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**Preparation for Implementation Checklist**

**Provider Portal Accounts**

**Now:**
- Check that your computer systems and browsers meet the requirements for using the new Delaware Medical Assistance Portal. Click the following link for website requirements: [http://www.dmap.state.de.us/information/DMES/WebsiteRequirements.pdf](http://www.dmap.state.de.us/information/DMES/WebsiteRequirements.pdf)
- Watch your mail for a letter sent in October that describes portal registration. Keep the letter—you will need it during early registration in December.

**December 1-16 Early Registration:**
- Set up your account with user name and password during the early registration period from December 1-16.

**Provider Electronic Solutions (PES) Software (for providers who use PES)**

**Now:**
- Submit electronic claims by noon on December 21, 2016. After this date, PES will no longer be available.

**Effective January 1, 2017:**
- PES will not be used to submit claims. Claims can be submitted via the new Delaware Medical Assistance Portal or through your certified vendor.

**Claims and Prior Authorizations**

**Now:**
- Obtain and use the current prior authorization (PA) forms from the DMAP website: [http://www.dmap.state.de.us/downloads/forms.html](http://www.dmap.state.de.us/downloads/forms.html)
- Watch for email notifications and website postings about effective dates and end dates for submitting PA forms.
- Paper claim forms in MMIS (current system) must be received by December 14, 2016.
- During the transition, paper claims will not be processed from December 15, 2016 through January 1, 2017.
- Electronic claims will close at noon on December 21, 2016.

**Effective January 1, 2017:**
- Electronic claims open for submission.
- ALL dental and pharmacy claims MUST be submitted electronically.

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**DMES Updates**

**Provider Checklist: Getting Your Claims Ready (continued)**

<table>
<thead>
<tr>
<th>Preparing for Implementation Checklist</th>
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<tbody>
<tr>
<td><strong>Paper Attachments</strong></td>
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<tr>
<td>Now:</td>
</tr>
<tr>
<td>• Paper attachments for electronic claims must be received by December 14, 2016.</td>
</tr>
<tr>
<td><strong>Coordination of Benefit Agreement (COBA) files</strong></td>
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<tr>
<td>Now:</td>
</tr>
<tr>
<td>• The last COBA files (crossover claims from Medicare) will be processed December 14, 2016. COBA files received after December 14, 2016 will be held for processing in DMES on January 1, 2017.</td>
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**Provider Checklist: Getting Ready for Enrollments, Inquiries, Changes, EFT Payments**

Providers can follow the steps in this checklist to prepare for the implementation of the Delaware Medicaid Enterprise System (DMES).

<table>
<thead>
<tr>
<th>Preparing for Implementation Checklist</th>
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<tr>
<td><strong>Communications and Training</strong></td>
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<tr>
<td>Now:</td>
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<tr>
<td>• Attend training sessions between now and December 29, 2016. Classes may vary between computer-based, web-based, or instructor-led.</td>
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<tr>
<td>• Register for email notifications and read all updates. <a href="https://www.dmap.state.de.us/secure/emailIntro.do">https://www.dmap.state.de.us/secure/emailIntro.do</a></td>
</tr>
<tr>
<td>• Check <a href="http://www.dmap.state.de.us/information/dmes.html">http://www.dmap.state.de.us/information/dmes.html</a> frequently for updates.</td>
</tr>
<tr>
<td><strong>EFT Payments</strong></td>
</tr>
<tr>
<td>• The last financial cycle in MMIS (current system) will result in a Remittance Advice dated December 26, 2016 with the EFT payment date of December 30, 2016. There will be no EFT payment the week of January 2, 2017 as we transition to the new system. Please plan accordingly.</td>
</tr>
<tr>
<td><strong>Enrollments</strong></td>
</tr>
<tr>
<td>• Enrollment applications must be received by November 23, 2016 for processing in the MMIS. Applications cannot be processed during the transition.</td>
</tr>
<tr>
<td><strong>Inquiries</strong></td>
</tr>
<tr>
<td>• Provider inquiries must be received by December 20, 2016 for processing in the MMIS. Inquiries cannot be processed during the transition.</td>
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### DMES Updates

**Provider Checklist:**
**Getting Ready for Enrollments, Inquiries, Changes, EFT Payments (continued)**

<table>
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<tbody>
<tr>
<td><strong>Changes to Provider Profile</strong></td>
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<tr>
<td>- Changes to provider profile (e.g., billing address, mailing address, etc.) <strong>must be received by December 19, 2016</strong> for processing in the MMIS. Profile changes cannot be processed during the transition.</td>
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<thead>
<tr>
<th>Outstanding Account Receivable (AR) amounts</th>
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<tbody>
<tr>
<td><strong>Effective January 1, 2017:</strong></td>
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<tr>
<td>- With the implementation of DMES, we will perform recoupments of outstanding DMAP ARs. You no longer have to wait to file a claim with the same funding source as the outstanding items. Amounts will deduct automatically from your available payments.</td>
</tr>
</tbody>
</table>

### Program Updates

**Delaware Cancer Treatment Program Updates**

Two years ago, we added completion of a Medicaid application to the information needed when applying for the Delaware Cancer Treatment Program (DCTP). Upon review of submitted applications, we frequently found that clients may be Medicaid eligible. In a cooperative effort with Division of Social Services (DSS), a system was developed to hasten review of these applications for Medicaid eligibility as these clients were recently diagnosed with cancer. DCTP applications are reviewed once all requested information has been received, including a Medicaid application. If the applicant appears to possibly meet Medicaid criteria, the application is forwarded immediately to DSS for evaluation. To obtain more information about the DCTP application process, please call 1-800-996-9969 and follow the prompts.

### Attention Dental Providers:

DMAP has streamlined the process for submitting Dental Prior Authorizations. This new process is more efficient, secure, and easier for you. Please complete the following when submitting Dental Prior Authorization requests.

- Submit the secure request to the following mailbox: DHSS_DMMA_DentalPA@state.de.us. Please note the address (DHSS_DMMA_DentalPA@state.de.us) uses the symbol underscore, which may disappear as a result of the automatic line that appears under the e-mail address.
- Continue to log into Interactive Services to find results of your PA requests.
- Please remove Gabrielle Hilliard’s name from your contact list as the Dental Administrator and use the email listed above.
- Continue to submit all PAs securely using Egress switch.

**Preadmission Screening and Resident Review (PASRR)**

DMMA’s PASRR Unit has completed the initial round of PASRR 101 training for all Medicaid Certified Nursing Facilities and Acute Care Hospitals. We continue to reinforce those efforts with training to help clarify best practices for PASRR compliance and have returned to many of your facilities with PASRR support. With the launch of DMES on 1/1/2017, the consistent application of mandated sanctions related to PASRR will begin. We encourage you to take these last months of 2016 to review your facility’s PASRR process and institute any corrective actions to ensure your compliance.

For PASRR assistance, please contact the DMMA PASRR Unit at 302-424-7120 and by email at dmma_pasrr@state.de.us.
Provider Manual Updates

What’s New?

The following revisions were posted to the DMAP website What’s New page: www.dmap.state.de.us. Notification also appeared on Remittance Advice Banner Pages and DMAP email notifications.


Independent Laboratory Policy Provider Specific Manual—Revision Date: 11/1/2016, Section Revised: 5.0 – Update Appendix A to include additional Prior Authorization Requirements for oncology (breast), MRNA, Gene expression and reference to criteria for coverage in the NCCN guidelines.

Independent Therapist Policy Provider Specific Manual—Revision Date: 9/1/2016, Section Revised: 1.1, 2.2, and 3.3 - Added Hippotherapy services in accordance with State Plan.

Long Term Care Policy Provider Specific Manual—Revision Date: 9/1/2016, Section Revised: Section Revised: 4.5. Updated Temporary Absences for Hospitalization policy for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID).

Long Term Care Provider Specific Manual—Revision Date: 8/1/2016, Section Revised: Section Revised: 4.2.2.2.1 - Updated Personal Needs Allowance (PNA) increase from $42.00 to $50.00.

It Only Takes a Minute…Sign Up for DMAP Email Notification Today!

Visit the DMAP website home page and click the link for DMAP email registration or follow this link: https://www.dmap.state.de.us/secure/emailIntro.do. Follow the simple instructions to add your email contact information and receive updates.

Phone and Fax Contacts

800-996-9969
1095B Tax Forms option 3
Client Pharmacy option 2

Delaware Cancer Treatment Program (DCTP) and Delaware Prescription Assistance Program (DPAP) **Fax 302-454-0223

Delaware Healthy Children Program (DHCP) and Health Benefits Manager **Fax 302-454-1074

800-999-3371
Provider Pharmacy option 0, option 1 **Fax 302-454-0224

Provider Relations option 0, option 2 **Fax 302-454-7603

Provider Incentive Program option 0, option 3 **Fax 302-454-7603

Provider Enrollment option 0, option 4 **Fax 302-454-7603

Managed Care:

Highmark Health Options
Members: 1-844-325-6251
Pharmacies: 1-844-325-6253
Providers: 1-844-325-6253
FAX Prior Authorization forms: 1-855-476-4158

UnitedHealthcare Community Plan of Delaware
Members: 1-877-877-8159
Pharmacies: 1-800-842-4195
Providers: 1-800-842-4195
FAX Prior Authorization forms: 1-866-940-7328
PA requests: 800-310-6826 (direct) or 800-842-4195
DELAWARE MEDICAL ASSISTANCE PROGRAM

MEDICAID SPECIAL BULLETIN

DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID & MEDICAL ASSISTANCE
Delaware Medical Assistance Program