



Montana Medicaid

CLAIM JUMPER

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In This Issue

| | |
|--------------------------------|---|
| CMS-1500 Paper Claim | |
| Submission | 1 |
| Electronic Remittance Advice . | 1 |
| EPSDT Indicator Codes. | 1 |
| Diaper/Incontinence Product | |
| Coding Changes | 2 |
| Team Care and MEPS | 2 |
| PASSPORT Summits. | 2 |
| Recent Publications | 3 |
| Key Contacts | 4 |

CMS-1500 Paper Claim Submission

Effective March 1, 2005, paper submissions of the CMS-1500 claim forms will be processed using optical character recognition (OCR). OCR technology is widely accepted by commercial and governmental healthcare financing organizations. Montana Medicaid is implementing the technology in an effort to increase efficiency, accuracy, and more timely processing of provider claims. OCR processing requires that claims be typewritten on "red drop-out" forms. CMS-1500 claim forms can be purchased from a variety of vendors including forms distributors, print vendors, and office supply companies.

Providers are encouraged to use typewritten "red drop-out" forms for all CMS-1500 paper claims submissions. Handwritten, photocopied, and other black and white formats will cause a delay in claim processing and payment.

Electronic Remittance Advice

Montana Medicaid would like to remind the provider community to take advantage of the HIPAA-compliant 835 remittance advice transaction. Montana Medicaid has been able to produce the 835 electronic remittance advice transaction since October 1, 2003. These transactions are available from the Montana Medicaid fiscal agent, ACS. There are currently a number of providers receiving their remittance advice in the 835 format. Providers must be reimbursed by direct deposit (EFT) and access their RAs electronically to receive the 835 remittance advice transaction.

The remittance advice transactions are returned to the entity or trading partner that submitted the claims transaction to ACS. If you contract with a clearinghouse to deliver your claims to Medicaid, it is the clearinghouse's responsibility to accept and deliver the 835 transaction back to you as a provider.

Please be advised that not all clearinghouses have the capability to accept the 835 transactions for dissemination to its clients. We encourage providers to take advantage of the 835 transaction and the benefits it offers. If you contract with a clearinghouse for your ANSI transactions, please contact your clearinghouse to verify its capability to accept, handle and appropriately route the 835 remittance advice transaction to you.

EPSDT Indicator Codes

Providers billing for services under the Early & Periodic, Screening, Diagnosis & Treatment Program (EPSDT) are reminded that EPSDT indicator "5" is no longer valid. In addition, indicators of "yes," "no," "Y" and "N" are also invalid. The only EPSDT indicators that can be used on a paper claim are 1, 2, 3, 4 and 6. The equivalent indicators in the 837 electronic format are: EPSDT, Family Planning, EPSDT & Family Planning, Pregnancy, and Nursing Home Patient. Information about appropriate use of EPSDT indicators was first reported in manual replacement pages issued in July 2004.

New DMEPOS Manual
The new DMEPOS Manual and Fee Schedule will be posted on the provider resources website (www.mtmedicaid.org) on January 1, 2005.

Diaper/Incontinence Product Coding Changes

The following codes will be deleted for dates of service on or after January 1, 2005.

| Deleted Codes | |
|---------------|---|
| A4521 | Adult-sized incontinence product, diaper, small size, each |
| A4522 | Adult-sized incontinence product, diaper, medium size, each |
| A4523 | Adult-sized incontinence product, diaper, large size, each |
| A4524 | Adult-sized incontinence product, diaper, extra large size, each |
| A4529 | Child-sized incontinence product, diaper, small/medium size, each |
| A4530 | Child-sized incontinence product, diaper, large size, each |
| A4533 | Youth-sized incontinence product, diaper, each |

These codes will be replaced with A4520, Incontinence Garment, any type (e.g. brief, diaper), each. The monthly limit for diapers remains at 180 per month and will continued to be paid at 75% of billed charges.

Reminder: The three-month grace period no longer applies; therefore, if these codes are billed on or after January 1, 2005 they will be denied as an invalid code.

Team Care and MEPS

The Medicaid Eligibility and Payment System (MEPS) has recently been updated to help providers identify Team Care clients when verifying Medicaid eligibility. Team Care is Medicaid’s utilization control program that mandates certain clients to enroll in PASSPORT To Health, receive all Medicaid payable prescriptions from a single pharmacy, and call Nurse First before accessing care – except in emergent care situations.

When accessing a Team Care (TC) client in MEPS, the “Patient Identification” header line notes the client’s full name followed immediately by the annotation of “Team Care” in red letters. An example header line reads: “John F. Doe Team Care.” At the bottom of the screen is the “Restricted information” section. This section will list the Team Care PCP and the client’s Team Care pharmacy. An example is: “(PCP) Community Health Center; (Rx) Driscoll Drug.”

Because Team Care clients are also PASSPORT clients, it’s imperative to follow all PASSPORT rules and guidelines when treating TC clients. Remember, eligibility must be verified before each visit. If you have any questions about how to use MEPS or other Medicaid eligibility verification systems, please call the provider relations line at 1-800-624-3958.

For questions regarding the Team Care program, contact Tedd Weldon in the Managed Care Bureau at (406) 444-1518, or e-mail him at teweldon@mt.gov.

PASSPORT Summits

As the PASSPORT To Health program enters its twelfth year of successfully managing the delivery of health care to Montana’s Medicaid clients, the Montana Department of Public Health and Human Services (DPHHS) is planning summits to determine if the current operation of the PASSPORT To Health program is the most effective way to meet its objectives.

The Department stresses that providers should look at the program in a truly comprehensive way; therefore, no idea is off the table for consideration. “Change to the PASSPORT program, whether slight or radical, may be in order,” said Mary Angela Collins, Managed

Care Bureau Chief. “These summits will provide a forum for providers to identify parts of the program they feel are ineffective or outdated. All we ask is that ideas fit within our goals for managed care.”

PASSPORT To Health’s objectives include fostering a medical home between providers and clients which promotes appropriate care and reduces costs, as well as assuring adequate access to primary care.

One-day facilitated summits are planned for locations across the state. The first will be held in Helena during the week of April 25, followed by Havre the week of May 10, Billings the week of May 17, and Kalispell the week of June 7. A cross-section of PASSPORT stakeholders will be invited, including: PASSPORT providers, specialists, and other non-PCPs, representatives from billing companies, hospitals, FQHCs, RHCs, the tribal health community, and client advocates.

Implemented in 1993, the PASSPORT program has been successful in saving over \$20 million annually. These savings allow the program to provide services to people who may not have otherwise received them, and also help maintain provider reimbursement rates.

In addition to meeting its financial objectives, the PASSPORT program has been well-received by 80 percent of its PCPs and clients.

If you have ideas and would like to participate in one of the summits, contact Program Officer Niki Scoffield at (406) 444-4148 or niscoffield@mt.gov by February 8. A save-the-date notice, background materials, and agenda will be mailed to participants in advance of the summits. Visit Montana Medicaid’s website at www.mtmedicaid.org or watch future issues of the Claim Jumper for more details.

Recent Publications

The following are brief summaries of recently published documents regarding recent program policy changes and other useful resources. For details and further instructions, download the complete document from the Provider Information website at www.mtmedicaid.org. Select *Resources by Provider Type* for a list of resources specific to your provider type. If you cannot access the information, contact Provider Relations at (800)624-3958 or (406)442-1837 in Helena or out-of-state.

| Notices | | |
|----------------------------------|---|--|
| Date Posted | Provider Type | Description |
| 11/05/04 | All Providers | General Manual replacement pages (ARM rule references cited) |
| 12/01/04 | Hospital Inpatient and Outpatient, Physician, Podiatrist, Mid-Level Practitioners | Notice for CAHs dated 12/01/04 regarding billing for clients with Medicare and Medicaid |
| 12/09/04 | DMEPOS | Coding Changes |
| Fee Schedules | | |
| 11/12/04 | Hospital Outpatient | October Fee Schedule |
| 11/19/04 | Hospital Inpatient | October DRG Fee Schedule |
| 12/09/04 | DMEPOS | 2005 Fee Schedule |
| Manuals/Replacement Pages | | |
| 11/16/04 | Pharmacy, Physicians, Mid-Level Practitioners | Prescription Drug Manual Replacement Pages (Updated drug PA criteria) |
| 11/16/04 | Psychiatrist, IHS, FQHC, RHC, Denturist Dental, Optometric Psychological services | Prescription Drug Prior Authorization Manual (Updated drug PA criteria) |
| 11/16/04 | Physician, Mid-Levels, Podiatrist, Psychiatrist, EPSDT, Public Health Clinic, IDTF, Lab and X-Ray, Oral Surgeon | Physician Manual Replacement Pages (Updated drug PA criteria) |
| Other Resources | | |
| 11/05/04 | Dental | Dental Claim Form posted under <i>Forms</i> |
| 11/05/04 11/12/04 | Pharmacy | Drug manufacturer dossiers |
| 11/09/04 | Hospital Outpatient | Hospital outpatient billing slide show |
| 11/12/04 | All Providers | PASSPORT Provider Enrollment Packet located under <i>PASSPORT</i> |
| 11/16/04 | All Providers | PASSPORT To Health Newsletter under <i>Newsletters</i> |
| 11/22/04 | Pharmacy | Preferred Drug List Meeting Schedule for December |
| 11/22/04 | Pharmacy | Drug Class Reviews for December |
| 11/24/04 | School Based Services | CSCT Conference Call Summary, CSCT Conference Call Summary Q&A, CSCT Workgroup Meeting Minutes from 10/19/04 |
| 11/24/04 | School Based Services | The following forms were added to the <i>Forms</i> page: Personal Care Paraprofessional Services Child Profile, Personal Care Paraprofessional Services task/hour guide, CSCT Audit Checklist, Request for Private Duty Nursing Services |
| 11/29/04 | Hospice | The following forms were added to the <i>Forms</i> page: Hospice Election of Benefits, Hospice Physician Certification |
| 11/30/04 | All Providers | Montana Medicaid Claim Jumper added to <i>Newsletters</i> |
| 12/01/04 | Hearing Aid | The following forms were added to the <i>Forms</i> page: Hearing Aid CMN and Hearing Aid PA Form |
| 12/01/04 | Pharmacy/Mental Health | PDL Mental Health Meeting Minutes from Oct. 22 and MH Meeting Agenda for Dec. 3 |
| 12/09/04 | School Based Services | MAC activity code reference guide, Definitions of activity codes, Memorandum of understanding |

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Key Contacts

Provider Information website: <http://www.mtmedicaid.org>

ACS EDI Gateway website: <http://www.acs-gcro.com>

ACS EDI Help Desk (800) 987-6719

Provider Relations

(800) 624-3958 (In Montana)

(800) 442-1837 (Helena and out-of-state)

(406) 442-4402 Fax

TPL (800) 624-3958 (In Montana)

(406) 443-1365 (Helena and out-of-state)

(406) 442-0357 Fax

Direct Deposit Arrangements (406) 444-5283

Verify Client Eligibility

FAXBACK (800) 714-0075

Automated Voice Response (AVR) (800) 714-0060

Point-of-sale Help Desk for Pharmacy Claims (800) 365-4944

PASSPORT (800) 624-3958

Prior Authorization

DMEPOS (406) 444-0190

Mountain-Pacific Quality Health Foundation (800) 262-1545

First Health (800) 770-3084

Transportation (800) 292-7114

Prescriptions (800) 395-7961

Provider Relations
P.O. Box 4936
Helena, MT 59604

Claims Processing
P.O. Box 8000
Helena, MT 59604

Third Party Liability
P.O. Box 5838
Helena, MT 59604