



MedicAide

In this issue:

Transition Dates..... 1
 Welcome from Molina/
 Unisys 3
 Trading Partner
 Registration Open! 4
 Enrolled in New MMIS? .. 5
 Submitting Claims During
 Holdback..... 6
 HC Providers—Lead
 Screening Survey 6
 Reduce Reimbursement
 Time and Errors with
 Electronic Billing..... 6
 Electronic Payments 7
 Print & Sign W-9 7
 Existing PCP Referrals in
 the New MMIS 7
 Idaho Health Care
 Conference..... 8
 Provider Workshops..... 9
 Sending Paper Claims .. 10
 Which Claim Forms? 10
 Medicaid Administrator
 Message..... 10
 Changes: Interpretive
 Services Billing 11
 State Your Case 11
 Preventive Health
 Assistance for Wellness 12
 PCS Providers 12
 Medicaid Program Integrity
 - Transportation..... 13
 Updated Notification of
 Birth Form.....13-14
 New Provider Portal 15
 DHW Office Closure 20
 Digital Edition 20

An informational newsletter for Idaho Medicaid Providers

From the Idaho Department of Health and Welfare, Division of Medicaid May 2010

Idaho Transition Dates to Remember

On **June 7**, 2010, the new MMIS, operated by Unisys (now Molina Medicaid Services), will begin processing of all claims except Pharmacy Point of Service (POS). During May and June there are several key dates you need to be aware of. We have outlined these dates below:

May 1st – All new provider applications processed by Molina/Unisys. New provider applications are available on the provider portal at www.idmedicaid.com.

May 6th and 7th – **Provider Training** in **Nampa** for Treasure Valley providers.

May 10th and 11th – **Provider Training** in **Idaho Falls** in conjunction with the Idaho Health Care Conference (IHCC).

May 12th – **Provider Training** in **Pocatello** in conjunction with the Idaho Health Care Conference (IHCC).

May 13th and 14th – **Provider Training** in **Burley** in conjunction with the Idaho Health Care Conference (IHCC).

May 17th and 18th – **Provider Training** in **Lewiston** in conjunction with the Idaho Health Care Conference (IHCC).

May 19th and 20th – **Provider Training** in **Coeur d’Alene** in conjunction with the Idaho Health Care Conference (IHCC).

Additional class and registration information is available online today at www.idmedicaid.com under the Training Dates link.

May 21st – Molina/Unisys will begin processing paper claims. Paper claims can be mailed to either HP/EDS or Molina/Unisys through June 3rd. **After June 3rd paper claims must be sent to Molina/Unisys.** Paper claim mailing instructions are on page 10 of this newsletter.

May 22nd – 30th – The new provider portal will not be available for record updates, maintenance, new applications, trading partner registration or inquiry in preparation for go live **June 7th**.

(Continued on page 2)

Information Releases

[2010-05](#)..... 15
[MA10-03](#).....15-19

Distributed by the
Division of Medicaid
Department of
Health and Welfare

(Continued from page 1)

May 27th – Provider Training in Boise in conjunction with the Idaho Health Care Conference (IHCC). Additional class and registration information is available online today at www.idmedicaid.com under the **Training Dates** link.

June 3rd at Midnight – Last time HP/EDS will accept electronic claims for processing and electronic claim status requests. Any claims received after midnight will be rejected and must be resubmitted to Molina/Unisys on or after June 7th.

June 4th –

- HP/EDS will process electronic claims received before midnight on June 3rd.
- All claims, which have been accepted into the system as of midnight June 3rd, except nursing home and hospital claims subject to the budget holdbacks, will be paid or denied on June 4th and reported on the remittance advice (RA) dated June 7th.
- Nursing home and hospital claims denied June 4th will be reported on the June 7th RA.
- Denied claims that can be resubmitted should be sent to Molina/Unisys for processing on or after June 7th.
- **As of 5 PM**, Molina/Unisys assumes the Eligibility Benefit Inquiry and Response electronic transaction (270/271).
- Nursing home and hospital claims will continue to be subject to the budget holdbacks for claim payment. Providers subject to the budget holdback claims will get a report to verify the status of held claims.
- Payment for claims processed in June by HP/EDS will be reported on the HP/EDS RA dated July 5th.

June 7th –

- Molina/Unisys is responsible for all provider and member services. This includes medical and dental claims and all other electronic transactions.
- All paper claims submitted on or after May 21st will be reported on the Molina/Unisys RA.
- HP/EDS RAs for the week of June 4th will be available to providers. Nursing home and hospital claims impacted by the budget holdbacks will not be reported on this RA.
- A report of held payments for nursing homes and hospitals will be sent to providers in addition to this RA.

July 1st – July 6th – Claim payments held due to the budget holdbacks will be released to pay along with paper RAs. Nursing home and hospital providers should expect to receive four separate RAs the week of July 6th.

July 3rd – HP/EDS posts electronic RA (835 transaction) from budget holdback claims.

July 9th – Last day to retrieve RAs (835 transaction) from HP/EDS.

DHW Contact Information

◆ **DHW Web site**
www.healthandwelfare.idaho.gov

◆ **Idaho Careline**
2-1-1
Toll free: (800) 926-2588

◆ **Medicaid Program Integrity Unit**
PO Box 83720
Boise, ID 83720-0036
Fax: (208) 334-2026
prvfraud@dhw.idaho.gov

Healthy Connections Regional Health Resources Coordinators

◆ **Region I
Coeur d'Alene**
(208) 666-6766
(800) 299-6766

◆ **Region II - Lewiston**
(208) 799-5088
(800) 799-5088

◆ **Region III - Caldwell**
(208) 455-7244
(208) 642-7006
(800) 494-4133

◆ **Region IV - Boise**
(208) 334-0717
(208) 334-0718
(800) 354-2574

◆ **Region V - Twin Falls**
(208) 736-4793
(800) 897-4929

◆ **Region VI - Pocatello**
(208) 235-2927
(800) 284-7857

◆ **Region VII
Idaho Falls**
(208) 528-5786
(800) 919-9945

◆ **In Spanish (en Español)**
(800) 378-3385

Prior Authorization Contact Information

◆ DME Specialist, Medical Care

PO Box 83720
Boise, ID 83720-0036
(866) 205-7403
Fax: (800) 352-6044
(Attn: DME Specialist)

◆ Pharmacy

PO Box 83720
Boise, ID 83720-0036
(866) 827-9967
(208) 364-1829
Fax: (208) 364-1864

◆ Qualis Health

(Telephonic &
Retrospective Reviews)
10700 Meridian Ave. N.
Suite 100
Seattle, WA 98133-9075
(800) 783-9207
Fax: (800) 826-3836
(206) 368-2765

[http://
www.qualishealth.org/cm/
idaho-medicaid/
overview.cfm](http://www.qualishealth.org/cm/idaho-medicaid/overview.cfm)

Transportation

◆ Developmental Disability and Mental Health

(800) 296-0509, #1172
(208) 287-1172

◆ Other Non-emergent and Out-of-State

(800) 296-0509, #1173
(208) 287-1173
Fax: (800) 296-0513
(208) 334-4979

◆ Ambulance Review

(800) 362-7648
(208) 287-1157
Fax: (800) 359-2236
(208) 334-5242

Insurance Verification

◆ HMS

PO Box 2894
Boise, ID 83701
(800) 873-5875
(208) 375-1132
Fax: (208) 375-1134

Welcome from Molina/Unisys

For the past two and a half years, we've worked in partnership with the Idaho Department of Health and Welfare, Division of Medicaid (DHW), First Health and Thomson Reuters to implement the new Medicaid Management Information System (MMIS). We are anticipating implementation of this new system on **June 7, 2010**.

In order to assure success we are heavily reliant on you, our providers, to make sure you are enrolled and approved as a provider in the new MMIS. Providers who wish to submit claims and receive payment after **June 7th**, must complete the Provider Record Update (PRU) process. If you have not completed your record update and received approval, or are not sure of your status, log on to the secure portal at www.idmedicaid.com or call Idaho Medicaid Provider Enrollment at (866) 686-4272. Our specialists are standing by ready to help you with this critical task.

We are confident that the new MMIS will be an innovative solution that meets the growing needs of providers and participants alike. While we know there will be challenges during the implementation of the new MMIS, we are working hard to make this transition as smooth as possible for everyone.

After **June 7th**, Molina/Unisys will take over administration of the MMIS claims processing system. This covers all claims processing except pharmacy point of service (POS) claims. POS claims will continue to be supported by First Health who went live in February, and state analytics, the decision support system provided by Thomson Reuters. Molina/Unisys and First Health will also be responsible for provider training, billing instructions and operational support.

Molina/Molina/Unisys will continue to have Provider Regional Consultants (PRCs) located throughout the state to assist you with non-point of sale claims. I'm pleased to announce you will be familiar with several of our new PRCs who came to us with extensive Idaho Medicaid experience from their previous jobs.

We look forward to beginning a long and successful partnership with the Idaho provider community.

We also want to make you aware of a recent change that will effect the business name you see and hear from our operational staff going forward. On May 1, 2010, Molina Healthcare acquired the Molina/Unisys Health Information Management division, which is responsible for supporting the Idaho Medicaid program. Although there will be a transition period for our business name, there will be no change or disruption in the support you receive. You will continue to use the same contact information and interact with the same local staff as you would have prior to the sale. Our new business name is Molina Medicaid Solutions. We apologize for any confusion this may cause and appreciate your patience as we make this business name transition over the next few weeks.

Del Bell, Molina/Unisys Account Manager

From Provider to Partner, Trading Partner Registration Open Now!

Getting Started

If you have completed your Provider Record Update and received an approval letter, you are ready to enroll as a trading partner in the new MMIS!

Trading partner registration is available on the new provider portal at www.idmedicaid.com. The registration process is quick and simple, and you will receive an immediate answer to your request.

Providers who plan to do any of the following **electronically** must become a trading partner.

- Submit claims
- Check member eligibility
- Check claim status
- Prior authorizations
- Healthy Connections referrals
- Access online reports such as your remittance advice (RA) and Healthy Connections rosters

Your new trading partner agreement will replace any established Electronic Claims Submission Certification and Authorization you have currently in effect with the implementation of the new claim processing system.

Choosing the Correct Trading Partner Entity Type

The following descriptions will help you choose the correct trading partner entity type before you begin your enrollment.

Provider

Providers are entities that have contracted with Idaho Medicaid to perform healthcare and other Medicaid related services. You do not have to be a physician to be considered a provider of Medicaid services.

Clearinghouse

Clearinghouses are organizations that typically combine EDI transactions from multiple providers, billing agencies, and other health plans for routing and submission to the appropriate processing entity. Clearinghouses then receive, split, and route the EDI responses to the appropriate originating entity. Clearinghouses typically do not perform medical coding services; however, they often perform EDI translation services.

Billing Agency

Billing agencies prepare and submit claims to Idaho Medicaid on behalf of Idaho Medicaid providers. To register, a billing agency must have at least one Idaho Medicaid provider for whom they perform billing services. If the billing agency bundles claims from multiple providers and submits claims to Idaho Medicaid through a clearinghouse, the billing agency is not required to register as a trading partner.

Software Vendor

Software vendors are application developers that market their product to Medicaid providers. Software vendors will not be required or allowed to register as a trading partner with Idaho Medicaid, but will be able to test their billing software through a registered Idaho Medicaid provider. This helps maintain HIPAA standards and Trading Partner Agreement requirements.

(Continued on page 5)

Molina/Unisys Contact Information

◆ MACS

(866) 686-4272
(208) 373-1424

◆ Correspondence

PO Box 70082
Boise, ID 83707

◆ Medicaid Claims

**Utilization
Management/
Case Management**
PO Box 70083
Boise, ID 83707

CMS 1500

PO Box 70084
Boise, ID 83707

UB-04

PO Box 70085
Boise, ID 83707

UB-04

**Crossover/CMS 1500
Crossover/Third Party
Recovery (TPR)**
PO Box 70086
Boise, ID 83707

Financial/ADA 2008

PO Box 70087
Boise, ID 83707

Fax Numbers

◆ Provider Enrollment

(208) 395-2198
(877) 517-2041

◆ Provider Services

(208) 395-2072
(877) 661-0974

◆ Participant Assistance Line

(888) 239-8463

Molina/Unisys – Provider Record Update

◆ Phone

Monday through
Friday, 7 am to 7 pm MT
Toll Free (866) 686-4272
In Boise (208) 373-1424

◆ Fax

(877) 517-2041

◆ E-mail

IDProviderEnrollment@unisys.com

◆ Mail

PO Box 70082
Boise, ID 83707

HP/EDS Contact Information

◆MAVIS

(800) 685-3757
(208) 383-4310

◆Correspondence

PO Box 23
Boise, ID 83707

◆Medicaid Claims

PO Box 23
Boise, ID 83707

◆PCS & ResHab Claims

PO Box 83755
Boise, ID 83707

Fax Numbers

◆Provider Services

(208) 395-2072

◆Participant Assistance Line

(888) 239-8463

(Continued from page 4)

Internal User

Internal user is reserved for State and Molina/Unisys staff use only. If you feel that you may need access as an internal user, please send an email to tdtechnicalservices@unsiys.com for confirmation.

Business Associate

Business associates are third party vendors that already have a HIPAA Business Associate agreement on file with the Idaho Department of Health and Welfare. This entity type is primarily reserved for Prior Authorization approving agencies.

What's Next

A testing and certification process must be completed **before** you are certified to submit electronic transactions. This is a separate process and more details about the testing process will be available soon.

Are you currently using PES to submit your claims and complete eligibility verifications? In the new claim processing system you will complete these same functions on the provider portal through our Direct Data Entry (DDE) process. Providers who choose the DDE option are not required to complete a testing process, but still need to register as a trading partner to gain access to the secure portion of the provider portal.

Molina/Unisys is available to provide assistance during the registration and certification process. You can contact Molina/Unisys help desk at tdtechnicalservices@unisys.com or Molina/Unisys Provider Enrollment at (866) 686-4272.

Are You Enrolled in the New MMIS?

Completing your Provider Record Update (PRU) is the foundation for successful claims processing. To ensure Molina/Unisys receives your record update application, click the **Submit** button when all information is complete. The **Submit** button is in the bottom right corner of the **Documentation** screen in the online portal at www.idmedicaid.com.

We understand that provider enrollment takes time. But it's vitally important that your enrollment is accurate. Occasionally, there is missing or outdated documentation in a provider's record. When that happens, we will call you to request this critical information. Please take the time to send in the missing information as soon as possible to ensure your record is complete.

Hopefully, you completed and submitted your record update on or before **May 7, 2010**. If you haven't, we will continue to accept provider record updates through **June 30th**. Please be aware your claims cannot be processed or paid until your application has been processed and approved by Molina/Unisys and you have signed up as a Trading Partner.

Not sure what PRU is? Frequently Asked Questions (FAQs) and other valuable information is available online at www.idmedicaid.com under the **Provider** tab.

Confused About Submitting Claims During the Payment Holdback Period?

Many providers have asked if they should stop submitting claims once the claim payment holdback period begins. **It is important for you to continue submitting your claims during the holdback period.**

The new MMIS, administered by Molina/Unisys, will be up and fully functional to support the Medicaid program. Use this time to submit all transactions required to support your claims processing so you can work through any transitional issues that may arise.

Attention Healthy Connections Providers – Lead Screening Survey

Medicaid and the Department of Nursing at Boise State University would like your opinions on lead screening. The Department of Nursing has awarded a grant to Dr Ingrid Brudenell, Karen Godard, RN, CRNP, MSN and Dr. Omair Shamim, Health and Nutrition Services Manager for Friends of Children and Families, Early Head Start and Head Start to assess health care providers' perception of barriers, facilitators, and best practices for lead screening of children enrolled in Medicaid. Please look for a short survey that will be included with your Healthy Connections enrollment mailing in May. Please return the completed survey to the researchers. We greatly appreciate your feedback and ideas. If you have questions, please contact Dr. Ingrid Brudenell, at 208-426-1670 or e-mail ibruden@boisestate.edu.

Reduce Reimbursement Time and Errors with Electronic Billing

Idaho Medicaid encourages all providers to bill electronically either by uploading the HIPAA 837 using online file exchange, or by entering claims directly into the online provider portal using the Direct Data Entry (DDE) option at www.idmedicaid.com. Either way, the process is more accurate and payments are much faster and more secure than submitting paper claims through the postal system. Here are just a few of the advantages:

Electronic Forms Submissions

- Claim data is immediately validated for HIPAA compliancy allowing submitter to correct and resubmit the claim information
- Claim Reversal/Replacement transactions and coordination of benefit (COB) amounts no longer require paper attachments

Direct Data Entry

- Providers, members, and service codes are immediately validated
- The system will complete a trial adjudication of the claim to validate relational claim data
- Providers may immediately correct, save, and re-submit claims
- Claim attachments (such as authorization forms) may be uploaded

Don't Delay – Enroll Today!

If you have never submitted claims electronically, please contact the Technical Services Help Desk today at (866) 686-4272 to get started. You may also enroll at www.idmedicaid.com. Select the **Provider** tab and then the **Register** link in the Trading Partner Sign In box. It's that easy!

Provider Relations Consultant Contact Information

◆ Region 1

1120 Ironwood Dr.
Suite 102
Coeur d'Alene, ID 83814
(208) 666-6859
(866) 899-2512
Fax: (208) 666-6856

◆ Region 2

1118 F Street
PO Drawer B
Lewiston, ID 83501
(208) 799-4350
Fax: (208) 799-5167

◆ Region 3

3402 Franklin
Caldwell, ID 83605
(208) 455-7162
Fax: (208) 454-7625

◆ Region 4

1720 Westgate Drive, # A
Boise, ID 83704
(208) 334-0842
Fax: (208) 334-0953

◆ Region 5

601 Poleline, Suite 3
Twin Falls, ID 83303
(208) 736-2143
Fax: (208) 736-2116

◆ Region 6

1070 Hiline Road
Pocatello, ID 83201
(208) 239-6268
Fax: (208) 239-6269

◆ Region 7

150 Shoup Avenue
Idaho Falls, ID 83402
(208) 528-5728
Fax: (208) 528-5756

Get Your Payments Electronically

Help us help you! In order to complete your Electronic Funds Transfer (EFT) Agreement, you must include a copy of a voided check, along with the dated and signed Authorization form.

If you do not have a copy of a voided check **or** you are registering a savings account for EFT, you will need to have your bank issue a statement verifying the Transit ABA number and account number. And remember, whether you fax, mail or e-mail, please put your case number on each page.

Questions? Call us at (866)-686-4272.

Print and Sign That W-9

Most provider record update and new application forms allow electronic signatures – but the W-9 must be printed, signed and returned via mail, fax, or scan-to-e-mail. During your record update or new application you can scan-to-upload the W-9 form.

Need a W-9 Form?

Go to www.idmedicaid.com.

See the navigation box on the left?

Click **Forms** and follow the link to Supplemental Agreements.

Click **Supplemental Agreements** and you will find a list of forms, including a W-9.

Existing Primary Care Provider (PCP)

Referrals in the New MMIS

With the transition to the new MMIS, the Division of Medicaid recognizes there will be challenges in transitioning from the old system to the new system. One particular area of concern the Division has recognized is in the area of Healthy Connections referrals. Three specific areas of concern are:

- There are no existing referrals in the current system to convert for future claims processing
- The new MMIS will require PCP's to enter referrals within the new system, rather than including the Healthy Connections referral number on the claim
- The new MMIS will not be available prior to full implementation to enter referrals ahead of claims processing

Given these concerns, the Division has approved a transition approach for referrals to allow providers to get claims paid while also beginning to enter and exchange referrals for future claims. The new MMIS initially will not edit claims for referrals that were authorized prior to implementation of the system. Until further notice, **DO NOT** include an HC referral number on claims submitted to Molina/Unisys on or after **June 7, 2010**, regardless of the date services were rendered. The Division will continue to:

- Require that providers give and receive referrals
- Require PCP's begin entering new referrals into the new MMIS at go live
- Require all providers maintain proof of a referral and provide that proof in case of an audit

Any service provided without documented proof of a referral could be subject to recoupment. As the numbers of pre-implementation referrals expire, referral payment edits will be phased in. Specific instructions by referral type will be provided well in advance of edits being activated. We appreciate your support with the implementation of the new system and hope this provides you with the necessary transition period to get your referral information entered in the new system. Should you have any questions, please contact your Healthy Connections Representative.

.

Idaho Health Care Conference 2010

There are two separate provider workshops occurring in May. The Idaho Department of Health and Welfare (DHW) along with the following sponsors is hosting the 2010 Idaho Health Care Conference (IHCC) in several cities throughout the state.

Agenda

Registration starts at 8 a.m. - Classes begin at 8:30 a.m.

Please contact via e-mail:

Jenni Kroon jkroon@bcidaho.com

Nicki Kelly nkelly@fchn.com

Luci Cabrera luciana.cabrera@idahosif.org

Idaho Falls

Tuesday, May 11, 2010

8 a.m. to 4 p.m.

Red Lion on the Falls

475 River Parkway - Idaho Falls, ID

Please pre-register by: May 3, 2010

Burley

Thursday, May 13, 2010

8 a.m. to 4 p.m.

Best Western Inn & Convention Center

800 N. Overland Avenue - Burley, ID

Please pre-register by: May 5, 2010

Coeur d'Alene

Wednesday, May 19, 2010

8 a.m. to 4 p.m.

Best Western Conference Center

506 W. Appleway - Coeur d'Alene, ID

Please pre-register by: May 12, 2010

Pocatello

Wednesday, May 12, 2010

8 a.m. to 4 p.m.

Holiday Inn

1399 Bench Road - Pocatello, ID

Please pre-register by: May 4, 2010

Lewiston

Tuesday, May 18, 2010

8 a.m. to 4 p.m.

Red Lion

621 21st Street - Lewiston, ID

Please pre-register by: May 11, 2010

Boise

Thursday May 27, 2010

8 a.m. to 4 p.m.

Holiday Inn Airport

3300 Vista Avenue - Boise, ID

Please pre-register by: May 20, 2010

Conference sponsors include the Idaho Department of Health and Welfare - Division of Medicaid, Molina/Unisys, Blue Cross of Idaho, CIGNA, First Choice Health, Humana Inc., the Idaho State Insurance Fund, Regence BlueShield of Idaho, and TriWest Healthcare Alliance.

Detailed Provider Training Workshops

Additionally, **Molina/Unisys** is hosting detailed provider training sessions on separate days. There are four classes presented each day. Each class will explore a specific topic area and will give providers answers to specific claim and billing questions.

Treasure Valley
Thursday, May 6, 2010
Hampton Inn
5750 East Franklin Rd.
Nampa, Idaho

Treasure Valley
Friday, May 7, 2010
Hampton Inn
5750 East Franklin Rd.
Nampa, Idaho

Idaho Falls
Monday, May 10, 2010
Red Lion on the Falls
475 River Parkway
Idaho Falls, Idaho

Burley
Friday, May 14, 2010
Best Western
800 N. Overland Ave.
Burley, Idaho

Lewiston
Monday, May 17, 2010
Red Lion
621 21st Street
Lewiston, Idaho

Coeur d'Alene
Thursday, May 20, 2010
Best Western Conference Center
506 W. Appleyway
Coeur d'Alene, Idaho

Navigating the New Portal 8:00 a.m. – 10:00 a.m. each day

Get an in-depth view of the Idaho Medicaid Online Provider Portal. Understand the layout and functionality of eligibility transactions, claims submissions, retrieval and submissions of referrals and prior authorizations and more.

UB/Institutional Claims and Billing 10:30 a.m. – 12:30 p.m. each day

Providers that currently bill using UB-04 claim forms (both paper and electronic) will want to attend this workshop for detailed training on how to submit claims in the new system as well as billing changes.

Professional/CMS1500 Claims and Billing 1:00 p.m. – 3:00 p.m. each day

Providers that bill using CMS1500 (HCFA) forms (both paper and electronic) will want to attend this workshop for detailed training on how to submit claims in the new system as well as billing changes.

Dental Billing 3:30 p.m. - 5:00 p.m. each day

Dental providers that bill using ADA forms (both paper and electronic) will want to attend this workshop for detailed training on how to submit claims in the new system as well as billing changes.

To register, please go to the Provider portal at www.idmedicaid.com and click on the *Idaho Medicaid Training Center* link in the lower left side of the screen. Space is limited.

For providers unable to attend the offered workshops, training materials will be available on the provider portal at www.idmedicaid.com. Providers that have completed the Trading Partner agreement and set up an account for Direct Data Entry (DDE), and log into the secure Learning Management System (LMS) will have access to Computer Based Training (CBT) self-paced training that will be posted over the next several months.

All providers will have access to the Provider Handbook that contains information they need about how to update the way they submit their claims.

User guides and companion guides are available to all providers on the www.idmedicaid.com Web site.

We encourage you to attend the statewide trainings that will be taking place during May for information on system and billing changes that may impact you and your business. For further information on training dates and topics please visit our Web site at www.idmedicaid.com and select the training links on the left hand side of the screen.

Where to Send Paper Claims

To ensure accurate processing and faster payment, please mail your claims and supporting documents to Molina/Unisys at the specific P.O. Box that corresponds to the type of claim.

Mail claim forms as follows:

CMS 1500
PO Box 70084
Boise, ID 83707

UB-04
PO Box 70085
Boise, ID 83707

UB-04 Crossover/
CMS 1500 Crossover/
Third Party Recovery
(TPR)
PO Box 70086
Boise, ID 83707

ADA 2006
PO Box 70087
Boise, ID 83707

Examples of non-claim correspondence and where to mail are below.

Member Correspondence
PO Box 70081
Boise, ID 83707

AHI, HIPP, Healthy Connections, PHA
Correspondence

Provider Correspondence
PO Box 70082
Boise, ID 83707

Appeals

Utilization Management/
Case Management
PO Box 70083
Boise, ID 83707

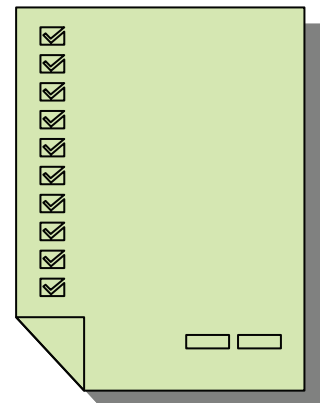
Medical justification, Op reports, Sterilization
consent forms, Oxygen levels, Invoice
documentation

Paper Claim Forms: Which Ones and Where?

Molina/Unisys only accepts the following paper claim forms

- CMS-1500
- UB04
- Dental ADA 2006

Forms can be found at most office supply stores.



Message from the Medicaid Administrator

Providers/Stakeholders! We want your feedback on ways the Department of Health and Welfare can reduce costs in order to sustain a viable Medicaid program. Watch the www.MedicaidNeedsYourIdeas.dhw.idaho.gov Web site for a survey tool (fast and easy way to provide your input) and calendars with meeting details as they become finalized.

Changes: Interpretive Services Billing

For all interpretive services billed on or after June 7, 2010, (through Molina/Unisys), providers must bill in 15 minute increments using the appropriate code/modifier listed in the chart below.

| PROCEDURE CODE | MODIFIER | EXPLANATION | UNITS |
|----------------|------------------------------|------------------------------|-------------------|
| T1013 | None needed | Oral language Interpretation | One unit = 15 min |
| T1013 | CG – Policy Criteria applied | Sign Language Interpretation | One unit = 15 min |

Medicaid covers interpretation services to assist participants who are deaf or have limited English proficiency (LEP) to understand their Medicaid-covered services. Payment will be made to the provider when it is necessary for the provider to hire an interpreter in order to communicate with a participant about their Medicaid-covered services while they are providing a Medicaid-covered service.

Payment for interpretation services are subject to the following limitations:

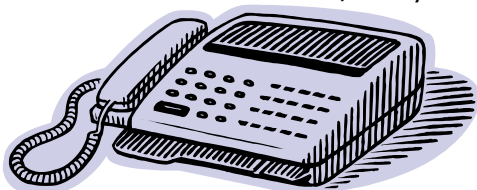
- Payment for interpretation services **will not** be made to providers who cost audit settle with DHW. Those services are considered as a part of the provider’s cost of doing business. This includes providers such as hospitals, home health agencies, rural health clinics (RHC), federally qualified health centers (FQHC), and long-term care facilities.
- Payment will **only** be made for interpretive services to assist the participant to understand Medicaid covered services. If the interpretive services are necessary for any other reason, they may not be billed to Medicaid.
- Payment **will not** be made for interpretive services when the provider of the service is able to communicate in the participant’s language or sign language.

As with all services billed in 15 minute increments, see *General Billing Information* of the provider handbook for requirements and limitations in billing 15-minute increments.

State Your Case (Number)

When faxing or mailing important provider enrollment documents for your record update or new application, please include a cover sheet and write or type the assigned case number on each page. All necessary documents and forms are online at: www.idmedicaid.com.

Fax documents to Molina/Unisys at (877) 517-2041.



Send documents to Molina/Unisys at
Idaho Medicaid
Provider Record Update
P.O. Box 70082
Boise, ID 83707



If you have questions about this, please call Provider Enrollment at (866) 686-4272.

Preventive Health Assistance for Wellness

The Preventive Health Assistance (PHA) wellness benefit provides assistance to families whose children are:

- Enrolled in the Medicaid Basic Plan
- Required to pay a monthly premium to maintain eligibility

These children are automatically enrolled in the Wellness PHA.

How does it work?

1. The claims processing system is searched to determine if a child is current on receiving recommended well-child checks and immunizations.
2. If the child is current, PHA points are earned.
3. The PHA points are applied as a reduction to the family's monthly premium.

PHA follows the American Academy of Pediatrics (AAP) recommended schedule for Well-child checks and the Center for Disease Control (CDC) recommendations for Immunizations.

Well Child Check-up Schedule

| Age | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |
|---------|-----------------------|-----------|-----------|-----------|-----------|----------|
| Babies | 1 Week-1 Month | 2 Month | 4 Month | 6 Month | 9 Month | 12 Month |
| 1-3 yr | 15 months | 18 months | 24 months | 30 months | 36 months | |
| 3-19 yr | 1 check-up every year | | | | | |

How can Primary Care Providers (PCPs) help?

Be sure to bill Well Child Checks with the primary diagnosis V20.2 and the appropriate CPT code (see provider handbook). Please note that if a child comes in for a well-child check and presents sick, you can bill for both as long as both exams were performed.

If you would like to request a supply of PHA brochures or if you would like more information on PHA Benefits, please call the PHA Unit at 877-364-1843 (toll-free).

ATTENTION PERSONAL CARE SERVICE PROVIDERS

PCS Caregiver Training Requirements for Adults or Children with Developmental Disabilities (DD)

The Medicaid Enhanced Plan Benefits rule 16.03.10.305.02 Personal Care Services – Provider Qualifications requires caregivers to have completed one of the Department approved developmental disabilities training courses or have experience providing direct services to adults or children with developmental disabilities. Providers who are qualified as a qualified mental retardation professional are exempt from the Department approved developmental disabilities training course. If a provider needs to request temporary approval to provide services or has questions, please contact your regional quality assurance specialist:

Regions 1 and 2 - Kim Hickey at (208) 799-4435

Regions 3 & 4 - please contact Kim Hickey at (208) 799-4435 or Michelle Finck at (208) 782-2618

Regions 5, 6, and 7 - Michelle Finck at (208) 782-2618

Medicaid Program Integrity

Transportation Providers Criminal History Checks and Documentation

Recent audits of commercial transportation providers have revealed three problem areas: the lack of required criminal history background checks; insufficient documentation; and billings for non-covered services.

Medicaid Basic Plan Benefits, IDAPA 16.03.09.874.01.e requires Commercial Transportation Providers to: Verify that all staff having contact with participants have complied with IDAPA 16.05.06, "Criminal History and Background Checks." This requirement was implemented to protect both Medicaid clients and the transportation companies themselves from potential lawsuits. Audits have shown some providers had not completed background checks on any staff used to transport Medicaid clients. Additionally, it was found some providers had used individuals with criminal records including designated crimes which would have precluded them from passing the background check. The Department takes the issue of client safety seriously. Civil monetary penalties have been imposed on providers when investigations revealed providers had not completed background checks on staff, and/or utilized convicted felons to transport Medicaid clients. The Department may also recover payment for all services provided by individuals who cannot pass criminal history background checks.

Section 5.2 of the Supplemental Transportation Provider Agreement requires commercial transportation providers performing fixed route and demand response door to door services to maintain records sufficient to support the amount and scope of services performed and billed. The specific components are outlined in both the provider agreement, and the Idaho Medicaid Provider Handbook, Transportation Guidelines. Audits have shown some providers are not completing trip logs and are using authorization requests as the sole documentation to support their billings. Prior authorization documents do not confirm that the service was provided; only that approval was requested. Additionally, it has been found that some providers are documenting a round trip as a single entry. This results in the pick-up and drop off locations showing the same address and causes inaccurate reporting. The date, time, and geographical point of pick-up **and** drop-off for each trip is required. Providers who fail to document required information are subject to civil monetary penalties and/or recoupment of services.

Lastly, the audits showed some providers are billing for transportation to non-covered services. Medicaid Basic Plan Benefits, IDAPA 16.03.09.872.01.a limits reimbursement for transportation as follows: "The travel is essential to get to or from a medically necessary service or a waiver service covered by Medicaid." As part of the audit process, transportation billings are compared to medical visits. If no corresponding medical visit is found, the medical service provider listed may be contacted to confirm the visit. Payment for transportation billed for which no corresponding medical service can be confirmed will be recouped.

Updated Notification of Birth Form

Attention Hospitals

An updated Notification of Birth form is included in this newsletter for your use. Please replace your 2007 form with the current one, which includes a new e-mail address and fax number to expedite processing. Note that the CIN # (Client Identification Number) is also known as the MID (Medicaid/ Member ID) Number. An electronic copy is available under **Forms** on www.healthandwelfare.idaho.gov/Default.aspx?tabid=214. Questions may be directed to Arlee Coppinger, Medical Care Unit, (208) 287-1177.

(See page 14 for form)

Notification of Birth: Anticipated Stays Greater Than 72 hours

Notification Date _____

Please fill out as completely as possible

Section 1—*To be completed by the hospital for a mother that is receiving Idaho Medicaid at the time of birth, and the baby is anticipated to stay in the NICU unit for over 72 hours.*

| Baby's Information | | Mother's Information | |
|--------------------|--|----------------------|--|
| Full Name | | Name | |
| Date of Birth | | Date of Birth | |
| CIN# | | CIN# | |
| Gender | | AKA | |
| City of Residence | | County of Residence | |

Hospital Information

| | | | |
|----------------|--|-----------|--|
| Hospital Name | | Fax # | |
| Contact Person | | Contact # | |
| E-mail Address | | | |

Comments _____

Section 2—*To be completed by the Department*

IFPC—e-mail NICU-IFPC@dhw.idaho.gov or Fax # 208-528-5980

| | |
|---|--|
| Date Baby's MID# Provided to the Hospital | |
|---|--|

SRS Worker (*if known*) _____

Response section

Instructions

Step 1—*To be completed by the Hospital for anticipated stays greater than 72 hours*

1. Electronically fill out **Section 1** as completely as possible. (Leave baby's CIN# blank)
2. E-mail the form to the IFPC at NICU-IFPC@dhw.idaho.gov or Fax it to 208-528-5980.
3. Use the words '**Notification of Birth**' in the e-mail subject line to provide for easy identification and quick turn around.
4. For babies hospitalized for 72 hours or less, continue to follow your current procedure.

Step 2—*To be completed by the Department*

1. The IFPC researches and processes the request.
2. **Section 2** is completed with the babies CIN# inserted in **Section 1**.
3. The IFPC e-mails, or faxes, the completed form back to the Hospital.

Last updated 2/11/2010 RLC

Have You Visited the New Provider Portal?

This is your 24/7 one-stop shop for provider enrollment, claims and correspondence. Now is a great time to become familiar with all of the information available to you. Just type www.idmedicaid.com in your browser address field and press enter. Here's a preview of the Health PAS Web site:



The screenshot shows the HealthPAS website interface. At the top left is the 'HealthPAS' logo. Below it is the Idaho Department of Health & Welfare logo. A navigation bar contains 'Home', 'Provider', and 'Member' tabs. A left sidebar lists categories: 'Announcements', 'Provider Enrollment', 'Reference' (with sub-items like Billing Instructions, Community Resources, etc.), 'Training', and 'Contact Us'. The main content area features a 'Welcome to Idaho Medicaid' heading, a description of the program, and a list of eligible groups: Children under age 19, Parents of related adults with children under age 19, Pregnant women, Women diagnosed with breast or cervical cancer or pre-cancer, People aged 65 and older, and People who are blind or disabled using Social Security criteria.

Now is a great time to explore and sign up for training!

IR 2010-05 - Information Request Related to Personal Care Service Wage Determination

This Information Release (IR) was published and mailed to impacted providers in **March 2010**. You can find a copy of this IR at: <http://www.healthandwelfare.idaho.gov> click on the **Providers** tab, then the **Medicaid Providers** tab, then the **Information Releases** link.

March 31, 2010

REVISED MEDICAID INFORMATION RELEASE MA10-03

To: Prescribing Providers, Pharmacists, and Hospitals

From: Leslie M. Clement, Administrator
Division of Medicaid

Subject: Preferred Agents for Drug Classes Reviewed at Pharmacy and Therapeutics Committee Meetings on January 15, 2010, and February 19, 2010.

| | |
|----------------------|--|
| Drug/Drug Classes: | Noted below |
| Implementation Date: | Effective for dates of service on or after April 1, 2010 |

Idaho Medicaid is noting preferred agents and prior authorization (PA) criteria for the following drug classes as part of the Enhanced PA Program. The information is included in the attached Preferred Drug List.

The Enhanced PA Program and drug-class specific PA criteria are based on nationally recognized peer-reviewed information and evidence-based clinical criteria. Medicaid designates preferred agents within a drug class based primarily on objective evaluations of their relative safety, effectiveness, and clinical outcomes in comparison with other therapeutically interchangeable alternative drugs and, secondarily, on cost.

Questions regarding the Enhanced PA Program can be referred to the Idaho Medicaid Pharmacy Unit at (208) 364-1829. A current listing of preferred agents, non-preferred agents, and prior authorization criteria for all drug classes is available online at www.medicaidpharmacy.idaho.gov

| THERAPEUTIC DRUG CLASS | PREFERRED AGENTS | NON-PREFERRED AGENTS* |
|---|--|---|
| Analgesics, Narcotics Long-Acting | methadone generic, Kadian [®] , fentanyl transdermal generic and morphine ER generic. | Embeda [®] , Duragesic[®] , Duragesic Matrix [®] , Ultram ER[®] , Ryzolt[®] , Tramadol ER[®] , Avinza [®] , Opana ER [®] , Oxycontin [®] and oxycodone extended release generic |
| Analgesics, Narcotics Short-Acting | Reprexain[®] , acetaminophen/codeine generic, tramadol generic, hydrocodone/acetaminophen generic, aspirin/codeine generic, codeine generic, morphine IR generic, oxycodone IR generic, oxycodone/acetaminophen generic, pentazocine/naloxone generic, hydromorphone generic, and tramadol/acetaminophen generic . | Nucynta[®] , Onsolis[®] , levorphanol generic, propoxyphene/acetaminophen generic , pentazocine/acetaminophen generic, oxycodone/aspirin generic, propoxyphene generic, meperidine oral generic, Darvon N [®] , Panlor DC/SS [®] , Opana [®] , fentanyl buccal generic, Fentora [®] , hydrocodone/ibuprofen generic, oxycodone/ibuprofen generic, butalbital compound/codeine generic, and dihydrocodeine/acetaminophen/caffeine generic |
| Angiotensin Modulators | ramipril generic , benazepril and benazepril/HCTZ generic, captopril and captopril/HCTZ generic, enalapril and enalapril/HCTZ generic, fosinopril and fosinopril/HCTZ generic, lisinopril and lisinopril/HCTZ generic, quinapril and quinapril/HCTZ generic, Diovan [®] , Diovan HCT [®] , Benicar, Benicar HCT [®] , Micardis [®] , Micardis HCT [®] , Cozaar [®] , Hyzaar [®] , Avapro [®] and Avalide [®] | Teveten [®] , Tevetan HCT [®] , Atacand [®] , Atacand HCT [®] , moexepiril and moexepiril/HCTZ generic, Tekturna [®] , Tekturna HCT [®] , and trandolapril generic |
| Angiotensin Modulator—Calcium Channel Blocker Combination Drugs | Exforge [®] and Azor [®] | benazepril/amlodipine generic , Tarka [®] , Twynsta [®] , and Valturna [®] <i>The separate component drugs must be used in place of benazepril/amlodipine combinations.</i> |
| Anticoagulants, Injectable | Fragmin [®] , Lovenox [®] , and Arixtra [®] | There are no agents in this class designated as non-preferred |

(Continued on page 17)

| THERAPEUTIC DRUG CLASS | PREFERRED AGENTS | NON-PREFERRED AGENTS* |
|------------------------------------|--|--|
| Anticonvulsants | <p>Tegretol XR[®], Trileptal[®] suspension, levetiracetam generic, divalproex generic, methobarbital generic, phenobarbital generic, clonazepam generic, carbamazepine generic, Carbatrol[®], Equetro[®], phenytoin generic, mephobarbital generic, primidone generic, valproic acid generic, Depakote[®] sprinkle, Depakote ER[®], Celontin[®], Peganone[®], Gabitril[®], ethosuximide generic, oxcarbazepine tablets, zonisamide generic¹, Lyrica^{®1}, gabapentin generic¹, Keppra tablets, divalproex ER, divalproex sprinkle, Lamictal XR[®], and Diastat[®]</p> | <p>Banzel[®], Vimpat[®], Lamictal^{®1} and Lamictal ODT^{®1}, Keppra^{®1} solution, Keppra^{®1} XR, Depakote[®], Trileptal[®] oral, Stavzor[®], Phenytek[®], Felbatol[®], lamotrigine generic¹ oxcarbazepine suspension generic, Topamax sprinkle^{®1}, Topomax tablets^{®1}</p> <p>¹ These anticonvulsants are recommended as preferred for epilepsy and other seizure orders only. Non-seizure indications will still require that therapeutic prior authorization criteria are met.</p> |
| Antihistamines, Minimally Sedating | <p>Allegra[®], loratadine generic, loratadine syrup, cetirizine generic, cetirizine syrup OTC and cetirizine syrup RX</p> | <p>Claritin[®] chew, Semprex D[®], Clarinex/ Clarinex D[®], Clarinex[®] syrup, Xyzal[®], Xyzal[®] syrup, Allegra[®] syrup, Allegra ODT, and fexofenadine generic</p> |
| Antimigraine Agents, Triptans | <p>Maxalt/Maxalt MLT[®], Relpax[®], Imitrex (oral)[®], Imitrex (nasal)[®], and Imitrex[®] SQ</p> | <p>sumatriptan generic, Treximet[®], Amerge[®], Axert[®], Frova[®], Zomig/ZomigZMT[®], and Zomig[®] (nasal)</p> |
| Beta Blockers | <p>Levator[®], Innopran XL[®], atenolol generic, metoprolol generic, propranolol generic, sotalol generic, nadolol generic, acebutolol generic, labetalol generic, pindolol generic, timolol generic, bisoprolol generic, and carvedilol generic</p> | <p>Bystolic[®], betaxolol generic, and Coreg CR[®]</p> |
| Bladder Relaxant Preparations | <p>Toviaz[®], Enablex[®], oxybutynin generic, and Vesicare[®]</p> | <p>Oxytrol[®] transdermal, Detrol LA[®], Detrol[®], Sanctura[®], Sanctura XR[®], and oxybutynin ER generic</p> |
| BPH Treatments | <p>doxazosin generic, terazosin generic, Proscar[®], Uroxatral[®], Cardura XL[®], and Flomax[®]</p> | <p>Rapaflo[®], Avodart[®] and finasteride generic</p> |
| Calcium Channel Blockers | <p>Dynacirc CR[®], verapamil generic, diltiazem generic, nifedipine IR/ER generic, felodipine ER generic and amlodipine generic</p> | <p>nisoldipine generic, Cardizem LA[®], verapamil ER PM, nifedipine generic, Cardene SR[®], Covera-HS[®], isradipine generic and Sular[®]</p> |

(Continued on page 18)

| THERAPEUTIC DRUG CLASS | PREFERRED AGENTS | NON-PREFERRED AGENTS* |
|-------------------------------------|---|---|
| Erythropoiesis Stimulating Proteins | Dynacirc CR [®] , verapamil generic, diltiazem generic, nifedipine IR/ER generic, felodipine ER generic and amlodipine generic | nisoldipine generic, Cardizem LA [®] , verapamil ER PM, nifedipine generic, Cardene SR [®] , Covera-HS [®] , isradipine generic and Sular [®] |
| Erythropoiesis Stimulating Proteins | Epogen[®] , Aranesp [®] and Procrit [®] | There were no agents in this class recommended as non-preferred |
| Growth Hormone | Genotropin[®] , Nutropin [®] , Nutropin AQ [®] and Norditropin [®] | Saizen[®] , Tev-Tropin [®] , Serostim [®] , Humatrope [®] , Omnitrope [®] and Zorbtive [®] Current therapeutic criteria for growth hormone will continue to be required for all agents. Patients currently receiving non-preferred agents will be "grandfathered". These agents will be non-preferred and require prior-authorization for new patients. |
| Hepatitis C Agents | Pegasys [®] , Peg-Intron [®] , Peg-Intron [®] Redipen, and ribavirin generic | Infergen [®] |
| Hypoglycemics, Meglitinides | Starlix [®] and Prandin [®] | Prandimet[®] and nateglinide |
| Hypoglycemics, TZD | Avandia [®] , Actos [®] , Avandamet [®] , Avandaryl [®] , Actoplus Met [®] , and Duetact [®] | There were no agents designated as non-preferred |
| Impetigo Agents, Topical | mupirocin ointment generic | Altabax [®] and Bactroban [®] cream |
| Lipotropics, Other | Trilipix[®] , Niacor [®] , Niaspan [®] , Antara[®] , gemfibrozil generic, colestipol generic, cholestyramine generic | Fibricor[®] , Zetia [®] , Triglide [®] , Welchol [®] , Lipofen [®] , Fenoglide [®] , fenofibrate generic , fenofibric acid, and Lovaza [®] |
| Multiple Sclerosis Agents | Betaseron [®] , Avonex [®] , Rebif [®] and Copaxone [®] | Extavia[®] |
| Otic Antibiotics | Coly-Mycin S[®] , Cortisporin[®] , neomycin/polymyxin/HC , Floxin [®] , ofloxacin generic otic and Ciprodex [®] otic | Cetraxal[®] , and Cipro [®] HC |
| Phosphate Binders | PhosLo [®] , and Renagel [®] | Eliphos[®] , Fosrenol[®] , Renvela [®] , and calcium acetate generic |
| Proton Pump Inhibitors | omeprazole generic and OTC , Aciphex[®] , Prevacid[®] solutab , and Nexium [®] capsule | Prilosec[®] OTC and suspension , Kapidex[®] , Prevacid[®] capsule and OTC , Nexium[®] suspension , pantoprazole generic, lasoprazole generic, and Zegerid [®] |

(Continued on page 19)

| THERAPEUTIC DRUG CLASS | PREFERRED AGENTS | NON-PREFERRED AGENTS* |
|--|---|---|
| Sedative Hypnotics | zaleplon generic , triazolam generic, chloral hydrate generic, temazepam generic, and zolpidem generic | Edluar[®], temazepam 22.5mg, temazepam 7.5mg, Restoril[®] 7.5mg, Lunesta [®] , flurazepam generic, Rozerem [®] , Ambien CR [®] , Doral [®] , and estazolam generic |
| Skeletal Muscle Relaxants | baclofen generic, chlorzoxazone generic, cyclobenzaprine generic, dantrolene generic, methocarbamol generic, and tizanidine generic | Amrix [®] , orphenadrine generic, orphenadrine compound generic, carisoprodol generic, carisoprodol compound, Soma [®] , Skelaxin [®] , Zanaflex [®] , and Fexmid [®] All current therapeutic prior authorization criteria for carisoprodol remain in effect. |
| Ulcerative Colitis Agents | Apriso[®] , sulfasalazine generic, Asacol [®] , Pentasa [®] , and Canasa [®] | Sfrowasa[®], mesalamine rectal generic, balsalazide generic, Dipentum [®] and Lialda [®] |
| Pulmonary Arterial Hypertension (PAH) Agents, Oral | Tracleer[®] , Revatio [®] and Letairis [®] | Adcirca [®] |
| Cough and Cold Agents | All generic products both prescription and non-prescription Cough and Cold preparations restricted to participants 7 years and older. Quantity limits of 4 oz. per prescription and no more than two prescriptions per six months per participant. | All branded products |
| Fibromyalgia Agents | Savella[®], Lyrica[®] and Cymbalta[®] Prescriptions will require a fibromyalgia diagnosis. | |
| Immunosuppressives | azathioprine generic, Cellcept[®], cyclosporine modified generic, Gengraf[®], mycophenolate mofetil generic, Neoral[®], Prograf[®], Rapamune[®], Sandimmune[®], and Tacrolimus[®] | Azasan[®], cyclosporine generic, and Myfortic[®] |

*Use of non-preferred agents must meet prior authorization requirements.

*Use of any covered product may be subject to prior authorization for quantities or uses outside the Food and Drug Administration (FDA) guidelines or indications.

Idaho Medicaid Provider Handbook

This Information Release does **not** replace information in your Idaho Medicaid Handbook.

**Molina/Unisys
PO Box 70082
Boise, Idaho 83707**



IDAHO DEPARTMENT OF
HEALTH & WELFARE

Department of Health and Welfare Office Closures

Health and Welfare offices will be closed every other Friday to help manage the State's budget reductions.



All Department of Health and Welfare offices will be closed all day on May 14th, May 28th and June 11th. During these closures, the DHW Director's office will remain open. The closures will not affect essential services such as crisis response for mental health, or response to child protection calls for abuse or neglect. Also, the state's two state mental health hospitals and Idaho State School and Hospital will maintain 24/7 operations.

Our offices will resume normal business hours on the following Monday morning.

Digital Edition

As part of our commitment to cost savings, we are using paperless processes wherever possible. Beginning with this issue, the "MedicAide" is going online and will be available electronically by the fifth of each month. Our new digital edition, posted at www.idmedicaid.com also allows links to important forms and web sites, plus it's eco-friendly.

**MedicAide is the
monthly
informational
newsletter for Idaho
Medicaid providers.**

**Editor:
Chris Roberts,
Division of Medicaid**

**If you have any
comments or
suggestions, please
send them to:
Robertc2@dhw.idaho.gov**

or

**Chris Roberts
DHW - MMIS Project
PO Box 83720
Boise, ID 83720-0036**

Fax: (208) 364-1811