peach state
health plan™

Ordering, Prescribing or Referring Requirement Claim Submission Guide

In accordance with the Affordable Care Act (ACA), and Georgia Department of Community Health, Peach State Health Plan requires that any physician, or other practitioner, who orders, prescribes, refers or renders services to Georgia Medicaid beneficiaries be enrolled in the Georgia Medicaid program. Additionally, Peach State Health Plan requires that claims submitted by rendering providers and facilities for services that are ordered, prescribed, or referred contain the Individual (Type 1) NPI of the Medicaid enrolled ordering, prescribing, or referring practitioner.
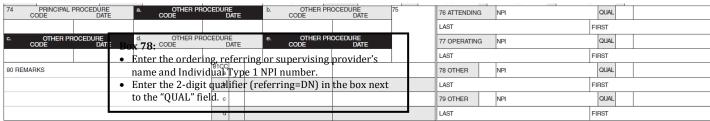
Failure to include the ordering, prescribing or referring provider's Individual NPI number on the claim will result in a claim rejection with reject reason code **"96."**

96 Reject Code Description: Ordering/Prescribing/Referring provider missing or incorrect

CMS-1500 Example

Box 17b: Enter Individual Type 1 NPI number of the ordering, prescribing or referring provider.

Box 17:
- Enter ordering, referring or supervising provider name to the right of the dotted line.
- Enter the 2-digit qualifier (ordering=DK, referring=DN, or supervising =DQ) to the left of the dotted line.
- **Note**: 2-digit qualifier not required for pharmacy claims.

UB-04 Example

Box 78:
- Enter the ordering, referring or supervising provider's name and Individual Type 1 NPI number.
- Enter the 2-digit qualifier (referring=DN) in the box next to the "QUAL" field.

Box 78 is only required in instances when the attending provider and OPR provider are different. Box 78 is not required, and should not be populated, when the attending provider and OPR provider are the same.

To learn more about enrollment in the Georgia Medicaid Program, please visit the Georgia Medicaid Management Information System (GAMMIS) web portal located at: https://www.mmis.georgia.gov/. For questions regarding this notice, please contact Peach State Health Plan Provider Services at 1-866-874-0633.

1-866-874-0633
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Ordering, Prescribing or Referring Requirement
Frequently Asked Questions

1. What are the requirements for OPR?

There are three basic OPR requirements:
1. The physician or non-physician practitioner who wrote the order, prescription or referral must be enrolled in Medicaid as either a participating Medicaid provider or as an OPR provider and his or her NPI number must be included on the claim.
2. The provider's NPI number must be for an individual physician or non-physician practitioner (not an organizational NPI).
3. The physician or non-physician practitioner must be of a specialty type that is eligible to order, prescribe, or refer.

2. I am currently enrolled as an active provider with Georgia Medicaid. Do I also need to enroll as an OPR provider?

No. Providers already enrolled as active Medicaid participating providers do not need to enroll again as OPR providers.

3. How do I enroll in the Georgia Medicaid Program?

Georgia Medicaid has an online enrollment process. OPR providers may enroll in Medicaid through the Georgia Medicaid Management Information System (GAMMIS) Web Portal at: https://www.mmis.georgia.gov/portal/default.aspx.

- For expedited enrollment, providers should enroll online by:
- Clicking on Provider Enrollment.
- Clicking on Enrollment Wizard (scroll to bottom of screen).
- Clicking on Provider Enrollment Application.
- Clicking on New Application.
- For Request Type, select Ordering, Prescribing, or Referring (OPR).

After the application is completed and has been submitted, you will receive an **Automated Tracking Number (ATN)**. To upload a copy of your license and DEA Registration, if applicable:

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- Click on Provider Enrollment.
- Click on Enrollment Application Status.
- Type ATN and Last Name of Provider and click on Search.
- Click on Upload Required Documents.
- Click on pertinent Attachment Description.

4. Is there a separate enrollment process for OPR providers?

Yes. DCH has created online and paper applications strictly for OPR providers.

5. Will providers need a National Provider Identifier (NPI) number to enroll as an OPR provider?

Yes. The provider will need to obtain an individual NPI number before enrolling as an OPR provider. The federal government issues NPIs for health care providers at the following website: https://nppes.cms.hhs.gov/.

6. I am enrolled as a participating provider in another state's Medicaid Program. Am I also required to enroll in the Georgia Medicaid program to provide services to Georgia Medicaid beneficiaries?

Yes. Enrollment in another state's Medicaid program does not exempt an OPR provider from the requirement to enroll in the Georgia Medicaid program. As federally mandated, providers are required to enroll in each state where they order, prescribe, refer or render services to Medicaid enrollees.

For example, if a physician located in Alabama and enrolled in the Alabama Medicaid program writes a prescription or orders a test for a Georgia Medicaid beneficiary, the Alabama physician must be enrolled in the Georgia Medicaid program or the claim submitted by the Georgia provider that filled the prescription or performed the test will be denied.

7. How can I verify that the OPR provider is enrolled in the Georgia Medicaid Program?

Search Georgia Medicaid providers by selecting the provider search function on the Georgia Department of Community Health webpage or by clicking the following link. https://www.mmis.georgia.gov/portal/default.aspx.

- Select "Member information"
- Select "Find a Provider"
- Fill out the online search criteria
- Select whether the provider is ordering, prescribing, or referring in the "Specialties" field of the search criteria.
- Select the "Search" button for results

8. **If a claim is rejected because the OPR provider is not currently enrolled in the Medicaid program, can the OPR provider enroll in the Medicaid program retroactively?**

Yes. Please visit the Georgia Department of Community Health Georgia Medicaid Management Information System (GAMMIS) website to learn more about the Georgia Department of Community Health's retroactive enrollment policy.

9. **If I receive a claim rejection due to the fact that the OPR is not enrolled in the Medicaid program, how long do I have to resubmit my claim?**

Claims that have received a claim rejection for missing or invalid OPR must be resubmitted within the timely filling period. Claims submitted after then timely filling period, will be subject to a timely filling claim denial.

10. **Will certain procedures or services always require that an OPR's information be submitted on the claim?**

Yes, claims submitted for radiology (70000-79999), laboratory (80000-89999) and consultation services (99241-99255) will always require that an OPR's Information be included on the claim.

11. **The rendering provider ordered, prescribed or referred the service being billed on the claim. Can the rendering provider also be listed as the OPR provider on a professional claim?**

Yes, a provider may be listed as both the rendering provider and OPR provider in Instances when the rendering provider has ordered, prescribed or referred a member to the service being billed on the claim.

12. **In a facility setting the attending provider has ordered, prescribed or referred a member for a service being billed on the claim. Is it ok for the attending provider to be listed as the OPR provider on a UB-04 claim form?**

No, the attending provider and OPR provider should not be listed as the same provider on a UB-04 claim form. In instances when the attending provider has ordered, prescribed or referred a member to a service, the attending provider field (Box 76) should be populated with the attending provider's name and NPI and the other provider field (Box 78) should be left blank. PSHP will obtain the OPR's information from the attending provider field.

13. **If the attending provider and OPR provider are different, should both the attending provider and OPR provider's information be populated on a UB-04 claim?**

Yes, in instances where the attending provider and ordering, prescribing or referring provider are different, both the attending provider and OPR provider's information should be populated on a UB-04 claim form. The attending provider's name and NPI number should be populated in Box 76 and the OPR's name, NPI number and the two-digit qualifier "DN" should be populated in Box 78. The two-digit qualifiers "DK" and "DQ" should not be used when populating the OPR's information in Box 78 of a UB-04 claim form.

14. **Who should I contact with questions about the Peach State Health Plan OPR claim submission requirements?**

To learn more about the Peach State Health Plan's OPR claim submission requirements, please contact Peach State Health Plan provider Services at 1-866-874-0633, Monday - Friday, 7 a.m. - 7 p.m. EST.

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