Notice Archive

April 3, 2017

Attention: **Incontinence Supply Management Program**

The reimbursement rate changes for Incontinence Supply Management Program products scheduled to take effect April 3, 2017, have been postponed until **May 17, 2017**. For questions about the Incontinence Supply Management Program, contact the Bureau of Medical Review at 1-800-342-3005 or by email at OHIPMEDPA@health.ny.gov.

December 28, 2016

Attention: **NEW Provider Communication added for DME providers**

E0627 and E0629 Seat Lift Mechanisms Update

December 9, 2016

Attention: **NEW YORK CITY MEDICAID TRANSPORTATION PROGRAM METROCARD DISBURSEMENT LOG**

Facility Metrocard Reimbursement Log

November 11, 2016

eMedNY Website Survey - The NYS Department of Health seeks provider input for the emedny.org website. Please follow the link below to take a very short survey about the site. https://www.surveymonkey.com/r/emednyw

November 11, 2016

Attention: **NEW Provider Communications added for DME, Managed Care and Pharmacy providers**

Incontinence Supply Management Program Update

November 2, 2016

Attention: **NEW Provider Communications added for Dental providers**

ATTENTION DENTAL PROVIDERS: CDT Code Policy Changes

October 25, 2016

Attention: **NEW Provider Communications added for DME, Managed Care and Pharmacy providers**

[Incontinence Supply Management Program FEE SCHEDULE CHANGES](#)

September 29, 2016

Attention: **IMPORTANT REVALIDATION NOTICE**

The federal regulation 42 CFR 455.414 requires providers to revalidate their enrollment with the New York State Medicaid Program. Providers have already received individual written reminders to revalidate, although some providers have not done so. The deadline for submission of revalidation packages was September 25, 2016.

Effective for eMedNY claims processing starting October 27, 2016, all claims from non-revalidating billing providers will be pended until the provider's revalidation package is received. To avoid interruption of claims payment, providers must revalidate immediately.

[Read More](#)

September 15, 2016

Attention: **NEW Communication for DME Providers**

[E0784 External Ambulatory Infusion Pump, Insulin](#)

September 14, 2016

Attention: **UPDATED Private Duty Nursing Provider Manual**

[Prior Approval Guideline](#)

September 1, 2016

Attention: **REGULATION CHANGE for CHHAs, LTHHCPs & LHCSAs**

A recent change to New York Codes, Rules and Regulations (NYCRR), Title 10, Sections 763.7 & 766.4 now allows certified home health agencies (CHHAs), long term home health care programs (LTHHCPs), and licensed home care services agencies (LHCSAs) up to 12 months to obtain a physician's signature on orders for services, including verbal and telephone orders. The regulations can be found at: http://www.health.ny.gov/regulations/recently_adopted.

[Read More](#)

August 17, 2016

Attention: **NEW Provider Communications added for DME, Managed Care and Pharmacy providers**

[PDF] **Incontinence Supply Management Program September 1, 2016**

[IC] **Incontinence Supply Management Program**

📅**June 30, 2016**

Attention: UPDATED DME Provider Manuals:

[PDF] **DME Procedure Codes**

[PDF] **DME Policy Guidelines**

[PDF] **DME Fee Schedule**

📅**June 28, 2016**

Attention: UPDATED Hearing Aid Provider Manuals:

[PDF] **Hearing Aid Procedure Codes**

[PDF] **Hearing Aid Fee Schedule**

📅**May 25, 2016**

Attention: NEW Provider Communications added for DME and Pharmacy Providers

[PDF] **2016 Durable Medical Equipment Fee Schedule Changes**

📅**May 4, 2016**

Attention: Pulse Oximeter Coverage Criteria Update

Effective immediately, the coverage criteria for rental of an oximeter device has been expanded to the following:

E0445 #Oximeter device for measuring blood oxygen levels non-invasively

- Covered only in combination with oxygen therapy. **In the case of a pediatric patient with a univentricular heart, an oximeter device is covered without supplemental oxygen therapy.**

- Not to be billed with apnea monitors or ventilators unless treatment plan calls for weaning from these devices.
- The 30 day rate for pulse oximeters includes all supplies.

📅**April 1, 2016**

Attention: New Feature to be added to ePaces on June 1, 2016

In an effort to make user data more secure and to improve system performance, eMedNY will be installing a new feature that will impact ePACES users when signing on to the ePACES application. This new feature, commonly called CAPTCHA, is a program that can distinguish whether the user attempting to sign-on is a human or a computer.

EFFECTIVE June 1, 2016 when users attempt to sign-on to ePACES from the www.emedny.org website, the user will be asked to verify that he/she is a person and not a computer by selecting specific images.

📅 March 23, 2016

Attention: <u>PA Required for Unlisted Wheeled Mobility Parts and Accessories</u>

Please make the following changes in the Procedure Code and Fee Schedule Sections of your DME Provider Manual (Rev. 2015-2)

The following change is effective for dates of service on or after **May 1, 2016**. HCPCS code K0108, unlisted wheeled mobility parts and accessories, currently available with a DVS authorization for up to 250 units ($250), **will now require Prior Approval**.

📅 December 30, 2015

Attention: NEW Provider Communications Posted!

📄 **2016 DME Procedure Code Changes**

📄 **2016 Hearing Aid Procedure Code Changes**

📅 September 29, 2015

Attention: <u>ICD Changes Effective October 1, 2015 for Durable Medical Equipment Orthotics, Prosthetics and Medical Supplies, Hearing Aid, and Private Duty Nursing Prior Approval</u>

The Division of Operations and Systems, Bureau of Medical Review, has been preparing for the change from ICD-9 to ICD-10 diagnosis coding in all prior approval units. Please note the following changes related to the prior approval/authorization processes

📄 **Read More**

📅 September 22, 2015

Attention: NEW Provider Communications Posted!
- DME, Nurse Practitioner, Pharmacy and Physician Providers: Practitioners Ordering Incontinence Products
- DME Providers: DMEPOS Providers Manual ICD-10 Update

📅 September 18, 2015

Attention: <u>Important Behavioral Health Services Changes Effective October 1, 2015</u>

Currently, certain Behavioral Health (BH) benefits are paid Fee for Service (FFS) for managed care enrollees if they meet the condition of Medicaid categorization as SSI or SSI related or for individuals who require services that were previously carved out of Medicaid managed care (MMC). Effective October 1, 2015 Behavioral Health services will be transitioned into the benefit package for Mainstream managed care plans for adults (21 years of age and older) in New York City, requiring these (BH) provider claims be billed to the managed care plan. Commencing July 1, 2016 adults in the Rest of State will transition.

📄 **Read More**

📅 July 28, 2015

Attention: eMedNY ICD-10 TESTING OPENED JULY 28, 2014
On July 28, 2014 eMedNY opened the Provider Testing Environment (PTE) for submitters to begin

testing Medicaid claims with ICD-10 diagnosis codes. In addition inpatient hospital claims that utilize ICD-10 procedure codes may be tested beginning on this date.

July 17, 2015

Attention: FEE SCHEDULE CHANGE FOR DME

Please make the following change in your DME Fee Schedule:

Procedure Code E0621 - Sling or seat, patient lift, canvas or nylon.

Effective for dates of service on or after August 1, 2015

The MRA will be $76.59

For questions related to policy and coverage guidelines, please send an email to: OHIPMedPA@health.ny.gov or contact the Division of OHIP Operations at 1 800 342-3005, option 1.
For questions on billing, call Computer Sciences Corporation at (800) 343-9000.

June 15, 2015

Attention: The New York Medicaid Management Information System (NYMMIS) Project Website

The Department of Health and Xerox State Healthcare, LLC are working diligently on the design and development of the new Medicaid system, called NYMMIS.

NYMMIS has an interim website created as an "information billboard." It will be used as a main source for communicating information, providing updates and email bulletins regarding the implementation of the new system. In addition updates will be provided on a regular basis in an effort to share relevant NYMMIS information and its potential impact on providers' business processes. Our interim website is also hosting a ListServ signup section. Once you sign up we will be able to email you with timely and updated news on the project and how it will affect you.

Read More

May 29, 2015

Attention: 2% Across-the-Board Medicaid Payment Reductions

This notice is to advise impacted providers that effective May 8, 2015, the 2 percent Across-the-Board Medicaid payment reduction will be eliminated for claims with service dates on or after April 1, 2015. This change will be reflected in checks issued in Cycle 1969 (checks dated May 18, 2015 with a release date of June 3, 2015). The retroactive repayment of the reduction taken over the period April 1, 2014 through March 31, 2015 is still pending federal Centers for Medicare & Medicaid Services (CMS) approval.

Read More

May 5, 2015

Attention: 2015 DME fee schedule

Please note, the fee schedule of the DME Manual has been updated for June 1, 2015. Any changes reflected in the manual are effective for dates of service beginning June 1, 2015. Questions related to policy or coverage guidelines can be directed to the office of Health Insurance Program's Division of OHIP Operations at OHIPMedPA@health.ny.gov. Billing related questions can be directed to CSC at (800) 343-9000.

May 5, 2015

Attention: 2015 Pharmacy fee schedule

Please note, the fee schedule of the Pharmacy Manual has been updated for June 1, 2015. Any changes reflected in the manual are effective for dates of service beginning June 1, 2015. Questions related to

policy or coverage guidelines can be directed to the office of Health Insurance Program's Division of OHIP Operations at OHIPMedPA@health.ny.gov. Billing related questions can be directed to CSC at (800) 343-9000.

April 2, 2015

Attention: Fee Schedule Updated for April 1, 2015
The following provider manuals and fee schedules have been updated for April 1, 2015: Clinical Psychology, Clinical Social Worker, Laboratory, Midwife, Nurse Practitioner, Pharmacy, Podiatry, Rehabilitation Services, and Vision Care.

For more detailed information, Click Here

January 21, 2015

Attention: New Medicaid FFS Pharmacy Early Fill Edit
Effective January 22, 2015, per the 2014-15 enacted budget, a new pharmacy early fill edit will be implemented that will tighten early fill parameters based on days' supply on hand in an effort to further reduce overutilization, stockpiling and/or diversion of drugs.
For more detailed information, Click Here

January 15, 2015

Attention: Your Medicaid Enrollment – Clinics, Clinical Social Workers (CSW)
Federal regulation 42 CFR, Part 455.414 requires New York State Medicaid to revalidate your enrollment every five years. Revalidation involves completion of the enrollment form and submission of all required documents. *Clinics include: Ambulatory Surgery Centers, Diagnostic and Treatment Centers, Hemodialysis Centers.* Read More

January 9, 2015

Attention: Upcoming Changes to the ePACES Application Impacts To DVS Transactions and Dental Prior Approvals
The Department of Health is pleased to announce some enhancements being made to ePACES beginning on January 23, 2015. The enhancements are being made in response to a request made by some of our provider community to allow more efficiency when entering multiple Dispensing Validation System (DVS) requests for the same client.
Read More

December 1, 2014

Attention: Topical Oxygen Wound Therapy (TOWT) Continues to be Covered Until Further Notice
Providers, Medicaid beneficiaries and Medicaid Managed Care Organizations (MMCOs) were notified in the October 2014 *Medicaid Update* that New York State Medicaid fee-for-service and Medicaid Managed Care were eliminating coverage of topical oxygen wound therapy (TOWT) effective December 1, 2014 and January 1, 2015, respectively.
Read More

November 24, 2014

Attention: [Guidance for Pharmacies Assisting Medicaid Members During the *State Disaster Emergency* Declared November 18, 2014 in Cattaraugus, Chautauqua, Erie, Franklin, Genesee, Herkimer, Jefferson, Lewis, Oswego, Wyoming and contiguous counties](#)

The New York State Department of Health has released Information applicable to providers servicing beneficiaries in need of emergency fills of prescriptions or fiscal orders (including prescription and over the counter drugs and medical supplies) when a State disaster emergency has been determined by State or Local officials. *This guidance will only be in effect until the State disaster emergency has ended.*
[Click here](#) to view the Pharmacy Communication.

October 17, 2014

Attention: [Provider Training Seminars and Webinars Available](#)

Training seminars on a variety of Medicaid billing topics are being held at numerous locations.**Seminars are a valuable opportunity to meet personally with CSC Regional Representatives in your area.**

CSC also offers **webinars,** a convenient training alternative that allows providers to attend training using their own computers and telephone.
[Read More](#)

August 29, 2014

Attention: New Psychiatrist Fees

Please check the [Physician Medicine Services Fee Schedule](#) for a list of new psychiatrist Medicaid fees. The Schedule is located in the [Physician Provider Manual](#) section of the emedny.org website.

August 26, 2014

Attention: [Final e-Prescriber Payments to be Issued By eMedNY](#)
The NYS 2014-15 Budget repealed the authorization for payment of an incentive to eligible pharmacies and medical practitioners for approved ambulatory Medicaid eprescriptions effective April 1, 2014 (Section 6 of Part C of Chapter 60 of the Laws of 2014).

Previous incentive payments were sent to providers covering e-scripts through 4th Quarter of Calendar Year 2013.
[Click Here to Read More](#)

August 6, 2014

Attention: *NEW* EEKB Search Tool and Crosswalks Tool
A brand new EEKB Search Tool and Crosswalks Application Tool on eMedNY HIPAA Support was launched on July 30th with new user-friendly features to enhance user experience, replacing the PDF files for both the Edit/Error Knowledge Base (EEKB) and the 835 and 277 Crosswalks.

Providers and other Trading Partners can now use the **EEKB Search Tool** to display detailed explanations about specific edits by searching by edit number, Remit and Claim codes or by the Edit's title text. The results are displayed in collapsible boxes with the ability to print. Click Here to view the new EEKB Search Tool.

The eMedNY Edit **Crosswalk Tool** can be used by Providers and other Trading Partners to crosswalk Claim Adjustment Reason Codes (CARC) or Healthcare Claim Status Codes (HCSC) to eMedNY proprietary edits. The codes received on the Remittance Advice (835) or Claim Status Response (277) transaction sets can be analyzed by the tool to obtain the eMedNY proprietary edit and code descriptions. The results are displayed in a sortable table with the ability to export to an excel spreadsheet. Click Here to view the new Crosswalks Tool.

For additional questions, please email us at eMedNYHIPAASupport@CSC.com.

📅July 28, 2014
Attention: eMedNY ICD-10 Testing Opened July 28, 2014
On July 28, 2014 eMedNY opened the Provider Testing Environment (PTE) for submitters to begin testing Medicaid claims with ICD-10 diagnosis codes. In addition inpatient hospital claims that utilize ICD-10 procedure codes may be tested beginning on this date.

Date of Service Requirement
When submitting test claims with ICD-10 codes submitters must use a date of service of July 1, 2014 or any date of service up to the date of the test submission. Future dates are not allowed. Submitters who may be testing claims with ICD-9 codes must use a date of service prior to July 1, 2014.

📄 READ MORE

📅May 23, 2014
Attention: 2% Across-the-Board Medicaid Payment Reductions
This notice is to advise impacted providers that effective May 22, 2014, the 2 percent Across-the-Board Medicaid payment reduction will be reactivated pending federal Centers for Medicare & Medicaid Services (CMS) approval for removal. The payment reduction will be applied prospectively beginning in Cycle 1919. If you have any questions regarding this notice please contact Mark Shutts at (518) 474-1673.

📅April 4, 2014
Attention: Federal Government Delays ICD-10 Implementation
The ICD-10 code set implementation date has been moved from October 1, 2014 to no earlier than October 1, 2015. The delay was part of the Protecting Access to Medicare Act of 2014 recently passed by Congress and signed into law by President Obama on April 1, 2014. New York Medicaid will adhere to the new federal compliance timeframe for ICD-10 implementation and eMedNY **will not** accept ICD-10 codes until October 1, 2015 at the earliest.

📅March 21, 2014
Attention: Medicaid Required by Federal Law to Change Electronic Remittance Delivery Date

Effective **April 7, 2014** *(Cycle 1911)* eMedNY will no longer be permitted to make the X12 835 and the X12 820 electronic remittances available two weeks prior to release of payment. Electronic remittances will be available <u>two days</u> prior to the release of funds. The change is necessitated by requirements of Section 1104 of the Affordable Care Act (ACA) and the CAQH Committee on Operating Rules for Information Exchange (CORE), the authoring entity for operating rules for Electronic Fund Transfer (EFT) and Electronic Remittance Advice (ERA) transactions. CORE Rule 370 requires that transmission of the 835 cannot occur more than three days prior to the availability of the EFT.

January 30, 2014
Attention: [Important Notice to Pharmacy Providers Regarding Prescriptions Written by Ordering/Prescribing/Referring/Attending (OPRA) Providers](#)
Effective **February 3, 2014** the Department will discontinue payment for all prescriptions for Medicaid fee-for-service members ordered by a provider not yet enrolled as an OPRA provider. If you have such a prescription you will receive a reject code of **"56" via NCPDP transaction** stating the provider has a non-matched Prescriber ID listed in NCPDP field number 511-FB.
[Click Here to Read More](#)

January 17, 2014
Attention: [Important Information for State and County eMedNY System Users about NYSoH Clients](#)

January 15, 2014
Attention: CMS ICD-10 Provider Readiness Assessment for Physicians
CMS has asked Medicaid programs to transmit an ICD-10 Provider Readiness Assessment to their physician providers. Your responses to the Assessment will allow CMS to better understand and measure the current state of readiness among the physician provider community nationally, which will enable CMS to identify the priority areas on which to focus future ICD-10 education and training resources. You are encouraged to respond to the Assessment at https://www.surveymonkey.com/s/ICD-10_Provider_Readiness_CMS. The questions should take no more than 10 minutes to complete and all responses will remain anonymous. Please take the time now to complete this assessment. Thank you in advance for your response.

December 24, 2013
Attention: [Ordering/Referring Enrollment and Claims Editing Implementation in Fee-For-Service (FFS) Medicaid](#)
Effective January 1, 2014, FFS Medicaid will implement new FFS claims editing requiring Medicaid FFS enrollment for ordering/prescribing/referring/attending (OPRA) physicians and other healthcare professionals. If the ordering professional is not enrolled, under federal law Medicaid must deny the claim for the ordered service.
[Click here](#) for details.

December 18, 2013

Attention: Medicaid Payment Schedule for the Upcoming Holidays

Provider payments (EFTs and checks) will be released one day later than the usual Wednesday release due to the upcoming Christmas and New Year's Day Holidays. Payment release for these weeks will be as follows:

* Payments issued on Monday **12/9/2013** (Cycle 1894) will be released on Thursday, **12/26/2013** *and*
* Payments issued on **12/16/2013** (Cycle 1895) will be released on Thursday,**1/2/2014**

December 18, 2013

Attention: ePaces Login Issue with Captcha

When users attempt to sign onto ePACES, he/she will be asked to enter an alpha-numeric number displayed on the sign on screen in order to gain access to the ePACES account.

If you are unable to view the Captcha tool or if you are requested to add a trusted internet site, follow the steps outlined here.

December 17, 2013

Attention: Effective December 18, 2013 a New Security Feature Will Be Added to the ePACES Sign-on Screen

In an effort to make data more secure eMedNY will be installing a new feature that will impact ePACES users when attempting to sign on to the ePACES application from the eMedNY website. This new feature is a program that can tell whether the user who is attempting to sign-on is a human or a computer. Read More

October 25, 2013

Attention: NY Medicaid Guidance for Enrolled Practitioners Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA) or PDF Remittance Advice

As previously announced the NYS Department of Health now requires all billing providers to sign up for EFT and either ERA or PDF remittances. Existing enrolled providers have begun receiving notices with their yearly Certification Statement, indicating (based on their existing enrollment information) whether they need to complete and submit the EFT and/or ERA/PDF forms in addition to submitting the signed and notarized Certification Statement. The forms will be included with the Certification Statement and preprinted with the provider information.

October 16, 2013

Attention: ICD10 Information Has Been Added To This Website

New York State Medicaid and its fiscal agent Computer Sciences Corporation (CSC) are working aggressively to ensure the coding and programming changes required by the transition to ICD-10 are completed well in advance of the October 1, 2014 compliance date. Click here for information that may be useful to providers and vendors.

September 30, 2013
Attention: **Ordering/Referring Editing Implementation**

The **October 1, 2013** implementation of new claims editing requiring Medicaid enrollment for ordering/prescribing/referring/attending (OPRA) physicians and healthcare professionals has been *delayed until January 1, 2014.*

The extended implementation will allow for more time for OPRA providers to request and obtain enrollment. Providers who have submitted enrollment applications will be notified by letter when a determination has been made or if the application was missing information. Providers who have not yet submitted enrollment applications must do so immediately to avoid future interruption of the services they order for their patients.

Click Here to Download the full article

September 8, 2013
Important
eMedNY system upgrade planned for this coming Sunday 9/15/2013
On Saturday September 14 at midnight until September 15th 2:00 AM EST. eMedNY will be performing a system upgrade on its firewall from midnight to 2:00 AM EST. During this window, providers may experience a brief interruption in service. In order to address any questions or issues from providers during this time, the eMedNY call center will be open to support the provider community with any potential issues. If you have any questions related to this change, please contact the eMedNY call center at **800-343-9000.** *Thank you.*

August 1, 2013
Attention: **New Requirements for All Billing Providers to Begin on August 22, 2013**
IMPORTANT: Billing Providers are urged to read the following notice. Failure to follow the new requirements outlined below will result in claim rejection and jeopardize payments. As previously announced the NYS Department of Health will soon require all billing providers to sign up for EFT payments and either ERA or PDF remittances.

Existing Enrolled Providers
Beginning on August 22, 2013, and for the following 12 months, as your Electronic Transmitter Identification Number (ETIN) approaches its yearly expiration date, providers will be sent notifications instructing them to complete either or both of the application forms (EFT and ERA or PDF). If you are already signed up for both EFT and ERA or PDF remittances, you need only return the signed/notarized certification form ... **more**

May 20, 2013

Attention: **Primary Care Rate Increase Attestation Now Available**
Under the Affordable Care Act, Medicaid managed care and fee for service primary care practitioners may qualify for increased reimbursement at the rate that would be paid for primary care services under Medicare. To determine if you qualify for the program, review the FAQ document. If you qualify,

complete and return the attestation form by August 1, 2013 to be eligible for the increased reimbursement effective for dates of service on and after January 1. 2013. Payments will begin upon federal approval.

For specific questions, please review the FAQ document. Additional questions can be forwarded to: pcri@health.state.ny.us.

Providers can sign up to receive ongoing updates on the PCRI program at: PCRI-L@listserv.health.state.ny.us and through the eMedNY listerv at https://www.emedny.org/Listserv/eMedNY_Email_Alert_System.aspx.

May 8, 2013
Attention: **Medicaid to Implement Changes for Hospitals and Nursing Home Claims Processing**
As previously announced in the April 2013 Medicaid Update:
Effective June 21, 2013, Medicaid will implement new claims editing to ensure patient responsibility amounts are deducted from the appropriate inpatient hospital or nursing home claim, and that claims for nursing home services (excluding leave of absence stays) are not reimbursed when the Medicaid beneficiary is in an inpatient hospital setting.

Details can be found here:
http://www.health.ny.gov/health_care/medicaid/program/update/2013/2013-04.htm.

May 8, 2013
 Attention: Medicaid to Implement Changes to Eligibility Inquiry/Response Transactions (ASC X12 270/271)
As previously announced in the April 2013 Medicaid Update:
Effective July 2011, the Department of Health and Human Services (DHHS) published an Interim Final Rule to adopt the Operating Rules for Eligibility for Health Plan transactions. eMedNY plans to implement system enhancements related to the federal mandate to the Eligibility Transaction Inquiry/Response on June 21, 2013. The eligibility transaction changes will also affect users of ePACES. Updated ePACES Quick Reference Guides that reflect the changes for both eligibility inquiry and response will be available on the eMedNY website.

Providers will be seeing some new eligibility responses related to coverage codes, and copay amounts. In addition future date eligibility request for the current month will be allowed. Please see the details of the changes in the April Medicaid Update located here:
http://www.health.ny.gov/health_care/medicaid/program/update/2013/2013-04.htm.

May 7, 2013
Attention All Providers: **The Provider Training section of the website has been updated!**
Please visit the new page to view upcoming training sessions on a variety of Medicaid billing topics. CSC offers webinars, a convenient training alternative that allows providers and billing staff to attend

training using their computer and telephone without leaving the office. Registrations are currently being accepted. Click here to go to the Provider Training section of the website.

April 1, 2013

Attention: Ordering/Prescribing/Referring/Attending (OPRA)

For dates of service beginning October 1, 2013 claims which include an NPI of a non-enrolled orderer, referrer or prescriber will be denied. Servicing and billing providers may refer here. Practitioners seeking to enroll as OPRA can complete the streamlined OPRA application found within the provider links found here. For more information also refer to the March and July 2013 Medicaid Updates.

February 1, 2013

Important: Provider Satisfaction Survey

Survey Ended: 2/28/2013 -- Thank You for all whom participated

The New York State Department of Health asks for all providers to take a few minutes and complete a short survey related to this website, our ePACES application and the effectiveness of communications from NYSDOH and CSC to our Provider community. You satisfaction is one of our primary goals and your feedback invaluable.

January 22, 2013

Important: To view Frequently Asked Questions about delayed claim submission reasons click here.

December 31, 2012

Updated Dental Provider Manuals:
- **Dental Policy and Procedure Manual**
- **Dental Fee Schedule**

For more information about the revisions, please see the Dental Provider Communications section.

December 18, 2012

REMINDER: Medicaid to require Electronic Funds Transfer (EFT) for provider payments and Electronic Remittance Advice (ERA) or PDF version of paper remittances.

Click here to Go Green!

October 30, 2012

Attention: In light of the storm, Fee for Service Medicaid will allow early fills for patients that have lost medications as a result of Hurricane Sandy. **Click here** for more info.

October 29, 2012

ALERT: Because of Hurricane Sandy, Fee for Service Medicaid is implementing the following processes until the State of Emergency has ended. **Click here** for more info.

October 19, 2012

Attention: Chemung County will be implementing a mandatory Managed Care program for Medicaid patients in November, 2012. You are invited to attend an informational meeting to learn how this will affect you. Click here for more info.

September 6, 2012
Attention: Effective today Medicaid enrolled prescribers can initiate prior authorization (PA) requests using a web-based application maintained by Health Information Design (HID). * This PA request/response application is accessible through a new button "PAXpress" located on the eMedNY.org homepage under the MEIPASS button.

September 4, 2012
Attention: Changes in Fee for Service (FFS) Dental Place of Service (POS) Payment Methodology and Prior Approval (PA)

August 10, 2012
Attention: Effective August 10, 2012 Provider Enrollment forms have been replaced with new forms. In addition the Provider Enrollment pages have changed to make it easier for providers to access the appropriate forms and instructions. They can be accessed by **clicking here**. Please note that the old forms will only be accepted through Friday August 17, 2012. Questions can be directed to the eMedNY Call Center at 800-343-9000.

August 3, 2012
Attention: New Electronic or PDF Remittance Request Form Introduced - Old Forms To Be Retired On 09/07/2012

July 26, 2012
Attention Pharmacy Providers: Effective September 1, 2012, reimbursement of prescription drugs for residents of the Office of Mental Health (OMH) Residential Treatment Facilities (RTF) will be covered as a Medicaid fee-for-service (FFS) benefit and billed directly to Medicaid by the dispensing pharmacy. For more information, click here.