



Montana Health Care Programs

CLAIM JUMPER

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Publications Reminder

It is the responsibility of all providers to be familiar with Medicaid manuals, fee schedules, notices for their provider type, and information published in the *Claim Jumper* and on the [Medicaid website](#).

Pharmacy Claims and IHS Providers

Effective January 1, 2011, all IHS providers (Provider Type 57) are required to bill pharmacy claims, including refills, through the pharmacy point-of-sale system.

Pharmacy claims billed outside the point-of-sale system with Revenue Codes 250 or 259 dated January 1, 2011 or later will be denied.

Submitted by John Hein, DPHHS

HMK (CHIP) Extended Dental Funds Available

Great news! Healthy Montana Kids (HMK) has funding available for HMK-enrolled children who need dental services beyond the HMK Basic Dental Benefit of \$1,412.

An additional \$1,176 for Extended Dental Benefits is available to qualified children each benefit year. HMK Extended Dental Plan reimbursement is 85% of charges, up to a maximum of \$1,000.

For a child to qualify for the Extended Dental Plan, dentists complete an HMK *Extended Dental Request* form which includes the child's treatment plan and estimated costs.

The completed form is then faxed to HMK at 1-877-418-4533 or mailed to the address on the form. Upon receipt of the form, HMK reviews the *Extended Dental Request* and notifies the requesting provider by fax or mail whether the child's Extended Dental Plan services are approved.

Extended Dental Request forms are available on the [HMK website](#) or by calling HMK at 1-877-543-7669.

For more information or clarification about HMK Basic and Extended Dental Plans benefits, contact HMK Dental Manager Barb Arnold at (406) 444-7046 or by e-mail at barnold2@mt.gov.

Submitted by Barb Arnold, DPHHS

Spring Provider Training

Spring 2011 Provider Training is fast approaching, and we want to hear from you!

ACS training topics scheduled include billing basics, the Montana Access to Health (MATH) webportal, the Provider Information website, claim denials, and third party liability (TPL) and Medicare. State programs to be covered include physician-related services, managed care, hospitals, SURS, dental services, health information technology, adult and children's mental health, Healthy Montana Kids (HMK), and nursing facility services.

Please e-mail your suggestions for training topics or programs you'd like to see presented to ACS at MTPRHelpdesk@acs-inc.com, or call Provider Relations at 1-800-624-3958.

All training sessions will be conducted via WebEx. Watch the *Claim Jumper* for a list of scheduled events.

Montana Medicaid Provider Incentive Program for EHR

The ARRA-HITECH Act provides approximately \$30 billion in incentive payments to help qualifying eligible hospitals and providers nationwide significantly improve their ability to acquire and use health information technology and electronic health records to improve the quality of patient care over the next several years.

Incentive programs are available through both Medicare and participating state Medicaid agencies.

The Montana Department of Public Health and Human Services is in the initial stages of developing and implementing the Medicaid Provider Incentive Program (MPIP) for Montana Medicaid providers.

Our target date to begin registration of Medicaid providers for the Montana MPIP is July 2011.

Our target date to begin distribution of incentive payments to qualifying providers is August 2011.

Recently, the national CMS EHR Incentive Program Website was launched for the purpose of provider registration. However, Montana Medicaid physicians who want to participate in the Montana MPIP must wait until the state system is available in July.

Physicians who qualify and wish to participate in only the Medicare

incentive program may register with CMS today. Hospitals qualifying for both Medicare and Medicaid incentive programs are encouraged to wait until the Montana MPIP system is available and initiate both the Medicare and state Medicaid registration process at that time.

Details regarding participation in the Montana MPIP are available on the [website](#).

Submitted by Tim Sizemore, DPHHS

Nurse First Services and Usage

All Montana Medicaid, Healthy Montana Kids, and Healthy Montana Kids Plus patients are eligible for the Nurse First advice line. They can call 1-800-330-7847 at any time to speak with a registered nurse. It's free and confidential. During October and November, callers' most frequent questions were pediatric.

Nurse First also offers patients a free Healthwise® website: Patients may go to www.medicaid.mt.gov and click on *Montana Health and Wellness Information*. Chronic pain and symptom checking were the most sought-after information during October and November.

Submitted by Michael Huntly, DPHHS

Nurse First Calls			
The top five Nurse First call topics are in the table below:			
November 2010 (670 total calls)		October 2010 (599 total calls)	
Number of Calls	Type of Call	Number of Calls	Type of Call
23	Pediatric health information	17	Pediatric health information
17	Pediatric colds	13	Abdominal pain
16	Pediatric cough	12	Chest pain
16	Adult general health information	12	Pediatric medication
14	Pediatric vomiting	12	Pediatric vomiting
		10	Chest pain

Visits to Healthwise® Website			
The top five topics visitors were interested in are in the table below:			
November 2010 (82 website visits)		October 2010 (87 website visits)	
Number of Visits	Topic of Interest	Number of Visits	Topic of Interest
13	Symptom checking	3	Chronic pain
7	Heart failure: fluids	3	Heart failure
5	Constipation: age 12 and older	2	Abscessed tooth
5	Constipation: age 11 and younger	2	Heart disease
32	Mental health and behavior issues	2	Hysteroscopy

Recent Publications

The following are brief summaries of recently published Medicaid information and updates. For details and further instructions, download the complete document from <http://medicaidprovider.hhs.mt.gov/>, the Provider Information website. 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.

Recent Publications Available on Website		
Date	Provider Type	Description
Notices and Replacement Pages		
11/15/2010	Personal Assistance Service	Outdated manual removed; replaced with note referencing applicable ARM chapters and contact information
11/17/2010	School-Based Services	Free Care and CSCT
11/17/2010	Physician, Mid-Level Practitioner, Public Health Clinic	17-APH
11/17/2010	Physician, Mid-Level Practitioner, Public Health Clinic	Compound Drugs Billed on a CMS-1500
11/22/2010	ASC	Enhanced Claims Editing – Add-On Codes
12/27/2010	Dentist, Denturist and Dental Hygienist	Dental and Denturist Covered Procedures and Reimbursement Update
01/05/2011	Psychiatrist, Physician, Mid-Level Practitioner, Pharmacy, Community Mental Health Center	Prior Authorization for Kapvay®
01/05/2011	Hospital Inpatient	Provider Manual Replacement Pages (Entire Manual)
Fee Schedules		
12/08/2010	ASC	Fee Schedule
12/08/2010	Hospital Outpatient	October 2010 APC Fee Schedule
12/08/2010	Hospital Outpatient	October 2010 Outpatient Procedure Code Fee Schedule
12/08/2010	Hospital Outpatient	July 2010 Outpatient Procedure Code Fee Schedule
12/08/2010	Hospital Outpatient	July 2010 Outpatient Procedure Code Fee Schedule
01/05/2011	Physician, Mid-Level Practitioner, Lab and Imaging, Hospital Outpatient, IDTF, Podiatrist	ATP Fee Schedule
Other Resources		
11/05/2010	Pharmacy	SMAC Update
11/08/2010	All Providers	CMHB PowerPoint Presentation from Fall 2010 Provider Training
11/08/2010	Pharmacy	PDL Update`
11/08/2010	All Providers	Health IT Environmental Survey
11/15/2010	Pharmacy	PDL Update
11/19/2010	Pharmacy	PDL Update
11/22/2010	All Providers	Payment and Remittance Advice Delay due to holidays
12/03/2010	All Providers	Claim Inquiry, Individual Adjustment Request, Paperwork Attachment Cover Sheet
12/06/2010	Pharmacy	SMAC Update
12/13/2010	Home Health	Note regarding manual update
12/20/2010	All Providers	January <i>Claim Jumper</i>
12/20/2010	All Providers	HMK/CHIP Key Contacts
01/05/2011	Pharmacy	PDL Update

Top 15 Claim Denial Reasons		
Exception	December Ranking	November Ranking
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	2
RATE TIMES DAYS NOT = CHARGE	3	3
DRUG CONTROL CODE = 2 (DENY)	4	4
REFILL TOO SOON	5	5
PARTIAL DENTURES	6	6
PA MISSING OR INVALID	7	7
PASSPORT PROVIDER NO. MISSING	8	8
CLAIM INDICATES TPL	9	9
RECIPIENT COVERED BY PART B	10	10
REV CODE INVALID FOR PROV TYPE	11	13
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	12	12
SLMB OR QI-1 ELIGIBILITY ONLY	13	11
MISSING/INVALID INFORMATION	14	14
NDC MISSING OR INVALID	15	17

Key Contacts

Provider Information website: <http://medicaidprovider.hhs.mt.gov>

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

ACS EDI Help Desk (800) 624-3958

Provider Relations

(800) 624-3958 (In- and out-of-state)

(406) 442-1837 (Helena)

(406) 442-4402 Fax

E-mail: MTPRHelpdesk@ACS-inc.com

TPL (800) 624-3958 (In- and out-of-state)

(406) 443-1365 (Helena)

(406) 442-0357 Fax

Direct Deposit Arrangements (406) 444-5283

Verify Client Eligibility

FaxBack (800) 714-0075

Automated Voice Response System (AVRS) (800) 714-0060

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

Passport (800) 362-8312

Prior Authorization

Mountain-Pacific Quality Health (800) 262-1545

Mountain-Pacific Quality Health–DMEPOS/Medical

(406) 457-5887 local, (877) 443-4021, Ext. 5887 long-distance

Magellan Medicaid Administration (previously dba First Health Services)

(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