

Hot Topics: Latest News

ACS Name Changes to Xerox

ACS is now Xerox. Affiliated Computer Services (ACS) joined the Xerox family two years ago to strengthen its document technology and combine with ACS' expertise in managing and automating work processes. Since that time, Affiliated Computer Services marketed itself as ACS, A Xerox company. Considering the significant progress that has been made in uniting ACS with Xerox, the ACS brand is now being retired.. Effective Sunday, April 1, 2012, Affiliated Computer Services, Inc., also know as ACS and formerly referred to as ACS, A Xerox Company will be referred to as Xerox.

As we move to the Xerox brand, you will see some noticeable changes. In most of our marketing and communications materials, the Xerox name and logo will replace the ACS, A Xerox Company name and logo. You may notice changes in our email addresses as we move to a common xerox.com system, as well as changes in our telephone greetings and office signs.

It will take some time for us to make all of the changes and we are managing the process carefully so there is no impact to your business. Please accept our thanks for your patience during this transition.

IMA Changes Department Name

The Income Maintenance Administration, commonly known as IMA, has changed its name. IMA is now the Economic Security Administration (ESA). All contact information remains the same. ESA determines eligibility for benefits under the Temporary Cash Assistance for Needy Families (TANF), Medical Assistance, Sup-

plemental Nutrition Assistance Program (SNAP) (formerly Food Stamps), Child Care Subsidy, Burial Assistance, Interim Disability Assistance, Parent and Adolescent Support Services (PASS) and Refugee Cash Assistance programs. For additional department information, go to www.dhs.dc.gov.

Fax Number for Provider Enrollment

All provider documentation and correspondences being faxed to Provider Enrollment should be sent to 888-335-8465. If you have any questions or need additional information, contact Provider Enrollment at (202) 906-8318 (inside DC metro area) or (866)752-9231 (outside DC metro area).



Hot Topics: Latest News

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Updated: Billing and Prior Authorization of Personal Care Aide Services Under the District of Columbia (DC) Medicaid State Plan and EPD Waiver

Under DC's Medicaid State Plan, each beneficiary may receive, as needed, up to eight (8) hours of PCA services per day. The actual amount (not to exceed eight hours per day) must be determined based on each beneficiary's inability to perform activities of daily living without assistance, and the amount, duration and scope of PCA services they need to compensate for their disabilities. These PCA services (that may not exceed eight hours per day) may be delivered, as necessary, for up to 1,040 hours per calendar year without needing to be prior authorized. Because PCA services are billed in 15 minute increments, with each increment being one (1) unit of service, a maximum of 32 units of PCA services may be billed per beneficiary per day under the State Plan. PCA services are billed using procedure code T1019. Finally, all PCA services beyond 1,40 hours per calendar year ("extended PCA services") must be prior authorized by DHCF. All extended State Plan PCA services must be billed with its prior authorization number and using procedure code T1019 with modifier U6 (T1019-U6). All State Plan PCA Services must be billed using the Home Health Agency (HHA) State Plan provider number. Refer to transmittal, #12-07 on the Web Portal at www.dc-medicaid.com for additional information.

Web Portal User Account Maintenance DC-Medicaid FAQs

What is the required timeframe for Password changes on the Web Portal?

Web Portal Password requirements:

- * User is required to change their password every 90 days.
- * New password must be between 6 and 12 characters in length, alphanumeric.
- * Passwords are case sensitive.
- * New password must not be similar to last 3 passwords.

What are the password criteria and account expiration / lockout requirements for Web Portal user accounts?

Web Portal Expiration / Lockout out requirements:

- * User accounts will become disabled (locked out) after entering password incorrectly 3 times.
- * User accounts will automatically become disabled if they have had no login activity in 60 days.
- * User will receive an email stating that their User ID will be inactivated in 10 days and a second email stating their User ID will be inactivated in 5 days prior to the 60 day timeframe.

Web Portal User ID Deletion:

- * User accounts will be flagged for deletion if they have had no login activity in 120 days.
- * After 120 days of inactivity, users will receive weekly email notifications informing them that the account will be deleted and they will be required to reregister after account deletion to regain access to the Web Portal.
- * User accounts will be automatically deleted if they have had no login activity in 180 days.

My account is locked out or has been marked 'inactive'. How do I regain access to the Web Portal?

Contact Provider Inquiry at (202) 906-8319 (inside DC metro area) or (866) 752–9233 (outside DC metro area) for assistance. Locked and/or inactive Web Portal user accounts can only be unlocked or reactivated by a Web Portal Administrator.



Web Portal User Account Maintenance DC-Medicaid FAQs

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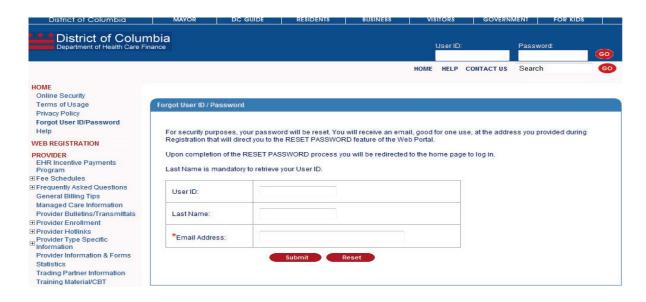
I've forgotten my Web Portal User ID or Password. How do locate my User ID or reset my password?

The Web Portal provides a facility for users to perform a search for their User ID and/or generate a password reset request. Open a browser and access the DC-Medicaid Web Portal at https://www.dc-medicaid.com.

Navigate to the 'Forgot User ID / Password' link in the left menu. The Forgot User ID / Password page opens.



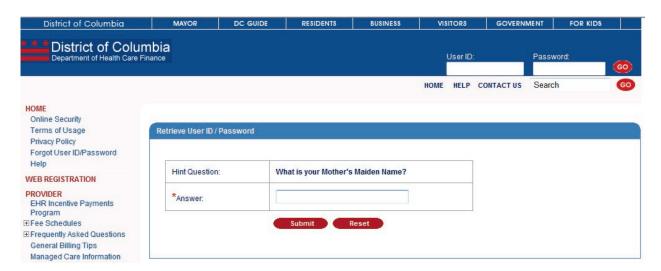
* To locate a forgotten User ID and/or generate a Password Reset request, enter your User ID and Email Address or your Last Name and Email Address. Click 'Submit'.



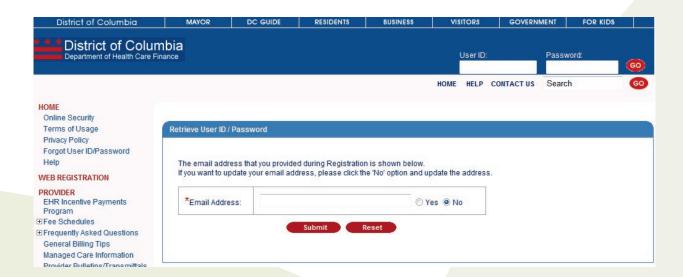
Web Portal User Account Maintenance DC-Medicaid FAQs

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Enter the answer to your 'Hint Question' and click 'Submit'.



* Verify the Email Address for your account. If it is correct as displayed, click 'Submit'. Otherwise, click 'No' and enter the correct email address, then click 'Submit'.



- * The Retrieve User ID / Password Conformation page is displayed with a reference number
- * You will receive an email at the address you verified containing your User ID and a link to the Web Portal to be used if you need to reset your account password.

Note: The link contained within the email is for a single use and remains active for 24 hours.

The text of the email will resemble the following:

Your UserID is listed below. For security reasons, we are unable to send your original password via email. The link below is valid for 24 hours and will provide entry into the RESET PASSWORD feature of the webportal. UserID: XXXXXXX Click here to create a new password.

Web Portal User Account Maintenance DC-Medicaid FAQs

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I've received an email with my User ID and a link to create a new password. How do I proceed?

- * Click on the 'Click here' link contained within the email and you will be directed to the Web Portal to enter a new password and a new hint question / answer.
- Enter and confirm your new password, and click 'Submit'.
- * Select a new Hint Question from the dropdown, and enter an answer that you can remember later without writing it down. The Reset Password Confirmation page is displayed. You will be automatically redirected to the Web Portal homepage where you may log in.

Pharmacy Preferred Diabetic Supply List

As a reminder, Magellan Health Services manages the diabetic supply program for the Department of Health Care Finance. **Effective July 1, 2011**, Abbott Diabetes Care, Inc. and Roche Diagnostics Corporation were retained to be the providers of preferred blood glucose monitors. Prescriptions for the preferred monitors and strips must be processed through the pharmacy's point of service electronic claims system, not from DME suppliers.

The listing of preferred diabetic supplies is available on the Web Portal at www.dc-medicaid.com under "What's Hot". Please refer to Transmittals #11-11 and 11-12 for additional information on diabetic supplies.

Working Together to Improve Children's Oral Health Care in DC

n 2011, only about 50% of the District of Columbia's children aged 3 or older who are enrolled in Medicaid received any dental care. This is especially problematic because children with a history of dental caries are less likely to thrive, grow, and develop as expected. However, when these children start receiving comprehensive dental treatment, they can catch up¹—you can help!

The District is working with our health care provider community and advocacy groups in an effort to improve the oral health of DC children by increasing access and utilization of oral health care services. If you are a Primary Care/ Early and Periodic Screening, Diagnostic, and Treatment



(EPSDT) Services Provider or a dentist that serves children enrolled in DC Medicaid, we need your help to ensure the District's children get the oral health care they need.

¹A study conducted at the Children's National Medical Center found that District children with a history of dental caries, most of which were from low income families, were significantly more likely to exhibit failure to thrive, or an inability to gain weight or grow as expected. When these children received comprehensive dental treatment, they were able to catch up and achieve normal growth and development. (2007 Oral Health Issue Brief produced by Altarum Institute with funding from the Maternal and Child Health Bureau of the US Department of Health and Human Services). For the full brief, visit: http://www.doh.dc.gov/doh/lib/doh/services/administration_offices/mch/pdf/final_saw_dc_issue_brief_07.pdf

Working Together to Improve Children's Oral Health Care in DC

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Dental Home

Just as children need a primary care provider (PCP) to be their medical home, children should also have a dental home where a primary dentist can monitor their oral health and development. Children should start visiting a dentist within 6 months of the eruption of the first tooth. This dental care is a covered Medicaid service and part of the EPSDT benefit.

Pediatricians are the first resource for parents and guardians. This provides the ideal platform to educate families about the importance of oral health care and the need to see a dentist, as well as a doctor, on a regular basis. As soon as a child starts to get his or her first tooth, please start referring the family to a nearby Medicaid-enrolled dentist to establish a dental home.

Your patients can get help finding a dentist and scheduling an appointment by calling the Dental HelpLine at 1-866-758-6807.

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Dental Health Education

- Provide age appropriate oral hygiene instruction to caregivers and children. Take a look at the Anticipatory Guidance section this bulletin for a review of topics to cover
- * Remind caregivers of the importance of:
 - a nutritious diet and limiting sugary foods/drinks
 - brushing/flossing after meals
 - a dental visit every 6 months
- * Remind pregnant women of:
 - The importance of teeth cleanings while pregnant
 - Additional risk of periodontal disease while pregnant caused by hormonal changes
 - Fetal tooth development begins at approximately the 6th week of pregnancy, making a nutritious diet especially important for future dental health.

Early Childhood Caries (ECC)/ Baby Bottle Tooth Decay (BBTD)

The Centers for Disease Control and Prevention (CDC) has reported that 'early childhood dental caries (ECC) [may] perhaps be the most prevalent infectious disease of our nation's children.'

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Working Together to Improve Children's Oral Health Care in DC

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ECC/BBTD occurs when poor feeding practices result in prolonged contact between the baby's teeth and liquid from a baby bottle. As sugars from the liquid interact with bacteria in the baby's mouth, teeth can decay unless proper preventive steps are taken. The American Academy of Pediatric Dentists/American Academy of Pediatrics encourages caregivers to prevent Baby Bottle Tooth Decay and Early Childhood Caries to do the following:

- Do not put the child to sleep with a bottle
- Only give the child a bottle during meals
- Teach the child to drink from a cup when they are approaching their first birthday
- Avoid drinking juices from a bottle
- Keep the baby's mouth clean
- Do an oral health consultation with a dentist within 6 months of the first tooth eruption

Oral Health in Children with Special Health Care Needs

Although all children should go to the dentist every six months, oral health care is even more important for children who have already been identified as having special health care needs. Explain to caregivers why a child with a special health care need is at greater risk for dental disease or dental infection:

- Oral diseases can intensify certain health conditions
- Certain diseases and health conditions can create or worsen oral health problems
- Depending on the condition, behavioral problems or physical limitations may interfere with standard oral hygiene practices, and caregivers may need additional specific instruction in how to care for their child's oral health.

Anticipatory Guidance Materials and Activities

- Provide oral health promotional materials to caregivers regarding the importance of baby teeth and teeth development milestones (Materials should be provided in Spanish and other languages as needed).
- Customize/modify information based on individual risk assessment, family questions/ concerns and cultural appropriateness.
- Additional information is available at www.dchealthcheck.net.

Primary Care/EPSDT Providers

Every HealthCheck visit should include an assessment of:

- Lips
- Tongue
- Teeth
- Gums
- Interior surface of cheeks
- Roof of mouth



Working Together to Improve Children's Oral Health Care in DC

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Also, at every HealthCheck visit, educate caregivers:

- Children receive free dental services through their Medicaid managed care organization (MCO)
- Every child should visit the dentist every six months after the eruption of their first tooth, or at least by age 3, for a free dental cleaning, evaluation, and if needed, dental treatment.
- The EPSDT dental screening by the PCP is not a substitute for a full dental exam.
- Read the "Dental Health Education" and "Anticipatory Guidance" sections of this bulletin for a review of other topics to cover.
- Talk to caregivers about the risk for Early Childhood Caries/ Baby Bottle Tooth Decay (see the ECC/BBTD section of this bulletin for more information)

Dentists Needed!

If you or any dental provider you know is interested in enrolling as a Medicaid dental provider please visit www.dc-medicaid.com or call the DC Department of Health Care Finance Division of Provider Services at 202-906-8319.

For assistance in making dental appointments, or to ask questions about DC Medicaid's dental benefit, call the Dental Help Line at (866) 758-6807.

Important Numbers & Addresses

Provider Inquiry PO Box 34734 Washington, DC 20043-4734	(202) 906-8319 (inside DC metro area) (866) 752-9233 (outside DC metro area) (202) 906-8399 (Fax)	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
Provider Enrollment PO Box 34761 Washington, DC 20043-4761	(202) 906-8318 (inside DC metro area) (866) 752-9231 (outside DC metro area) (888) 335-8465 (Fax) www.dc-medicaid.com	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
Pharmacy Benefits Management	ACS Technical Call Center: (800) 272-9679 ACS Clinical Call Center (Prior Authorizations): (800) 273-4962 ACS PBM Fax Number: (866) 535-7622 http://www.dcpbm.com	Hours of Operation 24/7/365
ACS EDI Gateway Services	(866) 407-2005 http://www.acs-gcro.com	Hours of Operation Monday - Friday 8:00 am - 5:00 pm
Transportation Broker Medical Transportation Management, Inc. (MTM)	(888) 561-8747 (866) 796-0601 (to schedule appointment) http://www.mtm-inc.net/index.asp	
Dental Help Line	(866) 758-6807	
Fraud Hotline	(877) 632-2873	
Health Care Ombudsman	(877) 685-6391	
Provider Outreach	dc.providerreps@acs-inc.com	

Claims Department		
UB04 Claim Forms	PO Box 34693 Washington, DC 20043-4693	
CMS1500 Claim Forms	PO Box 34768 Washington, DC 20043-4768	
ADA and Pharmacy Claim Forms	PO Box 34714 Washington, DC 20043-4714	
Adjustment/ Void Forms	PO Box 34706 Washington, DC 20043-4706	
Medicare Crossover Claim Forms	PO Box 34770 Washington, DC 20043-4770	
278 Prior Authorization Transaction Attachments	PO Box 34756 Washington, DC 20043-4756	
837 Claim Transaction Attachments	PO Box 34631 Washington, DC 20043-4631	
Claim Appeals	PO Box 34734 Washington, DC 20043-4761	



Department of Health Care Finance 899 North Capitol Street, NE Suite 5135 Washington, DC 20002

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