



Medicaid Information Bulletin for the Non-Traditional Medicaid Plan



October 2006

TABLE OF CONTENTS

06 - 114	PT/OT and Chiropractic Services	1
06 - 115	Physician Billings For Office Administered Drugs	2
06 - 116	Change in Pharmacy Reimbursement	2

BULLETINS BY TYPE OF SERVICE

Chiropractic	06-114
Physical Therapy/Occupational Therapy	06-114
Physician Services	06-115
Pharmacy	06-116

NON-TRADITIONAL MEDICAID PLAN MANUAL ON-LINE

When the NTMP Section is updated, the on-line version will also be updated. Providers can obtain a copy of an updated page, or the entire NTMP Section, by using the web site or by contacting Medicaid Information. When pages are updated, the revision date appears at the top of the page. The change is typically marked in the left margin of the page with a vertical line.

The Medicaid Provider's web site <http://health.utah.gov/medicaid/html/provider.html> has a link to the NTMP Section. The link is a heading in bold print. Or go directly to www.health.state.ut.us/medicaid/ntmp.pdf



06 - 114 PT/OT and Chiropractic Services

Beginning February 1, 2005, PT/OT services in the Non-Traditional Medicaid program were allocated to 10 total visits per calendar year, and Chiropractic services were allocated to 6 total visits per calendar year. This is a clarification of which services require prior authorization. All Chiropractic services require prior authorization, but PT/OT services do not require prior authorization in Non-Traditional Medicaid.



World Wide Web: <http://health.utah.gov/medicaid/>

Medicaid Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.
- From other states, call 1-801-538-6155.

Requesting a Medicaid publication?

Send a Publication Request Form.

- by FAX: 1-801-536-0476
- by mail to: Division Of Health Care Financing
Box 143106, Salt Lake City UT 84114-3106

06 - 115 Physician Billings For Office Administered Drugs

Beginning October 1, 2006, billings for drugs administered in the physicians office will need to include the NDC from the vial or container from which the drug is obtained, as well as the quantity of units administered. Beginning January 1, 2007, claims that do not include this information along with the HCPCS J-Code will be denied for payment. Modifications to the claim form are in place to accept this data.

○

06 - 116 Change in Pharmacy Reimbursement

Beginning January 1, 2007, the new Federal Upper Limits guidelines will include all drugs for which an "A" rated version is available. The new price indicator will not be AWP, but will be AMP plus dispensing fee. States may calculate the FUL at any level below the maximum of 250% of the AMP.

The new reimbursement will be based on AMP. These reimbursements will be published in the January 2007 Medicaid Information Bulletin.

○

World Wide Web: <http://health.utah.gov/medicaid/>

Medicaid Information

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.
- From other states, call 1-801-538-6155.

Requesting a Medicaid publication?

Send a Publication Request Form.

- by FAX: 1-801-536-0476
- by mail to: Division Of Health Care Financing
Box 143106, Salt Lake City UT 84114-3106