

Medicaid Coverage for Lactation Services

Presented by:

District of Columbia Breastfeeding Coalition

Department of Health Care Finance



DC BREASTFEEDING COALITION



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Medicaid Coverage to Promote Breastfeeding

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Department of Health Care Finance
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Agenda

- Children in DC Medicaid
- Medicaid Service Delivery in DC
- State Medicaid Agency Functions
- CMS Guidance on Medicaid Breastfeeding Coverage
- April 2014 DHCF Transmittal on Medicaid Breastfeeding Coverage
- Lactation Consultants: Provider Enrollment and Provider Billing
- Implementation and Next Steps



Nearly All Children in the District Have Health Insurance and Medicaid is the Primary Insurer

- In 2019, about 2% of DC children lack health care coverage
- In FY17, almost 98% of eligible children were enrolled in Medicaid/CHIP
- ▶ CMS approval to continue Medicaid coverage for all beneficiaries through PHE

Medicaid Enrollment FY2019

- ✓ 95,000 children were enrolled in D.C. Medicaid
- ✓ Nearly 70% of the District's children are enrolled in Medicaid/CHIP
- ✓ Over 30% of D.C. Medicaid enrollees are children



Serving Children through the Health Care System in the District of Columbia

DC MEDICAID DELIVERY SYSTEM	
<p>Managed Care Program</p> <ul style="list-style-type: none">• AmeriHealth Caritas DC• CareFirst Community Health Plan• HSCSN• MedStar Family Choice <p>90% of Medicaid Children</p>	<p>Fee-for-service Program (“Straight Medicaid”)</p> <ul style="list-style-type: none">• Children with disabilities not residing in an institution• Children residing in LTC facilities• DYRS-linked children• Children under custody of CFSA (foster care/ adopted) <p>10% of Medicaid Children</p>
<p>Provider types serving children in DC:</p> <ul style="list-style-type: none">• FQHCs (e.g. Unity, Mary’s Center, Community of Hope)• Facility-based (e.g. Children’s National, Howard University, Georgetown)<ul style="list-style-type: none">• Provider practice groups	



EPSDT

Medicaid Benefit for Children



Access

- State duty to inform families of benefit and services their children are entitled to and provide assistance so that children can receive the services they need



Screenings and Education

- Assessments (and documentation) of physical, developmental and behavioral health in pediatric primary care visits
- Health education and counseling to parents



Diagnosis and Treatment

- When screenings/visits uncover health concerns, EPSDT requires coverage of services needed to diagnose and treat the concerns
- Medically necessary services must be covered as long as they fall in the federal categories of Medicaid services, and regardless of whether they are in the individual State's Medicaid Plan



Medicaid Agency “Functions”

- Health Policy (State Plan Amendments, Regulations, Eligibility, Data)
- HCDMA (Program Management of Medicaid Benefits)
 - Service Delivery: Managed Care and Fee-for-Service Divisions
 - Quality & Health Outcomes for all Medicaid Services
 - Children’s Health Services
- Long-Term Care (EPD and ID/DD waivers)
- Operations (**Provider Enrollment and Billing**, Claims Processing)
- ORRFA (Rates and Reimbursement)
- Health Reform and Innovation (ACA Implementation, Health Homes, Payment Innovations, HIT/HIE)



DC Medicaid: Coverage of Lactation Services

- Transmittal No. 14-21: Policy Regarding Medicaid Coverage to Promote Breast Feeding
- Purpose of policy is to clarify what lactation services are covered and how to bill for these services under the District's Medicaid Program:
 - **Breast Pumps & Lactation Supplies**—covered for mothers of infants 0 through 11 months as 'durable medical equipment' when considered medically necessary.
 - **Lactation Consultation, Education and Support**—covered as 'pregnancy related services' (and through post-partum period) and through currently-enrolled Medicaid providers
 - **Donated Human Milk**—covered for Medicaid eligible infants age 0 through 11 months. Donor Human Milk Request Form developed, and development of DHCF regulations underway



Provider Enrollment

APPLICATION PROCESS ONLINE ONLY

The requirements and procedures to become a provider are at www.dcpdms.com (From the website, *the provider needs to create an account and begin the enrollment process by selecting the appropriate application type*)

- Standard Application
- Lactation Consultant (Provider Type)
- Individual/Solo or Group

DCHF anticipates processing applications within (30) business days of the receipt of a complete application package.



Provider Enrollment

1. A **National Provider Identifier** or **NPI** is a unique 10-digit identification number issued to health care providers in the United States by the Centers for Medicare and Medicaid Services (CMS). All claims for payment for items and services that were ordered or referred must contain the NPI number of the physician or other professional who ordered or referred such items or services.
2. Demonstrate **current international board certification** by the International Board of Lactation Consultant Examiners (**IBLCE**) to deliver lactation consultation, education, and support to breastfeeding mothers.



Billing & Reimbursement

Effective January 2019, Lactation consultation services offered by lactation consultants shall be billed under HCPCS code S9443 at a rate of \$15.63 per unit (15 minutes) up to 4 units per newborn.

Procedure Code S9443 Description

Proc Code	Description	Prior Authorization Needed	Unit Price	Max Unit
S9443	Lactation classes, non-physician provider	No	\$15.63	4

The DC Medicaid Fee Schedule is located on the DHCF website at:

<https://www.dc-medicaid.com/dcwebportal/nonsecure/feeScheduleDownload>.



How To Submit for Reimbursement

- If you have access to WINASAP 501 software, you can submit claims using WINASAP 501 software directly to our fiscal agent Conduent; OR
- You can log on to our web portal at www.dc-medicaid.com to submit claims for reimbursement
- How long do I have to submit claims for reimbursement? Claims for covered services must be filed within 365 days from date of service
- Conduent is our fiscal agent, please reach out to them should you seek assistance with claims and reimbursement on 202.906.8319



Implementation and Next Steps

- Monitoring Enrollment of Lactation Consultants
- TBD: Enrollment with MCOs
- Monitoring claims data for breast pumps and lactation support services
- Continued Communication between Stakeholder Community, DC Health and DHCF
- Development of other resources, as needed



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DC BREASTFEEDING COALITION

Background and History



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Background

- Who does Medicaid cover in DC?
 - 2 in 9 adult DC residents are covered by Medicaid
 - 1 in 2 Children in DC are covered by Medicaid
- How many of our patients are Medicaid-eligible?
 - Medicaid covers about 73% of patients across Children's Primary Care locations



Affordable Care Act



- Passed in 2010
- Mandated that insurance cover breast pumps and lactation support services



Lactation Coverage

Uninsured

Insured



Insurance Coverage = Improved Outcomes

Current coverage for breastfeeding support under the ACA disproportionately benefits women with private insurance (Hawkins et al., 2017)

Medicaid coverage of IBCLC services could save Medicaid millions of dollars annually (Wouk et al., 2017)



Insurance Coverage of Breastfeeding Support Improves Outcomes

- Breastfeeding is an investment in health not just a lifestyle decision (www.cdc.gov/breastfeeding)
- Risk of not being breastfed is associated with increased incidence of infectious morbidity
 - otitis media; GI infections; upper and lower respiratory illnesses; NEC; diabetes; SIDS; childhood obesity



History

When did this process begin in DC? How did it begin?

- 2014: Centers for Medicare & Medicaid Services (CMS) put out a policy document, and the DC Department of Health Care Finance (DHCF) issued a transmittal for breastfeeding support services under Medicaid
- <https://dhcf.dc.gov/node/815752>



Timeline

- 2010 – Affordable Care Act passed
- April 2010 – Aug 2012 –DCBFC meetings with DHCF
- April 2014 – Medicaid Coverage to Promote Breastfeeding
- September 2019 – Enrollment and Code & Rate for Lactation Consultation Services

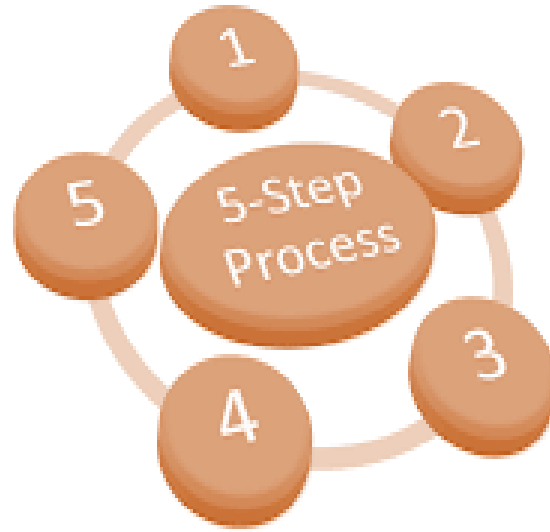


Key Players

- Who were the key players in making this happen?
 - Centers for Medicare & Medicaid Services (CMS)
 - DC Department of Health Care Finance (DHCF)
 - DC Mayor's Lactation Commission
 - DC Breastfeeding Coalition (DCBFC)



Step by Step Process



- What is the process to make this happen?
- Who is eligible to enroll?
- What is required?
- How to submit an online application
- How to bill for covered lactation services



The Process

- DHCF Transmittal letter gives general overview
- Enroll in DC Medicaid program as an IBCLC individual/solo or group provider of lactation services on www.dcpdms.com
- DC Provider Data Management Services (PDMS) launched Oct 2016
 - Web portal for automated submission of Providers DC Medicaid applications



Overview

- ☑ Create an account
- ☑ Complete and submit an online enrollment application
- ☑ Receive approval
- ☑ Billing for lactation consultation covered services



Enrollment Requirements

- IBCLC must be in good standing with the International Board of Lactation Consultant Examiners
- Practicing in the District of Columbia
- Providing services to DC Medicaid beneficiaries
- Non-physicians; certified midwives; registered lactation consultants



Requirements

- National Provider Identifier (NPI) number
- Electronic Funds Transfer (EFT) application – requires ARIBA network ID and DUNS numbers
- Federal Tax ID (EIN or Social Security numbers; W9
- Professional Liability Insurance
- Professional Licenses and Certifications(Registered Nurse, CNM, IBLCE)



ONLINE ENROLLMENT



Online Enrollment Application

- Step One
 - Create a User account on the DC (PDMS) Web Portal www.dcpmds.com
 - Create Username and password
 - New providers must complete and submit an Electronic Funds Transfer (EFT) application



New Enrollment Application

- Step Two
 - Log In using link sent to email
 - On Provider Management Home Page
 - Select correct application – Standard Application
 - Click Begin New Enrollment



Application and Provider Types

Enter information in all required fields!

Application type: Standard Application

Category: Individual/Solo or Group

Provider Type

Taxonomy

Name of Business Entity or First and Last Name if Individual/Solo

Tax ID Type (EIN or SSN)

Tax ID

NPI

Requested Effective Date

Zip Code

If 4-digit extension is unknown, use 1234. The system will validate the address and populate the correct 4-digit extension.

The date in the field will be auto populated with current date. If you are requesting a retro effective date enter the date manually.



Licenses & Qualifications

	Required	Not Required
Specialities		×
Federal DEA Registration		×
State CDS Number		×
Categories of Service		×
Medicare Number		×
Taxonomies	×	
Professional Liability Insurance	×	
Professional Licenses	×	



Affiliation Screen

- Group and Facility Affiliation- Not Required
- Click the green plus sign to add your group member information if applicable
 - Add Group Name
 - Add Medicaid ID Number of Group
 - Add NPI if applicable
 - Enter Tax ID of the Group



Electronic Funds Transfer

- To enroll you must complete:
 - Provider Identifiers Information and Other Identifiers
 - ARIBA Network ID number
 - DUNS numbers
 - Automatic Clearing House (ACH) Vendor Payment Enrollment Form
 - Vendor Information form
 - W-9 Form
- Send directly to DHCF



Electronic Funds Transfer

Ariba Network ID

- Supply Chain Management
- www.ariba.com
- Registration free
- Create an account
- Enter business information

DUNS number

- Duns and Bradstreet
- Credit Reporting agency for businesses
- www.dandb.com
- Free Get DUNS number
30 business days
- Register-Contractor with government



Online Application Process

- Tracking the status of your enrollment:
- Log into account www.dcpdms.com
- PDMS Home page view the “Status” of your application in the “My Providers” Section
- Question or concerns:
- Contact MAXIMUS Provider Customer Service:
1-844-218-9700
(Monday-Friday 8:00am-5:00pm EST)



Transmittal Details

- Can only bill for infants <60 days old after delivery
 - Billing Code
 - S9443 (Lactation classes, non-physician provider)
 - Unit Price: \$15.63
 - Max Unit: 4
 - (1 unit = 15 minutes)
 - Questions? Contact:
 - Department of Health Care Finance
 - Natasha Lewis
 - natasha.lewis@dc.gov
- (202) 698-2006



