



**DELAWARE HEALTH
AND SOCIAL SERVICES**

**DIVISION OF MEDICAID &
MEDICAL ASSISTANCE**

Delaware Medical Assistance Program

DMAP Provider Frequently Asked Questions (FAQs)

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Provider Portal (General)

What items do I need to request from members when providing services?

Members should always present their Medicaid Member ID card, Managed Care Organization (MCO) Member ID card (if they are enrolled in an MCO), and a photo ID.

What is a “Notify Me”?

The “Notify Me” email notification system gives providers the ability to subscribe to receive emails about important updates, including:

- Special bulletins and alerts,
- Provider policy manual updates,
- Program updates (ex: dental, pharmacy),
- Program announcements, and
- Provider Portal updates.

To sign up for the “Notify Me” subscription, go to the Delaware Medical Assistance Program (DMAP) [Provider Portal](#) and click on the [“Notify Me” link](#) (left-hand side), then follow the screen prompts.

Note: Non-Providers can register as well. Go to the [DMAP Provider Portal](#), click the [“Notify Me” link](#) (left-hand side), then follow the screen prompts.

How do I report Medicaid Fraud?

Report Medicaid Fraud, Waste, and Abuse at 1-800-372-2022 (TTY 711). Also, you can submit a report online through the DMAP Provider Portal. On the [DMAP Provider Portal Landing Page](#), click the [“Report Fraud” link](#) (left-hand side), then complete the online “SUR Referral Form”.

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Affordable Care Act (ACA) **Provider Screening and Enrollment Requirements**

What is the purpose of the Affordable Care Act (ACA) Provider Screening and Enrollment Rules?

The purpose of the Provider Screening and Enrollment Rules of the Affordable Care Act (ACA, 2010) is to prevent or combat fraud, waste, and abuse under the Medicare and Medicaid programs and Children's Health Insurance Program (CHIP).

Did the ACA change the enrollment process for providers?

Yes, Delaware Medical Assistance Program (DMAP) enrollment applications were updated to comply with the ACA requirements and guidelines. DMAP also enhanced provider and supplier screening processes and procedures, complied with institutional provider application fees, and increased disclosure information requirements in compliance with the ACA.

What is the updated screening process?

DMAP already screens, and continues to screen, all potential applications for provider enrollment. In compliance with the ACA, additional updates included: database screening for providers, addition of access for designated provider staff, and inclusion of those with five percent (5%) ownership or more. Some provider types receive unannounced pre- and post-enrollment site visits, based on the provider type's risk level.

What can providers expect from the Delaware Medical Assistance Program (DMAP)?

Service and support. DMAP is dedicated to providing the healthcare community with the most up-to-date information, and the knowledgeable staff is here to assist providers.

What are the different provider types?

The different provider application types are:

- Individual
- Group
- Other
- Facility
- Ordering / Referring / Prescribing Only
- Managed Care Organization-Only



Who is considered an Ordering/Referring/Prescribing provider?

As part of the ACA requirements, a new type of provider can enroll with DMAP called “Ordering, Referring, and Prescribing-only (ORP)” providers. An ORP provider is a physician or non-physician practitioner whose sole interaction with members is limited to ordering, referring, or prescribing items and/or services. ORP providers are required to enroll with DMAP in a limited capacity so that they can be identified on the claim as the “renderer” who wrote the orders, referrals, and/or prescriptions.

How are Ordering/Referring/Prescribing providers affected?

In compliance with the ACA, Ordering/Referring/Prescribing providers must complete a streamlined provider enrollment application through the [Delaware Medical Assistance Provider Portal](#).

Are all providers required to enroll with DMAP?

Yes. The Centers for Medicare and Medicaid Services (CMS) requires States to deny claims from providers who are not enrolled in the State's Medicaid or CHIP programs. Failure to enroll with DMAP will result in the denial of claims for items ordered, referred, or prescribed for Medicaid beneficiaries by an ORP. These claims include reimbursement for services rendered, prescriptions, referrals, and orders for lab work and tests. For more information, see the [General Policy Manual](#).

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Pharmacy Program

Where can providers find resources and information about the DMAP Pharmacy Program?

Visit the [DMAP Pharmacy Corner](#) in the DMAP Provider Portal. Information on the Pharmacy Corner includes:

- Preferred Drug List, Brand Over Generic List, Over the Counter Rebate List, Preferred Diabetic Supplies, and Oncology Medications
- Pharmaceutical and Therapeutics Committee Agendas and Minutes
- Drug Utilization Review Meeting Minutes
- Pharmacy Provider Manuals and Forms
- Delaware Prescription Assistance Program (DPAP) Information
- Delaware Maximum Allowable Cost (DMAC) Information
- Drug Rebate Information
- Opioid Dose Calculator

How do I submit a Prior Authorization?

Refer to [How to: Submit a Pharmacy Prior Authorization \(PA\) Request through the Portal](#) for more information.

What is X12 5010?

X12 5010 information can be found in the [Claims Folder](#) of the DMAP Document Repository.

Where can I find information about the National Council for Prescription Drug Programs (NCPDP)?

The NCPDP is an ANSI-accredited, standards development organization providing healthcare solutions. NCPDP information can be found in the [Claims Folder](#) of the DMAP Document Repository.

Where can I find information about Health Insurance Portability and Accountability Act (HIPAA) for Claim Submissions?

HIPAA information can be found in each of the Guides and Companion Guides in the [Claims Folder](#) of the DMAP Document Repository.



Where can I find information on Mental Health Drug Coverage?

Mental Health Drug Coverage can be found in the [Preferred Drug List \(PDL\)](#) in the DMAP Document Repository.

Where do I find the Preferred Drug List (PDL)?

The [Preferred Drug List](#) is located in the “PDL” folder on the DMAP Document Repository.

How can I see if a drug requires prior authorization?

To see if a drug requires prior authorization, review the [Preferred Drug List \(PDL\)](#).

How can I tell when the next P&T meeting is scheduled?

The [DMAP Pharmacy Corner](#) has information for the Pharmaceutical & Therapeutics Committee (P&T), including meeting agendas and minutes.

What if I have more questions?

Need Assistance

- **Call Us:** Pharmacy Provider Services at 1-800-999-3371 (TTY 711); Option 0, then Option 1 (Monday through Friday, 8:00AM - 4:30PM)
- **Message Us:** Secure Correspondence: Login to the Provider Portal
- **Email* Us:** delawarepret@gainwelltechnologies.com - *Reminder - Do not send any correspondence that has protected health information (PHI) to this mailbox.

For questions on Web Invoicing,
email: MoveItDocumentTransfer@gainwelltechnologies.com

For any questions related to Drug Rebate,
email: DEDrugRebate@gainwelltechnologies.com

For the Pharmacy Team, email: [Pharmacy Team](#)

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Dental Program

Who is eligible for Dental Coverage?

Delaware Medicaid coverage for children's dental and adult dental services is available through the member's Managed Care Organization.

The Children's Dental Program covers eligible Medicaid children through age 20 years (up to age 21 years) and eligible Delaware Healthy Children Program (DHCP) children through age 19 years (under age 19 years).

The Adult Dental Program covers eligible adults aged 21 years and older.

For more information, visit the [DMAP Dental Corner](#) and review the [Children's Dental Program Provider Specific Policy Manual](#) and the [Adult Dental Program Services Provider Specific Policy Manual](#).

What dental services are covered?

The Children's Dental Program and Adult Dental Program cover medically necessary dental services in appropriate care settings to prevent oral disease, provide relief from pain and infection, and restore and maintain oral health.

Covered services include:

- Preventive care: exams, cleaning, x-rays, and sealants
- Restorative care: fillings, extractions, root canals
- Limited periodontics care: scaling, debridement, and maintenance

All adult Medicaid individuals, other than those specifically excluded, are liable for sharing the cost of their dental services. All adult dental visits are subject to a \$3 co-pay. The co-pay is imposed for each dental visit and must be paid to the dentist.

Children's dental visits are not subject to a co-pay.

For more information, visit the [DMAP Dental Corner](#) and review the [Children's Dental Program Provider Specific Policy Manual](#) and the [Adult Dental Program Services Provider Specific Policy Manual](#).

What types of dental providers can enroll with DMAP and provide services to eligible members?

Dental provider types include:

- Dentist
- Dental Anesthesiologist
- Endodontics
- General Practice



- Oral & Maxillofacial Pathology
- Oral & Maxillofacial Surgery
- Orthodontics and Dentofacial Orthopedics
- Pediatric Dentistry
- Periodontics
- Prosthodontics

For more information, visit the [DMAP Dental Corner](#) and review the [Children's Dental Program Provider Specific Policy Manual](#) and the [Adult Dental Program Services Provider Specific Policy Manual](#).

How does a dental provider enroll with DMAP?

Dental providers who want to provide dental services to children who are enrolled with an MCO must be enrolled with the Delaware Medical Assistance Program (DMAP) prior to credentialing with an MCO.

- If you are already enrolled with DMAP to provide adult dental services, you do not need to re-enroll or re-credential. If you are already enrolled with DMAP and want to credential with an additional or a different MCO, you must contact each MCO individually. Providers should use the [How-To Enrollment Guides](#).
 - For Pediatric Dental Managed Care Credentialing and Contracting, see the [how-to guide](#).
- If you are **not** already enrolled with DMAP, go to the [DMAP Provider Portal](#) and click on the "Provider Enrollment" link (left-hand side), then follow the screen prompts. Providers should use this guide: "[How-To: Complete A New Managed Care Organization-Only Provider \(MCOP\) Enrollment Application](#)".

The MCO Dental Benefit Managers are:

- AmeriHealth Caritas
 - DentaQuest: <https://www.dentaquest.com/en/providers/delaware>
- Delaware First Health
 - Centene Dental: <https://www.centenedental.com/providers/join-our-network.html>
- Highmark Health Options
 - United Concordia:
<https://www.highmark.com/wholecare/medicare/benefits-programs/benefit-list/dental#:~:text=Using%20United%20Concordia%20Dental%20Providers,teeth%20cleaning%20to%20prevent%20disease>



What is a Dental Home and why is it important?

The American Academy Pediatric Dentistry (AAPD) encourages parents and other care providers to help every child establish a dental home by 12 months of age. A dental home should provide comprehensive oral health care including acute care and preventive services. Seeking care consistently with a provider that is familiar with the child and family is beneficial to the child.

If switching dental providers, members are advised to make sure they sign a release to have dental x-rays and information switched to the new dentist for continued care.

What if I have more questions?

Visit the [DMAP Dental Corner](#). You can also review the [Children's Dental Program Provider Specific Policy Manual](#) and the [Adult Dental Program Services Provider Specific Policy Manual](#).

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Other Information & Resources

Where can I find more FAQs and information?

Other FAQs and Resources:

- DMAP Provider Policy Manuals: <https://medicaidpublications.dhss.delaware.gov/docs/search?EntryId=36>
- DMAP Provider Billing Manuals: <https://medicaidpublications.dhss.delaware.gov/docs/search?EntryId=33>
- DMAP How-To Guides: <https://medicaidpublications.dhss.delaware.gov/docs/search?EntryId=41>
- DMAP Provider Claims Guides and Companion Guides: <https://medicaidpublications.dhss.delaware.gov/docs/search?EntryId=34>
- DMAP Dental Corner How-To Guides: <https://medicaidpublications.dhss.delaware.gov/docs/search?EntryId=688>
- Frequently Asked Questions About Medicaid and Medical Assistance: <https://dhss.delaware.gov/dmma/home/medicaid/faq/>
- Delaware Healthy Children Program (DHCP) FAQs: <https://dhss.delaware.gov/dmma/home/dhcp/>
- Delaware Health Care Commission (DHCC): <https://dhss.delaware.gov/dhcc/>