

Nurse-Family Partnership MA FFS Billing Guidance Pennsylvania Medical Assistance Program

PURPOSE

The purpose of this billing guide is to provide guidance on Medical Assistance (MA) Fee For Service (FFS) Billing for our OCDEL funded Nurse-Family Partnership (NFP) providers.

PROVIDER INFORMATION

NFP PROVIDER PARTICIPATION REQUIREMENT

NFP Program entities must meet requirements set forth in 55 Pa. Code § 1101.42 (Prerequisites for participation) and 55 Pa. Code §1101.51 (Ongoing responsibilities of providers) which includes the following: recipient freedom of choice, interrelationship of providers, and medical record keeping standards and requirements.

PROMISe™ PROVIDER ENROLLMENT & REVALIDATION

Providers may enroll in MA using the following website: <https://provider.enrollment.dpw.state.pa.us>

A National Provider Identifier (NPI) is a required element to the enrollment process.

- To obtain a National Provider Identifier (NPI) number use the following website: <https://nppes.cms.hhs.gov/NPPES>

The following table identifies the PROMISe™ Provider Type and Specialties of NFP Program entities, i.e., OCDEL grantees, enrolled in the MA Program:

PROMISe™ Provider Type	PROMISe™ Provider Specialty
16 - Registered Nurse (RN) Group	163 - NFP Program
16 - Registered Nurse (RN)	163 - NFP Program

When completing the PROMISe™ application NFP providers should select:

- Provider Enrollment Program as Fee for Service (FFS)
- Special Indicator as NFP

All providers must revalidate the Medical Assistance (MA) enrollment of each service location every 5 years as described in Medical Assistance Bulletin 99-16-10. Providers should log into PROMISe™ to check the revalidation dates of each service location and submit revalidation applications at least 60 days prior to the enrollment revalidation dates. Enrollment (revalidation) applications may be found at: [PROMISe Enrollment \(pa.gov\)](https://www.pa.gov/PROMISe-Enrollment)

PROVIDER SCREENING

Per Medical Assistance Bulletin 99-11-05; all employees who are generating a claim to bill for services or are paid by Medical Assistance should be screened for exclusion before employing and/or contracting with them and monthly after initial check.

- Develop policies and procedures for screening of all employees
- Develop and maintain documentation of screening efforts
- Use the following databases to determine exclusion status:
 - <https://www.dhs.pa.gov/about/Fraud-And-Abuse/Pages/Medicheck-List.aspx>
 - <http://oig.hhs.gov/fraud/exclusions.asp>
 - <https://www.sam.gov/SAM/pages/public/searchRecords/advancedPIRSearch.jsf>

Nurse-Family Partnership MA FFS Billing Guidance Pennsylvania Medical Assistance Program

PARTICIPANT INFORMATION

NFP/MA PARTICIPANT REQUIREMENTS

- The infant must be Medical Assistance eligible. When the birthing parent is enrolled in the MA Program, the infant is automatically enrolled at the time of birth in the MA Program for a minimum of one year.
 - Verify MA coverage by requesting copy of the child’s insurance card or searching the PROMISE™ system to check for coverage under the EVV Eligibility Verification Screen on the Home Screen.
- NFP services must be prescribed/ordered by a primary care practitioner or pediatrician per regulation 42 CFR § 455.410. Guidance for both the ordering provider and billing can be found in the Medical Assistance Bulletins 99-1607 and 99-17-02 respectively.

SERVICE AND BILLING INFORMATION

MINIMUM SERVICE REQUIREMENTS

- The visit is eligible for Medical Assistance reimbursement if the duration is 15 minutes or greater. The service may be delivered in-person or virtually (telemedicine). Medical Assistance Bulletin 99-22-02 describes the minimum requirements for a service that is delivered via telemedicine.
- **Texting, Document Drop Off, Emails do not constitute a valid visit for MA billing purposes.**
- The child must be present for the duration of the visit
- In the event of multiple children being served; a claim can be filed for each eligible child
- Visits that do not occur due to unavailability or cancellation cannot be billed

BILLING TIPS

- Submit claims **ONLY** using the child’s recipient identification (RID) number, not the birthing parent’s RID
- The provider has 180 days from the date of service to submit claims to the MA Program for payment
- For a denied claim the provider has up to 365 days from the date of service to resubmit. The original claim number must be referenced in the updated submission.
- Payment for the Medical Assistance claims will be issued directly to the enrolled billing provider through the Pennsylvania Treasury Department

PROMISE™ TRAINING

For training on PROMISE™ contact the Promise Provider Training by email using: promiseprovidertraining@dxc.com. Please provide the 13-digit Medical Assistance ID #, name of the provider organization and a contact name and phone # when requesting a training.

OCDEL FUNDING AND FEE SCHEDULE

MA BILLABLE SERVICES

Services provided are MA Billable when a child receiving Nurse-Family Partnership is funded using the following State funding options provided through OCDEL grants:

- Family Support Funding - State (FS)
- Children’s Trust Fund (CTF)
- Family Center Funding - State (FC)
- All future state funded grants

NON-MA BILLABLE SERVICES

Services provided are **NOT** MA Billable when a child receiving Nurse-Family Partnership is funded using the following Federal funding Options provided through OCDEL grants:

**Nurse-Family Partnership MA FFS Billing Guidance
Pennsylvania Medical Assistance Program**

- Maternal, Infant, and Early Childhood Home Visiting (MIECHV)
- Promoting Safe and Stable Families (PSSF)
- Community Based Child Abuse Prevention (CBCAP)
- American Rescue Plan Funding (labeled as: PSSF-ARP, CBCAP-ARP, MIECHV-ARP)
- All future federal funded grants

PROCEDURE CODE TABLE

Service Definition	Procedure Code	Modifier 1	Modifier 2	Place of Service*	Diagnosis Code	Min/Max Units	MA Fee	Limits
RN Services	T1002	U9	SK	10 – Telehealth/Tele-intervention 11 – Office 12 – Home 99 – Community	Z76.2	1	\$ 77/unit	One per day

*Effective as of July 1st, 2023, the Place of Service location of 02 is no longer to be utilized. The Telehealth/Tele-intervention place of Service will be now 10.

RESOURCE LINKS

Information regarding regulation references can be found within the Pennsylvania Code weblink found here: [55 Pa. Code Chapter 1101. General Provisions \(pacodeandbulletin.gov\)](https://www.pacodeandbulletin.gov)

Information regarding Medical Assistance Bulletin references can be found here: [Bulletin Search \(pa.gov\)](https://www.pa.gov)

GENERAL QUESTIONS

All MA Billing questions can be directed to the RA Account at RA-PWPAHOMEVISITING@pa.gov.