RI Medicaid

Conflict Free Case Management

September, 2025
Version 1.2

Revision History

Version	Date	Sections Revised	Reason for Revisions
1.0	May 2024	All Sections	Newly Created
1.1	September 2024	Service Limits	Updated billing guidelines
1.2	September 2025	Procedure Codes and Rates; Service Limits	New procedure codes

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Introduction

Case Management services were previously performed within the Waiver program and in most part by the agency to which the client is associated. The new Case Management provider will provide conflict-free case management (CFCM) to Medicaid long-term services and supports (LTSS) beneficiaries who are participants in the State's home and community-based services (HCBS) programs. This initiative will establish a network of qualified CFCM entities with the capacity to serve approximately 11,000 RI HCBS participants who have a varying and changing array of LTSS needs.

Purpose of Coverage Policy

The purpose of this policy is to establish the rules of payment for services provided to individuals determined to be eligible for RI Medicaid. The General Rules for RI Medicaid along with this policy are to be used together to determine eligibility for services.

General Policy Requirements

The Rhode Island Medicaid Program will only reimburse providers for medically necessary services. The RI Medicaid conducts both pre-payment and post-payment reviews of services rendered to recipients. Determinations of medical necessity are made by the staff of the RI Medicaid Program, trained medical consultants, and independent State and private agencies under contract with the RI Medicaid.

Enrollment Guidelines

Before a provider can begin serving RI Medicaid members, they must have an active enrollment with RI Medicaid.

CFCM providers must enroll as a facility and obtain CFCM certification through EOHHS prior to submitting the RI Medicaid enrollment application

How to Enroll

Enrollment is completed using the RI Medicaid Healthcare Portal (HCP)
https://www.riproviderportal.org

The RI Medicaid Provider Enrollment user guide is available on the portal homepage.

Key Information Needed to Enroll

- **NPI**-providers must obtain a NPI for CFCM enrollment. Apply via NPPES-NPPES (hhs.gov)
- **Address Information** Must include Postal code +4
- **Taxonomy code 251B00000X**
- **Tax ID (EIN)**
- **CFCM certification**
- **Completed W-9** with signature.
- Additional Federally Required Disclosures
- **Provider Enrollment Type**-Facility
- **Provider type** -Conflict Free Case Management.

Note: CFCM services are out of plan, meaning recipients enrolled in Managed Care will receive these services via Fee-for-Service.

Trading Partner Enrollment

To submit claims electronically, providers must enroll as a Trading Partner via the HCP.

Providers may either:

Apply for a new Trading Partner number, or

Add their new CFCM NPI to an existing Trading Partner account.

Please visit the HCP page on the EOHHS website for more information on:

- Enrolling as a Trading Partner
- Registering a Trading Partner
- How to use the HCP

Member Eligibility

- Members will have base Rhode Island Medicaid Eligibility
- The Benefit plan detail will indicate member enrollment in Conflict-Free Case Management.

Billing Procedures

Requirement to Verify Eligibility

Eligibility can be verified via the Eligibility tab on HCP using:

- Member's SSN or Medicaid ID
  Or by calling Gainwell Customer Service:
- Local: (401) 784-8100
- Toll-Free: 1-800-964-6211
  Required info: Member's name, DOB, and SSN

Timely Filing Guidelines

The Rhode Island Executive Office of Health and Human Services has a claim submission restriction of **twelve (12)** months from the date the service was provided to Medicaid recipients.

RI Medicaid must receive a claim for services for Medicaid clients within 12 months of the date of service to process claims for adjudication.

Claims Submission Formats

- Electronic: 837 Professional Claim Transaction
- Paper: CMS 1500 (version 02/2012)
- Software Options:
- Free Provider Electronic Solutions software (available on EOHHS website)
- Provider's own billing software
- Clearinghouse submission

Procedure Codes and Rates

- G9012 – Monthly CFCM Service
- 1 unit per member per month
- Must include one of the following modifiers:
    - HC – Adult Program, Geriatric
    - HI – Integrated Mental Health and Intellectual Disability

Procedure Code	Modifier	Rate
G9012	HC	$170.87
G9012	HI	$170.87

- **New Effective 9/22/2025 – Service Advisory Codes**

- Additionally Certified CFCM agencies may now bill the following codes for recipients in **Personal Choice** and **Habilitation Community** programs:

Procedure Code	**Description**	**Program**	**Rate**
T1001	Nursing Assessment/Evaluation (1 unit/365 days)	both	$185.33
T1028	Assessment of Home/Environment (1 unit/365 days)	both	$83.47

Service Limits

- Billing must be submitted **within the calendar month** (e.g., Jan 1–Jan 31).
- For a full-month claim, the date of service must span the entire month.
- If there are changes in member eligibility during the month (e.g., gaining or losing eligibility), the date of service must reflect the actual eligible period.
    - Example: If a member gains eligibility on January 15, the date of service should be January 15–January 31.
    - If a member passes away during the month, the end date of service must exclude the date of death.

Payment for Services

- Payments are made via **Electronic Funds Transfer (EFT)** only.
- EFT details are submitted during enrollment.
- Payment frequency follows the **State Fiscal Year (SFY) Claims Payment and Processing Schedule**:

  Payment Schedule

Appendix

- RI Medicaid Healthcare Portal (HCP) https://www.riproviderportal.org.
- Certification standards for CFCM providers and the Certification application Conflict- Free Case Management | Executive Office of Health and Human Services (ri.gov)
- Healthcare Portal Resource 1page http://www.eohhs.ri.gov/ProvidersPartners/HealthcarePortal.aspx.
- State Fiscal Year (SFY) Claims Payment and Processing Schedule https://eohhs.ri.gov/providers-partners/billing-and-claims/payment-and-processing-schedule
- Executive Office of Health and Human Services: https://eohhs.ri.gov/

Contact Information

- Provider Services: riproviderservices@gainwelltechnologies.com

  Provider Enrollment: rienrollment@gainwelltechnologies.com
- Customer Service Help Desk: 401-784-8100 (Local); 1-800-964-6211 (Toll Free)
- Available Monday through Friday 8:00 A.M -5:00 P.M. (EST) EOHHS:

  ohhs.ltssnwd@ohhs.ri.gov

Additional Resources

- Electronic Data Interchange
- RI Medicaid Program HIPAA 5010 | Executive Office of Health and Human Services
- CMS 1500 Claim Form Example https://eohhs.ri.gov/sites/g/files/xkgbur226/files/2021-03/cms1500_form_1.pdf
- Instructions to complete CMS 1500 Claim Form https://eohhs.ri.gov/sites/g/files/xkgbur226/files/2021-03/cms1500_directions_1.pdf