

# IDAHO MEDICAID REIMBURSEMENT POLICY: REQUIREMENTS FOR ORDERING, REFERRING AND PRESCRIBING (ORP) PROVIDERS

1.0

## POLICY METADATA

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| 1. Policy Type: Division Wide          | 5. Last revised Date: 4/3/2017 |
| 2. Policy Status: Effective 4/1/2017   | 6. Revision Approval Date: N/A |
| 3. Policy Author: Division Policy Team | 7. Next Review Date: 4/1/2018  |
| 4. Initial Effective Date: 4/1/2017    |                                |

## POLICY INTENT/RATIONALE

This policy defines Idaho Medicaid's requirements for reimbursement when services or supplies are ordered, referred or prescribed for Idaho Medicaid participants.

## POLICY

Idaho Medicaid will not reimburse for any service or supply prescribed, ordered or referred by a provider who is not enrolled with Idaho Medicaid or who's National Provider Identifier (NPI) is not included on the claim for reimbursement. It is the responsibility of the billing provider to ensure they obtain the name and the NPI of the Ordering, Referring or Prescribing (ORP) provider and include it on their claim for reimbursement. Claims without the name and NPI of the ORP provider will be denied for payment.

## BACKGROUND

Federal Medicaid Regulations require the State Medicaid Agency to enroll and screen all Providers. Providers who are not the billing provider but who order, refer or prescribe treatments, supplies or services for Medicaid participants, must be identified on any claim for Medicaid reimbursement. The billing provider cannot be paid if the ORP provider's name and NPI are not on the claim or if the ORP provider is not enrolled with Medicaid.

## GENERAL REQUIREMENTS

- All ordering, referring or prescribing providers must enroll with Idaho Medicaid, even if they do not bill Idaho Medicaid for services.
- The billing provider must include the name and the NPI of the non-billing provider on their claim to Idaho Medicaid
- The following individual providers may order, refer, or prescribe within the Medicaid program and within their scope of practice:
  - Advanced Practice Registered Nurses
  - Dentists
  - Nurse Practitioners
  - Optometrists
  - Physicians
  - Physician Assistants
  - Podiatrists
  - Psychologists

- Billing providers who must report the name and NPI of an enrolled ORP provider:
  - Durable Medical Equipment Suppliers
  - Home and Community-Based Assistive Living
  - Home Health Agencies
  - Hospice
  - Hospitals (inpatient and outpatient)
  - Imaging\Testing Facilities
  - Independent Laboratories
  - Nursing Facilities
  - Outpatient Health Facilities
  - Pharmacies
  - Portable X-Ray Suppliers
  - Private Duty Nurses
  - Therapy Providers

## PROVIDER REQUIREMENTS

All providers billing Idaho Medicaid must ensure all ORP providers have NPIs and are enrolled in the Medicaid program. It is the responsibility of the billing provider to ensure they obtain the name and the NPI of the (ORP) provider and include it on their claim for reimbursement.

## REIMBURSEMENT

No reimbursement is available for claims that do not include the name and NPI for the ORP. Claims will be denied if the service or product has been requested by a provider who is not enrolled.

## EXCEPTIONS

Idaho Medicaid does not require ORP provider enrollment for automatic Medicare crossover claims. However, Medicaid crossovers submitted directly to Idaho Medicaid by the provider will be subject to ORP requirements.

## DEFINITIONS

**Ordering, Referring or Prescribing (ORP) Providers:** Any physician or other health care provider who writes orders, prescriptions or referrals for Medicaid participants for healthcare services or supplies.

## REFERENCES

### [Federal Regulations](#)

#### **42 CFR 455.410 – Enrollment and screening of providers**

(a) The State Medicaid agency must require all enrolled providers to be screened under to this subpart.(b) The State Medicaid agency must require all ordering or referring physicians or other professionals providing services under the State plan or under a waiver of the plan to be enrolled as participating providers.(c) The State Medicaid agency may rely on the results of the provider screening performed by any of the following:(1) Medicare contractors. (2) Medicaid agencies or Children's Health Insurance Programs of other States.

### [Frequently Asked Questions](http://www.idmedicaid.com) (www.idmedicaid.com)

## **Enrollment for Non-Billing Ordering and/or Referring Physicians and Practitioners Implemented**

Federal Regulations (42 CFR 455.410) require the enrollment of all non-billing physicians and practitioners. The first phase of implementing these changes is the enrollment phase. The regulation also requires the inclusion of the ordering/referring provider on the billing provider's claims for reimbursement. This second phase of the regulations will be required soon. Please watch for more communications about the claim payment implementation.

Medicaid has established a streamlined process to enroll non-billing individuals whose only relationship with the Idaho Medicaid program is to refer for specialized care or order items or services. This enrollment method is not for providers who want to submit claims to Idaho Medicaid for reimbursement for their services.

This enrollment is for individuals only, not a facility or group provider.

To obtain a streamline, non-billing provider enrollment form, call Idaho Medicaid Provider Enrollment toll free at 1 (866) 686-4272 or local 1 (208) 373-1424.

Some frequently asked questions about non-billing ordering and referring providers:

### **Who is a non-billing ordering and referring physician or practitioner?**

Any physician or other professional practitioner with the licensure authority to order items and services for Idaho Medicaid patients or refer patients for specialized care but who choose not to enroll with Idaho Medicaid for the purposes of receiving payment for those services.

### **I'm enrolled as a billing provider with Idaho Medicaid. What will happen if I don't include the ordering/referring provider on my claims?**

Once this phase of the requirement has implemented, this will result in a denial of payment for any claim that includes services or items that requires the ordering/referring provider information.

### **What if I chose not to enroll with Idaho Medicaid as a non-billing provider but continue to see Medicaid patients?**

Failure to enroll as a non-billing ordering and/or referring provider will result in the patient's claim for the specialized care or ordered services/items being denied payment by Idaho Medicaid.

### **What if I want to enroll with Idaho Medicaid as a billing provider after I enrolled as a non-billing provider?**

If a provider has enrolled using this streamline enrollment process for the sole purpose of ordering or referring services to Medicaid participants and later wishes to become a billing provider, call Idaho Medicaid Provider Enrollment toll free at 1 (866) 686-4272 or local 1 (208) 373-1424.

### **I am enrolled as a Group with Idaho Medicaid. Can I add a non-billing ordering or referring provider to my group?**

No, non-billing ordering or referring providers must be enrolled as individual providers only

[Idaho Medicaid Rules](http://adminrules.idaho.gov/rules/current/16/0309.pdf) (<http://adminrules.idaho.gov/rules/current/16/0309.pdf>)

IDAPA 16.03.09.210.06

**06. Ordering, Prescribing, and Referring Providers.** Any service or supply ordered, prescribed, or referred by a physician or other professional who is not an enrolled Medicaid provider will not be reimbursed by the Department.

[Idaho Medicaid Provider Handbooks](http://www.idmedicaid.com) ([www.idmedicaid.com](http://www.idmedicaid.com))

## **General Provider and Participant Information; Section 2.2.3.1**

### **2.2.3. Provider Enrollment**

Idaho Medicaid enrolls two types of providers, billing and non-billing.

#### **2.2.3.1. Non-billing Ordering and Referring Providers**

Providers who enroll as non-billing entities are enrolling for the sole purpose of ordering services/items for use by Medicaid participants or referring participants to another provider. Federal Regulations (42 CFR 455.410) require the enrollment of all non-billing physicians and practitioners. The regulation also requires the inclusion of the ordering/referring provider on the billing provider's claim for reimbursement.

Medicaid has established a streamlined process to enroll non-billing individuals whose only relationship with the Idaho Medicaid program is to refer for specialized care or order items or services. This enrollment method *is not* for individuals who want to submit claims to Idaho Medicaid for reimbursement for their services. For more information refer to this document.

[Medicaid Provider Bulletin](http://www.idmedicaid.com) (www.idmedicaid.com)

March 2016 edition

February 2016 edition

August 2014 edition

March 2016

### **Provider Revalidation, Screening, and Enrollment News!**

**What is it?** Provider Revalidation is a federally required re-enrollment process to ensure that the provider's record with Medicaid is fully accurate and complete. All providers who are enrolled with Medicaid are required to revalidate their record at least every 5 years. Please refer to the Information Release section of www.idmedicaid.com.

**What's Next?** We will be launching a new web page for Provider Revalidation in April. This page will include a Frequently Asked Questions (FAQ) document and revalidation timeline information as well as information for specific provider types.

**What do I need to do today?** In preparation for the coming revalidation we are asking providers to review their current enrollment. Please verify that we have your most recent Medicare Certification on file. If you have a newer certificate than what is on your record, please submit the newer certificate using the provider maintenance link found at www.idmedicaid.com under Provider Enrollment. Having this updated information will enable Medicaid to effectively schedule the Provider Revalidation.

#### **Providers that must be identified on a claim:**

Medicaid will now require that all claims list the name and the National Provider Identifier (NPI) of the health care professional rendering services and of the provider that ordered, referred or prescribed (ORP) the items or services. This information is required due to changes in federal law. If the rendering or ORP provider's information is not listed on a claim, or if the ORP provider is not enrolled with Idaho Medicaid, the billing Medicaid provider will not receive reimbursement for their services.

This means that some health care professionals that are not currently enrolled with Idaho Medicaid will need to submit an application. If the NPI of the physician or health care professional that ordered, prescribed, or referred the client for the service is not included on the claim, Medicaid reimbursement will not be allowed.

At this time Idaho Medicaid will enforce ORP requirements on claims submitted by the following provider types:

- Hospitals (inpatient and outpatient)
- Outpatient Health Facilities
- Private Duty Nurses
- Hospice
- Home Health Agencies
- Pharmacies

- Home and Community-Based Assistive Living - Durable Medical Equipment Suppliers
- Imaging\Testing Facilities
- Independent Laboratories
- Portable X-Ray Suppliers
- Nursing Facilities
- Therapy Providers

The Department created an abbreviated screening and application process for providers who do not wish to bill the Department but who wish to enroll as ordering, referring, certifying, or prescribing providers-only. As recommended in previous guidance by IDHW, providers billing Medicaid should be prepared to ensure all referring, ordering, and prescribing physicians and other health care professionals have NPIs and are enrolled in the Medicaid program.

IDHW will not implement ORP requirements for automatic Medicare crossovers. Medicare crossovers submitted directly to IDHW by the provider will be subject to ORP requirements

February 2016

**Attention All Providers: Ordering/Referring Requirements**

Billing providers are required to include the NPI of any prescribing, ordering, referring or recommending provider as detailed in Federal Regulations (42 CFR 455.410). Additionally, each of the prescribing, ordering, referring or recommending providers must be enrolled with Idaho Medicaid.

Idaho Medicaid may not pay claims, or may later recoup claims if the service or product has been requested by a provider who is not enrolled with Idaho Medicaid. It is the responsibility of the provider submitting the claim, the billing provider, to ensure the NPI of any prescribing, ordering, referring or recommending provider is on the claim.

For providers, whose only relationship with the Idaho Medicaid Program is to prescribe, recommend, order or refer for items/services, a streamlined process to enroll with Idaho Medicaid has been established. This enrollment method *is not* for individuals who intend to submit claims to Idaho Medicaid for reimbursement. More information about “Non-Billing Ordering and/or Referring Physicians and Practitioners” can be found at [www.idmedicaid.com](http://www.idmedicaid.com) under “Hot Topics”.

August 2014

**Enrollment for Non-Billing Ordering and/or Referring Physicians and Practitioners Implemented**

Federal Regulations (42 CFR 455.410) require the enrollment of all non-billing physicians and practitioners. The first phase of implementing these changes is the enrollment phase. The regulation also requires the inclusion of the ordering/referring provider on the billing provider’s claims for reimbursement. This second phase of the regulations will be required soon. Please watch for more communications about the claim payment implementation.

Medicaid has established a streamlined process to enroll non-billing individuals whose only relationship with the Idaho Medicaid program is to refer for specialized care or order items or services. This enrollment method is not for providers who want to submit claims to Idaho Medicaid for reimbursement for their services.

This enrollment is for individuals only, not facility or group providers.

To obtain a streamline, non-billing provider enrollment form, call Idaho Medicaid Provider Enrollment toll free at 1 (866) 686-4272 or local at 1 (208) 373-1424.

Some frequently asked questions about non-billing ordering and referring providers:

**Who is a non-billing ordering and referring physician or practitioner?**

Any physician or other professional practitioner with the licensure authority to order items and services for Idaho Medicaid patients or refer patients for specialized care but who choose not to enroll with Idaho Medicaid for the purposes of receiving payment for those services.

**I'm enrolled as a billing provider with Idaho Medicaid. What will happen if I don't include the ordering/referring provider on my claims?**

Once this phase of the requirement has implemented, this will result in a denial of payment for any claim that includes services or items that requires the ordering/referring provider information.

**What if I chose not to enroll with Idaho Medicaid as a non-billing provider but continue to see Medicaid patients?**

Failure to enroll as a non-billing ordering and/or referring provider will result in the patient's claim for the specialized care or ordered services/items being denied payment by Idaho Medicaid.

**What if I want to enroll with Idaho Medicaid as a billing provider after I enrolled as a non-billing provider?**

If a provider has enrolled using this streamline enrollment process for the sole purpose of ordering or referring services to Medicaid participants, and later wishes to become a billing provider, they can call Idaho Medicaid Provider Enrollment toll free at 1 (866) 686-4272 or local 1 (208) 373-1424.

**I am enrolled as a Group with Idaho Medicaid. Can I add a non-billing ordering or referring provider to my group?**

No, these individuals would be enrolled as a rendering provider to your group.

**[Medicaid Provider Enrollment Compendium \(MPEC\)](#)**

**B. Ordering, Referring, or Prescribing Physician or Other Professional (ORP)**

Federal regulations at §§455.410(b) and 455.440 implement the statutory provisions relating to ordering, referring, or prescribing professionals at § 1902(kk)(7)(A) and (B) of the Act. Under 455.410(b), the SMA must require all ordering or referring physicians or other professionals providing services under the State plan or under a waiver of the plan to be enrolled as participating providers. Under § 455.440, the SMA must require all claims for payment for items and services that were ordered or referred to contain the National Provider Identifier (NPI) of the physician or other professional who ordered or referred such items or services.

We interpret the statutory terms "ordering" and "referring" to include prescribing (either drugs or other covered items) or sending a beneficiary's specimens to a laboratory for testing or referring a beneficiary to another provider or facility for covered services.

Examples of "ordering or referring" include;

- Prescribing (either drugs or other covered items) for a beneficiary
- Sending a beneficiary's specimens to a laboratory for testing
- Ordering imaging services for a beneficiary
- Ordering durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) for a beneficiary
- Referring a beneficiary to another provider or facility for covered services
- Determining or certifying a beneficiary's need for a covered item or service (e.g., outpatient drug counseling or home health services or nursing facility services) where the determination or certification by a physician or other professional that a beneficiary needs or qualifies for receipt of an item or service is required for payment of the claim

With respect to the disclosure and screening requirements at Subparts B and E, ORP providers are not exempt. When enrolling ORPs, a State Medicaid Plan has the discretion to enroll ORPs as a specific provider type for purposes such as, but not limited to, payment, tracking, or reporting.