to offer the same **services and benefits**.



**?** Frequently Asked Questions

# **Managed Care Plans**









Providers should contact the Managed Care plan directly regarding billing and coverage information for participants enrolled in a Managed Care plan.

# Fee-For-Service **Provider Information Page**

#### Fee-For-Service Providers

home » mo healthnet division » providers » fee for service providers

If you provide services to people with disabilities, seniors, blind & visually impaired, or women with breast or cervical cancer who get their health care services through MO HealthNet, you can provide services through the Fee-For-Service Program. Providers must be enrolled in the MO HealthNet program to provide medical services through the Fee-For-Service Program.

If you participate in the MO HealthNet program, you agree to accept MO HealthNet payment as reimbursement in full for any services provided to MO HealthNet. participants. A participant cannot be billed for the difference between the MO HealthNet payment and the provider's billed charges, sometimes called "budget or balance billing."



Frequently Asked Questions

#### Policies & Procedures

- Provider Bulletins
- Provider Hot Tins
- Provider Manuals
- Out-of-state non-bordering services

#### Billing

- Apply for EMOMED
- EMOMED
- CYBERACCESS is GEMT Uncompensated Cost Reimbursement Program, updated 10/21/19
- Claims processing and payment schedule
- Exempt Diagnosis Table . updated 10/01/20
- HIPAA EDI companion guide
- Radiology benefit management information Remittance Advice Remark Codes and Claim Adjustment Reason Codes
- SDAC and IEP Direct Services Cost Settlement
- Telemedicine

#### Provider Forms

- MO HealthNet forms
- Nursing Facility Cost Report
- EBPT Invoice Form (2)

#### General Information

- · Electronic Health Records incentive program
- Electronic Visit Verification Program
- MO HealthNet Provider COVID-19 Updates
- MO HealthNet provider search
- System maintenance Schedule 2
- Curing hep C in Missouri
- · Other links of interest
- Nursing Home Reimbursement Resources

#### Fee Schedules & Rate Lists

- Fee Schedules
- TRHC Medicare/Medicaid Interim Rate list
- Nursing Facility Rate list
- Outpatient Hospital Radiology Fee Schedule 2021 2 - Previous Versions (2020 2), (2019
- 图), (2018 图) Outpatient Hospital Surgical Procedural Fee schedule, effective 01-01-19 13, updated 11/30/18
- Outpatient Hospital Lab Fee schedule.
- effective 01/01/21 23, updated 04/08/21 Outpatient Hospital Simplified Fee Schedule
- effective July 20, 2021 2 Outpatient Hospital Simplified Fee Schedule
- effective July 1, 2022 2

#### Education and Training

- Benefit Tables (formerly Benefit Matrix) This shows the various benefits for each MO HealthNet
- programs, and if they have cost sharing or co-pays. Provider Resource Guide This guide provides descriptions of medical eligibility code, shows limited and comprehensive benefits and provides abundant MO HealthNet contact information.
- Education and Training Resources Offers provider webinar and workshop schedules, educational power point resources and audio visual
- Contact Education and Training (3), updated 08/10/2022

#### Provider Enrollment

- Civil rights compliance information
- · Enrollment guide information and requirements for new applicants and existing providers
- Missouri Medicaid Audit & Compliance (MMAC)
- Provider enrollment application

#### **MO HealthNet Division** Apply for Healthcare My Healthcare Benefit Managed Care Health Plans Walver Programs **Pharmacy and Clinical Services** Provider Information General Information MO HealthNet FFS Provider Search MO HealthNet Division Home

#### MO HealthNet Opioid Prescription Intervention (OPI) Program



#### Contact Us

#### Provider Communications:

(573) 751-2896

For questions about claim filing, claims resolution and disposition, and participant verification.

#### Education & Training:

(573) 751-6683 or Email

For education about proper billing methods, claim filing, and training information.

To contract with the health plans, contact them

#### Managed Care Provider Communications:

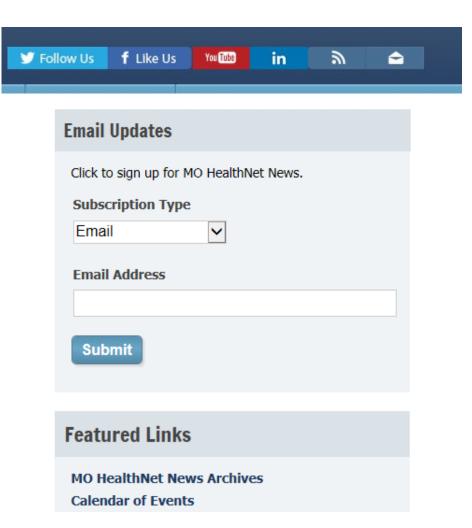
Email for questions about claims, policy and general questions.

### **MO HealthNet News**

### **Stay Informed**

- Provider Bulletins
- Email Blasts
- Hot Tips
- Alerts
- Notifications
- Follow us on social media

### Sign Up and Stay Connected



https://dss.mo.gov/mhd/providers/

## **Provider Bulletins**

#### **Provider Bulletins**

- Notify providers of new or updated policies
- Clarify existing policies
- Advise of important program information, rate changes, and new/changed procedure codes

#### **MO HealthNet Division Provider Bulletins**

home » mo healthnet division » providers » pages » bulletins

The MO HealthNet Program publishes provider bulletins as necessary to clarify existing program and policy or explain new policy. Bulletins are posted at this location and will remain here until they are incorporated into the provider manuals as appropriate. At that time, the bulletins will be moved to the Archives.

#### **Archived Bulletins**

Issue Date	Provider Bulletin Description
Aug 05, 2022	Pediatric Vaccine Counseling, 🙆 Vol 45, No. 18
July 29, 2022	Ambulatory Surgical Center Fee Increases, 🔁 Vol 45, No. 17
July 29, 2022	Physician Fee Increases, 🙆 Vol 45, No. 16
July 29, 2022	Rate Update For Dental Services, 🙆 Vol 45, No. 15
July 29, 2022	Rate Update For Audiology Services, 🙆 Vol 45, No. 14
July 29, 2022	Rate Update For Optical Services, 🔁 Vol 45, No. 13

# **Provider Hot Tips**

### Tips to assist providers with:

- Billing questions
- Clarify existing policies and processes
- Provider Resources

#### 2022 MO HealthNet Provider Hot Tips

home » mo healthnet division » providers » pages » provtips

The MO HealthNet Division publishes Hot Tips to supply information to clarify and assist in receiving timely reimbursement for services provided and claims disposition.

MO HealthNet has developed an index for historical and ongoing Hot Tips and a COVID-19 index for associated Hot Tips. The non-COVID-19 index location has not moved; it is also located below for quick reference. Please share these Hot Tips with your billing staff.

#### **Hot Tip Indices**

- Hot Tip Index By Topic/Subject 👰
- COVID-19 Hot Tip Index 6

#### **2022 Provider Tips Index**

- · COVID Testing and Specimen Collection Codes
- Enrolling Pharmacists
- · Chiropractic Medicine
- At-Home COVID Test Coverage
- COVID-19 Outpatient Inhaler Treatment
- · Telehealth Services
- Biopsychosocial Treatment of Obesity Policy Clarification

# **Provider Hot Tips**

# Hot Tip Indices Hot Tip Index By Topic/Subject See Index to find the pertinent Hot Tip COVID-19 Hot Tip Index See Index to find the pertinent Hot Tip

#### **2022 Provider Tips Index**

- COVID Testing and Specimen Collection Codes
- Enrolling Pharmacists
- Chiropractic Medicine
- · At-Home COVID Test Coverage
- · COVID-19 Outpatient Inhaler Treatment
- · Telehealth Services
- · Biopsychosocial Treatment of Obesity Policy Clarification
- · COVID-19 Oral Antiviral Treatment
- · DME Walker Criteria

## **Provider Manuals**

- Policy
- Benefits and Limitations
- Procedure/Revenue codes
- Billing Instructions



## **Provider Manuals**

The table of contents is very detailed.

SECTION 1-PARTICIPANT CONDITIONS OF PARTICIPATION	16
1.1 INDIVIDUALS ELIGIBLE FOR MO HEALTHNET, MANAGED CARE OR ST	ATE
FUNDED BENEFITS	16
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1.2.C(5) Presumptive Eligibility for Children	24
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1.2.C(7) Voluntary Place Present 2. 1 452. — +	

# General vs. Program Specific Sections

### **General Sections:**

Universal Sections published in each manual – Written broadly to encompass all providers (Sections: 01-10NA and 16, 17, and 20-23)

### **Program Specific Sections:**

Specific to each MO HealthNet Program (Sections: 12-15 and 18, and 19)

## **Provider Manual Resource**

#### Provider Manual by Section

Each <u>Provider Manual</u> has General Sections and Program Specific Sections. The General Sections are consistent throughout all Provider Manuals. These sections are written very broadly to encompass many program types. The Program Specific Sections will include important information pertinent to the program/provider type.

Section	Description			
General Section 1	Participant Conditions of Participation			
General Section 2	Provider Conditions of Participation			
General Section 3	Stakeholder Services			
General Section 4	Timely Filing			
General Section 5	Third Party Liability			
General Section 6	Adjustments			
General Section 7	Medical Necessity			
General Section 8	Prior Authorization			
General Section 9	Healthy Children and Youth Program			
General Section 10	Family Planning			
General Section 11	MO HealthNet Managed Care Program Delivery System			
Program Specific Section 12	Reimbursement Methodology			
Program Specific Section 13	Benefits and Limitations			
Program Specific Section 14	Special Documentation Requirements			
Program Specific Section 15	Billing Instructions			
General Section 16	Medicare/Medicaid Crossover Claims			
General Section 17	Claims Disposition			
Program Specific Section 18	Diagnosis Codes			
Program Specific Section 19	Procedure Codes (Includes: HCPC, CDT, and Revenue Codes)			
General Section 20	Exception Process			
General Section 21 Advance Health Care Directives				
General Section 22	Non-Emergency Medical Transportation			
General Section 23	Claim Attachment Submission and Processing			

# Searching the Provider Manual

### How to search the manual?

Use **control "F"** search function to find information in the manuals.

- Start with the section you think the information is in.
   example "Section 13"
- Then search by Key words.

  examples: "Surplus, Spenddown, Dentures, D0120..."

# Billing

- Apply for EMOMED
- •EMOMED
- •CYBERACCESS
- •GEMT (Ground Emergency Medical Transportation) Uncompensated Cost Reimbursement Program, updated 10/21/19
- Claims processing and payment schedule
- Exempt Diagnosis Table, updated10/01/20

### Billing

- Apply for EMOMED
- EMOMED
- CYBERACCESS
- GEMT Uncompensated Cost Reimbursement Program, updated 10/21/19
- · Claims processing and payment schedule
- Exempt Diagnosis Table 🙆, updated 10/01/20
- HIPAA EDI companion guide
- · Radiology benefit management information
- Remittance Advice Remark Codes and Claim Adjustment Reason Codes
- SDAC and IEP Direct Services Cost Settlement
- Telemedicine

# **Billing**

- HIPAA (Health Insurance Portability and Accountability Act) - EDI (Electronic Data Exchange) companion guide
- Radiology benefit management information
- Remittance Advice Remark Codes and Claim Adjustment Reason Codes \*
- SDAC (School District Administrative Claiming) and IEP (Individualized Education Plan) Direct Services Cost Settlement
- Telemedicine

### **Billing**

- Apply for EMOMED
- EMOMED
- GEMT Uncompensated Cost Reimbursement Program, updated 10/21/19
- · Claims processing and payment schedule
- Exempt Diagnosis Table 2, updated 10/01/20
- HIPAA EDI companion guide
- · Radiology benefit management information
- Remittance Advice Remark Codes and Claim Adjustment Reason Codes
- SDAC and IEP Direct Services Cost Settlement
- Telemedicine

## **eMOMED**

- Submit, adjust, or research Fee-For-Service claims
- Check eligibility
- Prior Authorization status
- Messaging tool for claim or eligibility questions
- Access to Claim Confirmation and Remittance Advice
- Provider Enrollment Status

# Quick link to CyberAccess



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Version: 10.7

Frequently Asked Questions System Requirements

For technical support with CyberAccess please call 1-888-581-9797

CYBERACCESS FLYER

# CyberAccess

- The CyberAccess tool enables providers to obtain precertifications for specific items and services electronically.
- CyberAccess can automatically reference the individual participant's claim history, including applicable International Classification of Diseases (ICD) diagnosis codes and Current Procedural Terminology (CPT) procedure codes.
- Requests for precertification must meet medical criteria established by the MO HealthNet Division in order to be approved.

# CyberAccess

Pre-certification is available for the following services:

- Radiology
- Durable Medical Equipment (DME)
- Optical
- Inpatient
- Drug Prior Authorization (PA)
- Clinical Edit Override (EO)

# Claims Processing and Payment Schedule

#### MO HEALTHNET CLAIMS PROCESSING SCHEDULE FOR FISCAL YEAR 2023

FINANCIAL	PROVIDER CHECK	BEGINNING CLAIM	ENDING
CYCLE DATE	DATE	CAPTURE CURRENT CYCLE	CLAIM CAPTURE <sub>1</sub>
Friday 06/24/2022	Thursday 07/07/2022	Wednesday 06/08/2022	Friday 06/24/2022
Friday 07/08/2022	Friday 07/22/2022	Saturday 06/25/2022	Friday 07/08/2022
Friday 07/22/2022	Friday 08/05/2022	Saturday 07/09/2022	Friday 07/22/2022
Friday 08/12/2022	Friday 08/19/2022	Saturday 07/23/2022	Friday 08/12/2022
Friday 08/26/2022	Friday 09/09/2022	Saturday 08/13/2022	Friday 08/26/2022
Friday 09/09/2022	Friday 09/23/2022	Saturday 08/27/2022	Friday 09/09/2022
Friday 09/23/2022	Friday 10/07/2022	Saturday 09/10/2022	Friday 09/23/2022
Friday 10/07/2022	Wednesday 10/19/2022	Saturday 09/24/2022	Friday 10/07/2022
Friday 10/21/2022	Friday 11/04/2022	Saturday 10/08/2022	Friday 10/21/2022
Friday 11/11/2022	Friday 11/18/2022	Saturday 10/22/2022	Friday 11/11/2022
Friday 11/25/2022	Friday 12/09/2022	Saturday 11/12/2022	Friday 11/25/2022
Friday 12/09/2022	Friday 12/23/2022	Saturday 11/26/2022	Friday 12/09/2022
Friday 12/23/2022	Friday 01/06/2023	Saturday 12/10/2022	Friday 12/23/2022
Friday 01/06/2023	Wednesday 01/18/2023	Saturday 12/24/2022	Friday 01/06/2023
Friday 01/20/2023	Friday 02/03/2023	Saturday 01/07/2023	Friday 01/20/2023
Friday 02/03/2023	Friday 02/17/2023	Saturday 01/21/2023	Friday 02/03/2023
Friday 02/24/2023	Friday 03/03/2023	Saturday 02/04/2023	Friday 02/24/2023
Friday 03/10/2023	Friday 03/24/2023	Saturday 02/25/2023	Friday 03/10/2023
Friday 03/24/2023	Thursday 04/06/2023	Saturday 03/11/2023	Friday 03/24/2023
Friday 04/07/2023	Wednesday 04/19/2023	Saturday 03/25/2023	Friday 04/07/2023
Friday 04/21/2023	Friday 05/05/2023	Saturday 04/08/2023	Friday 04/21/2023
Friday 05/12/2023	Friday 05/19/2023	Saturday 04/22/2023	Friday 05/12/2023
Friday 05/26/2023	Friday 06/09/2023	Saturday 05/13/2023	Friday 05/26/2023
Friday 06/09/2023	Friday 06/23/2023	Saturday 05/27/2023	Wednesday 06/07/2023

Note 1: Ending Claim Capture date - Closeout is 5:00 p.m. on the date shown

# Remittance Advice Remark Codes and Claim Adjustment Reason Codes

- With the implementation of HIPAA national standards, previously used MO HealthNet edits and Explanation of Benefits (EOBs) will no longer appear on the Remittance Advice (RA).
- Instead, HIPAA compliant Remittance Advice Remark (RARC) and Claim Adjustment Reason Codes (CARC) are used.
- Explanations of RARC and CARC are available through the Internet at: <a href="http://www.wpc-edi.com/reference/">http://www.wpc-edi.com/reference/</a>

# Remittance Advice Remark Codes and Claim Adjustment Reason Codes

Home / Products / External Code Lists

### External Code Lists

The table below includes external code lists maintained by X12 and external code lists maintained by others and distributed by WPC on behalf of the maintainer. Click on the name of any external code list to access more information about the code list, view the codes, or submit a maintenance request. These external code lists were previously published on either www.wpc-edi.com/reference or www.x12.org/codes.

The table includes additional information for X12-maintained external code lists. If you have questions about these lists, submit them on the X12 Feedback form. To purchase code list subscriptions call (425) 562-2245 or email admin@wpc-edi.com 

...

Name	ID	Scope Statement	Maintained by
Claim Adjustment Group Codes	974	These codes categorize a payment adjustment.	CMG01
Claim Adjustment Reason Codes	139	These codes describe why a claim or service line was paid differently than it was billed.	CMG03
Claim Status Category Codes	507	These codes organize the Claim Status Codes (ECL 139) into logical groupings.	CMG03
Claim Status Codes	508	These codes convey the status of an entire claim or a specific service line.	CMG03

Source: <a href="http://www.wpc-edi.com/reference/">http://www.wpc-edi.com/reference/</a>

### **Provider Forms**

#### **MO HealthNet Forms:**

- Certificate of Medical Necessity
- Diabetic Supplies Prior Authorization
- Exception Request Form
- Insurance Resource Report Form
- Prior Authorization Request Form
- Provider Spend Down Form
- Sterilization Consent Form
- Temp Eligibility Determination

## **MHD Fee Schedule**



Medical Service	Medical Services										
		~									
ProcCode	М1	M2	PA1	PA2	PA3	PI	EffDate	RelVal	Spec Fee	Qty	
99211						3	07/01/2019	0.0	\$15.3	1	1
99211	EP					3	07/01/2019	0.0	\$17.2	:8	1
99211	GE					3	07/01/2019	0.0	\$14.7	8	1
99211	GE	EP				3	07/01/2019	0.0	\$17.2	8	1
99211	GT					3	07/01/2019	0.0	\$14.7	8	1
99211	GT	EP				3	07/01/2019	0.0	\$17.6	15	1
99211	X4		J			3	07/01/2019	0.0	\$13.5	5	1
99211	YG					9	10/16/2003	0.0	\$0.0	10	1

 MHD Price File Key – gives additional information regarding codes in each column

Note: Should you have landed here as a result of a search engine or other link, be advised that these files contain material that is

copyrighted by the American Medical Association. You are forbidden to download the materials unless you read, agree to and

Modifier Information: pricing, active/inactive, routing, etc.

Fee Schedule Search

abide by the provisions of the copyright statement.

## Other Fee Schedules

#### Fee Schedules & Rate Lists

- Fee Schedules
- IRHC Medicare/Medicaid Interim Rate list
- Nursing Facility Rate list
- Outpatient Hospital Radiology Fee Schedule
   2021 Previous Versions (2020 ), (2019 ), (2018 )
- Outpatient Hospital Surgical Procedural Fee schedule, effective 01-01-19 , updated 11/30/18
- Outpatient Hospital Lab Fee schedule, effective 01/01/21 , updated 04/08/21
- Outpatient Hospital Simplified Fee Schedule effective July 20, 2021
- Outpatient Hospital Simplified Fee Schedule effective July 1, 2022

# **Benefit Tables**

### This shows the various benefits for each MO HealthNet program.

#### **MO HealthNet Benefit Tables**

Master list of covered services

Copay Requirements and Exemptions

Issue Date	Service
12/22/2021	Ambulance (emergency only)
12/22/2021	Ambulatory Surgical Center 🙆
12/22/2021	Behavioral Health Services
12/22/2021	Dental 🙆
12/22/2021	Durable Medical Equipment (DME) 🙆
12/22/2021	Habilitative Occupational_Physcial_and_Speech Therapies 🙆
12/22/2021	Hearing Aid 🙆
12/22/2021	Home Health 🖄
12/22/2021	Hospice 💆
12/22/2021	Hospital
12/22/2021	Long Term Care
12/22/2021	Non-Emergency Medical Transportation (NEMT) 🙆

Dental					
Coverage Group/ME Codes	Covered				
MO HealthNet for Adults 05, 10,19, 21, 24, 26, E2	Limited*				
MO HealthNet for Pregnant Women 18, 43, 44, 61, 95, 96, 98	Yes				
20, 10, 11, 12, 10, 10, 10, 10, 10, 10, 10, 10, 10, 10					
MO HealthNet for Kids 06, 07, 08, 29, 30, 36, 37, 38, 40, 50, 52, 56, 57, 60, 62, 64, 65, 66, 68, 70	Yes				
CHIP Kids 71, 72, 73, 74, 75, 97	Yes				
Uninsured Women's Health Services 80, 89	No				
Traditional Medicaid 01, 04, 11, 13, 14, 16, 85, 86	Limited*				
BCCCP 83, 84	Limited*				
Blind Programs 02, 03, 12, 15	Yes				
Children's Programs 23, 28, 33, 34, 41, 49, 67, 88	Yes				
Temporary Women's Assistance for Pregnant Women 58, 59, 94	Limited**				
Temporary Women's Assistance for Freghant Women's 6, 53, 54	Lillited				
Presumptive Eligibility for Children 87	Yes				
Qualified Medicare Benficiary (QMB) 55	No				
Missauri DV Distr (MOD.) 93	NI-				
Missouri RX Plan (MORx) 82	No				

Notes: \*Children under 21 years of age and participants in catergory of assistance for pregnant women, the blind or vendor nursing facility residents are eligible for the complete dental benefit. MO HealthNet considers additional dental services for adults with certain pre-existing medical conditions. Such services require a written referral from the participant's physician that must state the absence of the dental treatment would adversely affect a specific pre-existing medical condition. For additional information, please see your provider manual, Section 13.1. \*\*Limited coverage for ambulatory prenatal care.

Dental Manual

Provider Bulletins

Please check fee schedule; certain restrictions apply.

## Provider Resource Guide

### **Provider Resource Guide**

This guide provides descriptions of medical eligibility codes, shows limited and comprehensive benefits and provides abundant MO HealthNet contact information.

- General overview of MO HealthNet Programs
  - MO HealthNet Fee-for-Service (FFS)
  - MO HealthNet Managed Care
  - MO HealthNet for Kids
  - Children's Health Insurance Program (CHIP)
- General coverage information by MO HealthNet Eligibility (ME) Code
- Resources

## Provider Resource Guide

#### PROVIDER RESOURCE GUIDE

#### MO HealthNet Missouri's Medicaid Program

The MO HealthNet Division provides health care access to low income individuals that are elderly, disabled, members of families with dependent children, children in low-income families, uninsured children, pregnant women, refugees, or children in state custody. Participants are categorized into Medical Eligibility (ME) groups based on their specific factors.

Adult participants in ME categories for Aid to the Blind or pregnant women programs receive a full comprehensive benefit package including: primary, acute and preventive care, hospital care, dental, prescriptions, and vision. All other adult participants 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 which program participants are in by calling the Interactive Voice System (IVR) at 573-751-2896 and using option "1" or online at EMOMED.

#### MO HealthNet Programs

The MO HealthNet FFS program serves eligible participants with disabilities, seniors, blind and visually impaired and women with breast or cervical cancer. All MO HealthNet providers may serve MO HealthNet FFS participants. Participants may freely choose which MO HealthNet provider they go to for care under the FFS delivery system.

The MO HealthNet Managed Care program serves eligible children, pregnant women and newborns, uninsured women and families in all Missouri counties. MO HealthNet Managed Care participants may be seen by any MO HealthNet FFS provider until their enrollment is effective in a MO HealthNet Managed Care health plan. MO HealthNet Managed Care participants must select a health plan and a PCP within the Managed Care health plan. Managed Care providers may refer the participants to other providers based on care needed.

MO HealthNet for Kids refers to the statewide program for children in low-income families, uninsured children through CHIP, and children in the custody of the state. Children receive a full comprehensive package including primary, acute, preventive care, hospital care, dental, prescriptions, and vision. They receive their care through the Managed Care delivery system, unless they have opted out of Managed Care. Please refer to the <a href="mailto:criteria">criteria</a> for opting out.

The Children's Health Insurance Program (CHIP) Premium Group is health insurance for uninsured children who must be under age 19, have a family income 150 to 300% poverty, are uninsured, and have no access to affordable health insurance. These children receive the full comprehensive package; however, they are not eligible for non-emergency medical transportation.

Questions about premiums should be directed to the Participant Services Unit at 1-800-392-2161.



September 201

	Full Comprehensive Package for MO HealthNet Adults						
ME Code	Description						
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 (MO HealthNet for Families criteria)						
44	Pregnant Woman—60 Day Assistance—Poverty						
45	Pregnant Woman—Poverty						
61	MO HealthNet for Pregnant Women—Health Initiative Fund						
95	Show-Me Healthy Babies Pregnant Women income above 196% and up to 300%						
96	SMHB Unborn Child income 0 to 300%						
98	SMHB Post-Partum						
	Limited Benefit Package for MO HealthNet Adults						
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						
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 Refugee						
26	Ethiopian Refugee						
55	Qualified Medicare Beneficiary (QMB)						
58	Presumptive Eligibility (Subsidized)						
59	Presumptive Eligibility (Non-Subsidized)						

## Provider Resource Guide

#### **MO HealthNet Resources**

#### MO HealthNet News

To receive important MO HealthNet updates, please subscribe to MO HealthNet News at: www.dss.mo.gov/mhd

#### **Provider Communications**

This unit is available for providers with questions about proper claim filing, claims resolution or disposition, participant eligibility and verification. Contact Provider Communications at: **(573) 751-2896.** You may also send inquiries to Provider Communication via eMOMED.

#### **Education and Training**

The Education and Training Unit educates providers on proper billing methods and procedures for claim filing. The unit also provides training on billing via eMOMED. Contact Education and Training at (573) 751-6683 or email mhd.provtrain@dss.mo.gov. You may also want to visit the Training Information and Resources page.

#### Provider Enrollment

MO HealthNet Fee-For-Service (FFS): Missouri Medicaid Audit and Compliance (MMAC) is responsible for enrolling MO HealthNet providers. To enroll as a MO HealthNet FFS provider, visit <a href="https://mmac.mo.gov/">https://mmac.mo.gov/</a> or email Provider Enrollment at: <a href="mmac.providerenrollment@dss.mo.gov">mmac.providerenrollment@dss.mo.gov</a>.

MO HealthNet Managed Care: To enroll as a MO HealthNet Managed Care provider, refer to the Managed Care Provider Toolkit for contact information for each of the health plans.

#### Provider Technical Help Desk

The Provider Technical Help Desk can provide technical assistance in establishing the required electronic claims and remittance advice formats, network communication, HIPAA trading partner agreements and eMOMED claim filing service. Contact the Help Desk at (573) 635-3559 or visit <a href="emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeology:emomeo

#### Managed Care Liaison

If you are unable to resolve a Managed Care issue directly with a <a href="health-plan">health-plan</a>, you may contact a Managed Care Liaison at MHD.MCCommunications@dss.mo.gov.

https://dss.mo.gov/mhd/providers/pdf/Provider-Resource-Guide.pdf

# **Education & Training Resources**

#### **Education and Training Resources**

home » mo healthnet division » providers » education

#### **Provider Trainings**

The MO HealthNet Division (MHD) Education and Training Unit provides interactive web based trainings to providers. The trainings are limited to two hours in length. Providers should enroll in training sessions applicable to their provider type, when applicable. When registering for a group, each attendee must register individually.

#### Training Topics:

- Navigating MHD provider resources on the MHD webpage and eMOMED.com
- Electronic Claim Filing on eMOMED.com
  - o Claim form(s) applicable to the program
  - o Third Party Liability
  - o Crossover Claims, if applicable to the program
- Program Benefits and Limitations and Documentation

Once Registered: When logging in for a registered webinar, providers should enter their full name. If using a speakerphone, mute the phone to ensure there is minimal background noise. If you have specific questions that you would like to have addressed during your training, email them to MHD.PROVTRAIN@dss.mo.gov and include the name and date of the webinar you are attending.

#### Provider Training Calendar

4th Quarter Provider Trainings by Program

**To cancel:** If you have scheduled a training session and are upable to participate, contact Education and Training by emailing **MHD.ProvTrain@dss.mo.gov** or by calling 573-77 6683.

#### **Educational PowerPoints and Resources**

- Behavioral Health Resources
- Dental Resources
- · Durable Medical Equipment Resources
- General Resources
- Pharmacy Resources
- Physician and Clinic Resources
- Private Duty Nursing Resources
- Telemedicine Resources

#### **Training calendar**

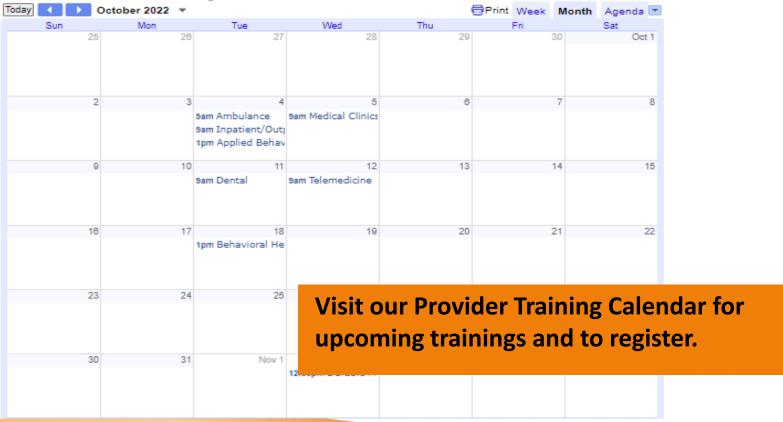
**Provider Resource Materials** 

# **Education & Training Resources**

#### **MO HealthNet Provider Trainings**

home » mo healthnet division » providers » training

#### MO HealthNet Provider Training



https://dss.mo.gov/mhd/providers/education/

# **Education & Training Resources**

Series of PowerPoints and resources available, examples:

- Adding an NPI as a Provider Employee
- PI-118 Form
- Sterilization Consent Form
- Medicare Part B Crossover Claim Filing
- Determining Eligibility

# **Determining Eligibility PowerPoint**

### Step-by-Step explanation of eMOMED eligibility screen

Eligibility / Benefit Inform	ation1 of 8								
Eligibility / Benefit Code	Service Type		Plan Code	Time Period Qualifier	Monetary Amt	Insurance Type	Medicare Nbr	Date Qualifier	From Date
1 - Active Coverage	30 - Health Bene	fit Plan Coverage	11	34 - Month		MC - MO HealthNet		291	04/12/2018 04/12/2018
Eligibility / Benefit Inform	ation2 of 8								
Eligibility / Benefit Code	Service Type		Plan C	ode Time Per Qualifier	iod Monet Amt	ary Insurance Type	Medicare Nb	Date Qualifier	From Date
1 - Active Coverage	1 - Medical Care 35 - Dental Care 47 - Hospital 48 - Hospital - Inp 50 - Hospital - O		11	34 - Mor	th	MC - MO HealthNe	t	291	04/12/201 04/12/201
	86 - Emergency \$	6 – Inactive B – Co-Payn	nent						
		D – Benefit [ F – Limitatio	Descript	ion					
		L – Primary M – Services	s Restric	ted to Fo		g Provider			
			Followir	ng Entity	for Elig	jibility or Benef			
		Y - Spenddo	wn	wwv	v.dss.n	<u>no.gov/mhd.pr</u>	<u>oviders/in</u>	dex/htm	

https://dss.mo.gov/mhd/providers/education/files/determining-eligibility.ppsx





# Resources

# **Resources and Contact Information**

eMOMED Technical Help Desk	Provider Communications Unit
(573) 635-3559	(573) 751-2896
internethelpdesk@momed.com	PO Box 5500, Jefferson City MO 65102
Technical Support and assistance for issues with eMOMED	Provider's initial contact for inquiries, concerns or questions
Establish required electronic claims and RA formats, network	regarding proper claim filing, claims resolution and disposition
communications, HIPAA trading partner agreements	and participant eligibility questions and verification
Pharmacy & Medical Pre-Certification Help Desk	Clinical Services
(800) 392-8030	(573) 751-6963
Pharmacy Clinical Authorizations, edit overrides, medical Pre-	MHD.Clinical.Services@dss.mo.gov
Certifications (outpatient, diagnostic, non-emergency MRI,	Policy development, benefit design, coverage decisions,
MRA, CT, CTA, PET scans and cardiac imaging)	provider and program policy inquiries
Pre-Certification for certain radiological procedures listed at:	
https://portal.healthhelp.com/mohealthnet	
MHD Education & Training	MHD Services & Programs
(573) 751-6683	Ask.MHD@dss.mo.gov
MHD.ProvTrain@dss.mo.gov	All other inquiries regarding programs and policies. Provide
Inquiries regarding education and training for providers and	NPI, name and contact information and complete details
participants	regarding inquiry.
Participant Resources	Family Support Division Info Center
www.mydss.mo.gov	(855) FSD-INFO (600-4412)
(855) 373-9994	
Questions regarding MHD eligibility benefits and application	
process	

# CyberAccess

CyberAccess web address:

https://www.cyberaccessonline.net/cyberaccess

CyberAccess helpful Tips:

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

Account setup or technical questions (888) 581-9797 or (573) 632-9797

cyberaccesshelpdesk@xerox.com

### **Provider Enrollment**

- Located within the Missouri Medicaid Audit & Compliance (MMAC) Unit
- Inquiries regarding enrollment applications, changes to Provider Master File (addresses, tax identification, ownership, individual's name, practice name, National Provider Identification (NPI) number)
- Email: mmac.providerenrollment@dss.mo.gov
- Send written inquiries to:

Missouri Medicaid Audit and Compliance Unit
P. O. Box 6500

Jefferson City, Missouri 65102

# **Contacting Education & Training**

- Requests for provider training may be directed to the Education and Training representatives by calling (573) 751-6683 or by email: <a href="mailto:mhd.provtrain@dss.mo.gov">mhd.provtrain@dss.mo.gov</a>.
- Education and Training representatives offer training and education on billing and procedures for **fee-for-service** MO HealthNet claims.
- The request should include the Provider's Name, National Provider Identifier (NPI), the reason for the request and the type of training needed.
- Inquiries regarding fee-for-service claim filing or denials, Remittance
  Advices and all eligibility questions to include managed care, should be
  directed to the Provider Communications Unit at (573) 751-2896 or on
  eMOMED.

# **Contacting Education & Training**

#### Amanda Fahrendorf (Lead) Jackie Bollinger Daniel Rush Ambulance **Ambulatory Surgical Center** Behavioral Health Services Biopsychosocial Treatment of Dental Applied Behavior Analysis Hearing Aid/Audiology Obesity (ABA) Chiropractic Hospice Comprehensive Day Rehab Complementary and Alternative Non-Emergency Transportation Department of Health & Senior Therapies for Chronic Pain Services (DHSS)/ Division of Skilled Nursing Facility Diabetes Prevention Program Senior Disability Service Nurse Assistant Training Environmental Lead (DSDS) Assessment Aids Waiver Hospital (Inpatient/Outpatient) Adult Day Care Waiver Lead Education & Training Certified Registered Nurse Aged and Disabled Waiver Representative -Physicians (Program) Medically Fragile Adult Oversees the training resources Nurse Practitioner Waiver for all programs, creates and Diabetes Self-Management Department of Mental Health presents additional trainings, Trainina CSTAR handles special assignments Federally Qualified Health CPR related to Education and Training Center (FQHC) Youth Targeted Case and serves as the expert for any Podiatry complicated Medicaid inquiries Management Local Public Health Agency Division of Developmental referred to the Education and Case Management Disabilities – DD Waiver Training Unit. Independent Laboratory Durable Medical Equipment Services (DME) Home Health Independent Radiology Optical Services Personal Care Anesthetists (CRNA Services) EPSDT/HCY Screenings Consumer Directed Services Private Duty Nursing Vaccines for Children VFC Rehabilitation Centers Nurse Midwife Rural Health Clinic (RHC) School Based IEP Services Therapy Transplant Speech Occupational Physical Julie Pace & Kathy Simmons Managed Care Liaisons - MHD.MCCommunications@dss.mo.gov

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home state health.

Healthy Blue United Healthcare Show Me Healthy Kids 💝

# **Helpful Links**

Provider Manual Webpage:

http://manuals.momed.com/manuals

Provider Bulletin Webpage:

http://dss.mo.gov/mhd/providers/pages/bulletins.htm

Hot Tips Webpage:

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