



Fee-for-Service Subcommittee February 12, 2025



- **Enrollment continues to work clean applications under 30 days.**
- **We are expecting 4766 revalidation applications this month.**
- **Providers are encouraged to use the option to revalidate multiple locations with a single application**
- **Please use the Enrollment Summary in the PROMISE portal to verify enrollment and revalidation dates**
- **Provider Enrollment information can be found @ [PROMISE Provider Enrollment | Department of Human Services | Commonwealth of](#)**



- **Treat the application seriously. It is a legal agreement and a signed attestation to comply with a vast array of federal and state Medicaid rules...it is far more than just getting a “billing number”.**
- **Make sure your enrollers do good QC checks of your application content before submission. Minimize need to return apps for corrections and the associated delays. Your enrollers can and should check their app status in the portal.**
- **If you/your enrollers have questions about revalidation or enrollment status, the best thing to do is contact MA enrollment staff at: **800-537-8862 Option 2 Option 4****



Various Pharmacy MABs, 32 were issued in November 2024 and all effective 1/6/24

99-24-09 "Medical Assistance Program Vaccine Desk Reference Updates", Issued and effective 11/19/24

09-25-33 "Coverage of and Payment for Doula Services in the Medical Assistance Program", Issued on 12/23/24 and effective 1/1/25

MAB 01-25-33 "Prior Authorization of Anticonvulsants - Pharmacy Services", Issued on 1/10/25 and effective 1/15/25

MAB 03-25-33 "Update to the Admissions Notice Packet (MA 401)", Issued on 1/10/25 and effective 1/1/25

MAB 99-25-01 "Limited English Proficiency Updates", Issued and effective 1/16/25



- **“Federally Qualified Health Center and Rural Health Clinic Alternative Payment Methodology for Long-Acting Reversible Contraceptives” (08-25-01)**
 - **Description:** The purpose of this Medical Assistance (MA) Bulletin is to advise providers that the Department of Human Services (Department) is implementing an alternative payment methodology (APM) for Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) for a supplemental payment at the MA Program Fee Schedule rate for a Long-Acting Reversible Contraceptive (LARC) device and its insertion, or the removal of a LARC device, in addition to payment for an encounter.
- **“Screening, Diagnostic, and Targeted Case Management Services for Eligible Juveniles Enrolled in Medical Assistance Prior to Release from a Carceral Setting” (01-25-34)**
 - **Description:** The purpose of this bulletin is to advise providers that effective February 17, 2025, the MA Program will cover screening and diagnostic services provided to eligible juveniles in the 30 days prior to release, and targeted case management services, both physical and behavioral health, in the 30 days prior to and for at least 30 days following release from a carceral setting.
- **“Federally Qualified Health Centers and Rural Health Clinics Covered Services Chart” (TBD)**
 - **Description:** The purpose of this bulletin is to advise providers of a FQHC and RHC Covered Services Chart that identifies procedure codes, modifiers, and places of service that FQHCs and RHCs can utilize when their personnel render services to MA beneficiaries.



- **“Application of Topical Fluoride Varnish” (09-25-35)**
 - **Description:** The purpose of this bulletin is to remind MA enrolled physicians, Physician Assistants, Certified Registered Nurse Practitioners and any other clinical professionals who can provide topical fluoride varnish (TFV) under the supervision of a MA-enrolled provider, such as medical assistants, that they can render TFV services to MA beneficiaries, remind providers of updated limits for procedure code 99188 on the MA Program Fee Schedule for the provision of TFV, and advise providers of updated TFV training requirements.
- **“Dental Benefit Limit Exception Clarification Process” (TBD)**
 - **Description:** The purpose of this bulletin is to clarify the Departments’ requirements and managed care organizations responsibilities regarding the Dental Benefit Limit Exception (BLE) process under the MA Program in Pennsylvania, as well as to issue a revised MA-549 form to be used in both delivery systems for BLE requests.
- **“MA Program Fee Schedule Revisions” (TBD)**
 - **Description:** The purpose of this bulletin is to advise providers of updates to the MA Program Fee Schedule. These changes are effective for dates of service on and after February 17, 2025, unless otherwise noted.
- **“Updates to the Family Planning Services Program Fee Schedule” (TBD)**
 - **Description:** The purpose of this bulletin is to advise providers of the updates to the Family Planning Services Program Fee Schedule and to issue an updated Family Planning Services: Covered Services Chart.

