PROVIDER BULLETIN

News and Updates on the Louisiana Medicaid Provider Portal

This Provider Bulletin was developed to answer questions and address concerns providers may have regarding Medicaid's new enrollment and eligibility system. Launched on November 13, 2018, the new system includes a new Provider Portal that replaces the former Facility Notification System (FNS) as **the primary way providers manage documentation** requirements. The Self-Service Portal can be accessed at https://sspweb.lameds.ldh.la.gov/selfservice/.

Presumptive Eligibility for Newborns

A newborn's Medicaid eligibility is largely connected to the mother's eligibility. If the mother is not Medicaid eligible at the time of the newborn's birth, the newborn may still be eligible but a Medicaid application is required. This is especially true if the newborn is determined to be disabled.

A simplified determination of the newborn's disability is based on minimal evidence and is allowed for premature or low birth weight infants and those infants with an allegation or diagnosis of Down syndrome, even if no other medical impairments exist. If the mother does not have Medicaid when her baby is born, and the newborn is thought to be disabled, the Application Center Representative must submit an application for the household indicating assistance is needed for at least mother and newborn. They must ensure the answer is "yes" to question 12 on step 2 of the Application for Health Coverage (BHSF Form 1-A) for the newborn (see Fig. 1 below). If using the online application, make sure to check the box for the newborn on the Aged/Disability Information screen (see Fig. 2 below).

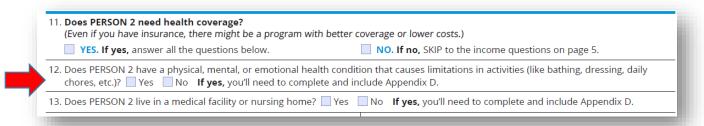


Fig. 1: Application for Health Coverage

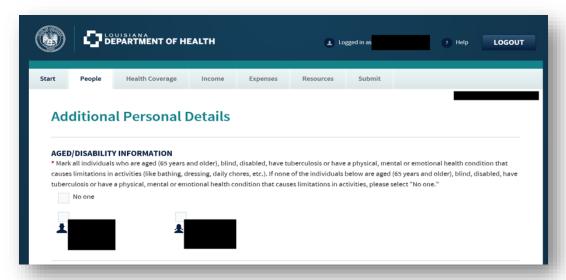


Fig. 2: Aged/Disability Information Screen from the online application

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Long-Term Care Processing Update

Medicaid's fiscal intermediary, DXC, has scheduled bi-weekly recycles of previously denied nursing home claims for dates of service in November and December to address pending requests related to long-term care. The first run took place January 24, with a yield of \$1.9 million in payments made to nursing home providers.

A second recycle run took place February 7, resulting in \$791,680 in payments. An additional \$2.2 million in denied claims were also included in the February 7 run, but were denied for "duplicate payment" because the provider had already rebilled and been paid for the claim as a part of normal claims processing.

A third recycle run is planned for February 21 and will focus on denied nursing home claims for the months of November, December and January.

Application Center Reimbursement

Louisiana Medicaid is working to resolve Application Center reimbursement issues that have been occurring since implementation of our new eligibility and enrollment system. The March payment file should be processed on cycle and Medicaid expects it to resolve any back payments due.

If your Application Center is not currently registered on Medicaid's <u>Self-Service Partner Portal</u>, you must do so now to receive reimbursement. Instructions are located on the <u>AC Resource Library</u>. In addition, you will be required to register with the Division of Administration (DOA) in the near future. Medicaid will post instructions for completing the registration process, including the submission of electronic funds transfer (EFT) and IRS W9 documentation, on the <u>AC Resource Library</u> in the coming weeks.

Any questions regarding Application Center issues may be addressed to ApplicationCenter.Service@la.gov.