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20-53 PRISM Provider Enrollment Coming June 29, 2020

What is changing?

On June 29, 2020, the PRISM system will be updated to include:

- Changes to the business process wizard steps in PRISM. The business process wizard steps guide providers through all the necessary steps to complete the enrollment process. Providers will see a change to the sequence of steps or types of questions asked.
- The auto generation of letters to providers when it is time to complete the re-validation/re-credential process and when a provider’s professional license expires. This will require that providers keep their information current in PRISM to ensure letters are sent to the right location and/or sent at the right time when a license expires.
- Changes to the re-enrollment process for providers. To re-enroll, providers will need to contact the Provider Enrollment Team. Additional instructions will be coming on what is needed to complete the re-enrollment process in PRISM.

We are working on training manuals, user guides, and other resources such as frequently asked questions to ensure providers have the necessary information to navigate through the above changes.

How will the PRISM changes impact CURRENT providers?

Enrollment records will be migrated to the updated PRISM system prior to June 29, 2020. A letter will go out with instructions on how to log in to validate if your migrated information is correct and make any necessary modifications to your PRISM information.

Additional Medicaid Information

Salt Lake City Area: (801) 538-6155

Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona, Nevada: 1-800-662-9651

Other States: (801) 538-6155

Request a Medicaid Publication

Send a Publication Request form:

By Fax: (801) 536-0476

By Mail: Division of Medicaid and Health Financing
PO Box 143106, Salt Lake City, UT 84114

- If you have NOT validated your information prior to June 29, 2020, your letter will have the application ID (this ID number appears next to your provider name in the greeting line) that you will need to access your account in PRISM.
- If you have validated your information prior to June 29, 2020, your letter will NOT have an application ID. You will not need this ID to enter PRISM.
- Once you are logged in, enter the business process wizard steps that are marked incomplete, make any additional modifications needed, and submit it to the Provider Enrollment team for approval.

How will the PRISM changes impact NEW providers?

For new providers, there will be a period prior to June 29, 2020 where new providers will not be able to submit enrollment applications. The freeze allows for the migration of enrollment information for current providers. The freeze period is May 14 – June 28, 2020. For additional information about retroactive enrollment during the freeze period, click [here](#).

On June 29, 2020, I will be a newly enrolling provider and will want to provide service as a fee for service and as a managed care network provider, what will I need to do in PRISM?

In PRISM, if you choose the “individual/sole proprietor” and sub selection of “regular individual sole proprietor,” then you can bill either fee for service or managed care, providing you are paneled with a managed care organization.

If you are enrolling as a provider and would like to participate as a managed care network only provider, please select “individual/sole proprietor” and the sub selection of “managed care network provider only” in PRISM.

Step by step instructions are being created and will be available on our Medicaid website on June 29, 2020 to help you make the right selection.

In what situations will my provider enrollment auto close?

On June 29, 2020, your Medicaid provider enrollment will auto close if:

- You do not complete your re-validation process
- Your professional license and/or CLIA license expires
- Vital records show you are deceased

Please be sure to complete your re-validation process timely. Also, please keep your license information current to avoid an auto closure on your enrollment. License information includes your provider type, provider specialty, and end dates for your license. Watch for letters from Medicaid to ensure that you respond timely to all requested information and actions from Medicaid.

Why is it important to have back up administrators?

It is highly recommended for you to have one or more back up administrators to the PRISM system. This is not a change from what you would do today. This will also apply to the updated PRISM system on June 29, 2020. If you only have one individual assigned and that administrator is unable to perform their duties or if the administrator leaves, you may encounter significant delays in your ability to update any domain associated to that administrator's account. This is because a new administrator will need to be approved to obtain that ability.

If you are a domain administrator, you are responsible for:

- Adding administrators for that domain as well as regular users that belong to your facility or organization.
- Maintaining the User Access Agreements (UAA's) for your group. The Utah Department of Health will maintain the UAA for the first domain administrator only.

Additional information on how to approve additional users will be located in the provider user manual online.

Training on PRISM Changes

As a reminder, eLearning training modules will be made available on the PRISM website at go-live: <https://medicaid.utah.gov/prism-provider-training>. These modules will cover new enrollment and PRISM changes.

20-54 Statewide Provider Training 2020

Utah Medicaid is offering statewide provider training in an online live webinar format.

Each training will include five parts, as follows:

- PRISM (provider enrollment)
- Medicaid (plans and benefits, member and provider information, claims and billing)
- Prior Authorizations
- Pharmacy Program
- Office of Inspector General

Registration is located on the Medicaid website at: <https://medicaid.utah.gov/provider-training-0/>. See dates and times on the following page:

Date	Time
Tuesday, August 4	9:00 AM – 12:00 PM
Wednesday, August 5	9:00 AM – 12:00 PM
Thursday, August 6	9:00 AM – 12:00 PM
Tuesday, August 11	9:00 AM – 12:00 PM
Wednesday, August 12	1:00 PM - 4:00 PM
Thursday, August 13	9:00 AM – 12:00 PM
Tuesday, August 18	1:00 PM - 4:00 PM
Tuesday, September 1	9:00 AM – 12:00 PM
Wednesday, September 2	1:00 PM - 4:00 PM
Wednesday, September 9	9:00 AM – 12:00 PM

Please note: The trainings are offered through Google Hangouts Meet which is supported only in the Google Chrome browser. If you do not have Chrome, you will need to arrange its installation prior to the training.

You will receive an email with the login information prior to the training. We encourage you to log in ahead of time.

20-55 COVID-19 Uninsured Testing Coverage

Utah Medicaid is covering COVID-19-related diagnostic testing and services for uninsured individuals. Coverage for the new COVID-19 testing group is effective on or after June 1, 2020 through the duration of the public health emergency. Covered services include COVID-19 testing, as well as serological tests to determine the presence of the virus antibodies.

Related services covered include the administration of the test, evaluations that result in a test, and other diagnostic tools used to evaluate for COVID-19 such as x-rays. Submitted claims for this program may be subject to post-payment audit review.

Enrollment

Uninsured individuals are eligible for the new “COVID-19 Uninsured Testing Coverage” without regard to income or assets. To qualify, an individual must be uninsured, meet citizenship/eligible non-citizenship requirements, and Utah residency requirements. Individuals are considered uninsured if they are not enrolled in another federal health care program, such as Medicare or Veterans Health Administration coverage, or a commercial group or individual health plan. With the exception that those enrolled in short-term limited duration plans do qualify as “uninsured” for the new group. The new Medicaid coverage group also excludes people who are eligible for a mandatory Medicaid group.

Individuals may apply online at <https://medicaid.utah.gov/covid-19-uninsured-testing-coverage/>. A representative from the Utah Department of Health (UDOH) will determine eligibility. A decision will be made within two to three business days and the individual will receive notification of the decision. If approved, coverage begins on the first day of the application month. The individual will receive a Medicaid card within a few days of the approval.

An individual may request coverage for COVID-19-related diagnostic testing and testing services received prior to the eligibility start date, but no sooner than June 1, 2020. Any testing dates should be listed on the application.

The application also serves as a full Medicaid application, unless the person opts-out. After UDOH makes a decision on the eligibility for COVID-19 Uninsured Testing Coverage, the application will be sent to the Department of Workforce Services (DWS) who determines Medicaid or CHIP eligibility. The application will be sent to DWS even if the individual was denied for COVID-19 Uninsured Testing Coverage. It may take up to 30 days for a decision to be made.

If the individual does not qualify for Medicaid, the COVID-19 Uninsured Testing Coverage will continue until the last day of the month in which the public health emergency ends. If the individual qualifies for Medicaid or CHIP, the COVID-19 Uninsured Testing Coverage will end but the individual will receive enhanced medical coverage through a regular Medicaid or CHIP program which includes COVID-19 testing and treatment.

Emergency Medicaid Provider Enrollment

If you have an emergency request, please contact the Provider Enrollment Team at providerenroll@utah.gov. Please put COVID-19 as the subject line. Your request should include provider name, NPI, a detailed statement regarding the emergency request, and call back information. A Provider Enrollment Team member will contact you with additional instructions.

In preparation for the June 29, 2020 update to the Provider Enrollment component of PRISM, the system will be unavailable between May 14 and June 28, 2020. Medicaid is unable to accept any new provider enrollment applications or modifications during this period. We will, however, accept enrollments or modifications related to the COVID-19 pandemic. Email debiwalker@utah.gov or sdmoore@utah.gov for instructions during the dates above.

For the duration of the national emergency, Utah Medicaid has taken actions as allowed by the Utah 1135 Waiver.

The following requirements are temporarily waived:

- Application fees pursuant to 42 CFR §455.460
- Criminal background checks associated with fingerprint-based Criminal Background Checks pursuant to 42 C.F.R §455.434
- Site visits pursuant to 42 C.F.R §455.432
- Screening levels pursuant to 42 CFR §424.518
- In-state/territory licensure requirements 42 C.F.R §455.412
- Disclosures and disclosure statements pursuant to 42 CFR §455.104

- Revalidation/Re-credentialing – Utah Medicaid will temporarily cease the revalidation of and waive provider renewal requirements during this state of emergency
- Site visits – Utah Medicaid will waive requirements for site visits designated as ‘moderate’ or ‘high’ categorical risks to the Medicaid program
- Out-of-state Providers – Utah Medicaid will temporarily waive requirements that out-of-state providers be licensed in Utah when they are licensed by another state Medicaid agency or by Medicare, if a provider is enrolled with another state’s Medicaid program

Billing

Providers should append the CR modifier to all COVID-19 testing and testing related services.

HRSA Reimbursement Program

Health care providers who have conducted COVID-19 testing or provided treatment for uninsured individuals on or after February 4, 2020, can electronically request claims reimbursement through the Health Resources and Services Administration (HRSA) uninsured testing and treatment program, and will be reimbursed generally at Medicare rates, subject to available funding. Steps will involve enrolling as a provider participant, checking patient eligibility, submitting patient information, submitting claims electronically, and receiving payment via direct deposit.

The HRSA program is the payer of last resort, so for individuals that enroll in the Medicaid option from June 1, 2020 through the end of the public health emergency period claims for testing and testing related services only should be submitted to Medicaid. Claims for COVID-19 treatment and testing claims prior to June 1 should seek reimbursement from HRSA. Program details can be found at <https://www.hrsa.gov/coviduninsuredclaim>.

For more Medicaid COVID-19 Testing Coverage program details, FAQs and updates, please visit: <https://medicaid.utah.gov/covid-19-uninsured-testing-coverage/>