

Montana Health Care Programs

CLAIM JUMPER

Volume XXVII, Issue 5, May 2012

In This Issue

Publications Reminder	1
ACS Is Now Xerox	1
Spring Provider Fair 2012.....	1
Establishing Care with Passport Clients	1
HMK Claims Adjustment	1
HMK and HMK <i>Plus</i> Claims Clarification.....	2
Nurse First Services and Usage.....	2
Recent Publications	3
Top 15 Claim Denial Reasons	4

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 *Claim Jumper* issues and on the Medicaid website.

ACS Is Now Xerox

Effective April 1, 2012, ACS State Healthcare, LLC, officially became Xerox State Healthcare, LLC.

The transition to Xerox will occur in the upcoming months, so you will see a new logo and new e-mail addresses.

Our services and team will remain the same, and you will continue dealing with the same people. We will continue to post updates as we complete the transition.

Spring Provider Fair 2012

Provider Fair 2012 is scheduled for May 15–16, 2012, at the Great Northern Hotel in Helena. Registration and complete session descriptions are available on the [Training page](#) of the website.

We recommend that participants register individually.

In conjunction with the Provider Fair, the Montana Medical Association/Brown Consulting Associates are offering a coding workshop at the Great Northern Hotel on May 15, 8:30 a.m.–11:30 a.m.

The registration deadline for the coding workshop is May 11; a late fee applies after April 30. The coding workshop [registration form](#) is available on the Provider Information website.

Establishing Care with Passport Clients

Most Medicaid clients either choose or are assigned Passport to Health providers to help manage their care. It is critical that clients then establish care with primary care providers in order to use their Medicaid benefits most effectively, including the provision of referrals for needed medical services.

Montana Medicaid is currently able to provide education to over 80% of new Passport clients, including information on using the program and the importance of establishing care with their Passport providers. However, it is not uncommon for clients to encounter referral and access issues due to the failure to establish care.

As part of establishing a medical home, primary care providers can reach out to new Passport clients by calling new clients on their monthly Passport list or sending letters to set up appointments to establish care.

A direct appeal from Passport providers is a powerful message to clients that they have a medical home that is ready to

serve their needs. With minimal effort, all parties involved can save time, money and effort, resulting in Passport patients receiving the best care possible.

If you have questions, contact John Hoffland, Passport to Health Program Officer at (406) 444-0991.

Submitted by John Hoffland, DPHHS

HMK Claims Adjustment

Healthy Montana Kids (HMK, formerly CHIP) will have a mass adjustment completed in May 2012 on claims previously paid in error and spanning January 2011 to date.

This adjustment does not affect those providers who appropriately receive reimbursement through Xerox (formerly ACS) for HMK member claims: Rural Health Clinics (55); Federally Qualified Health Centers (56); CHIP Dental (66); and CHIP Eyeglasses (67).

HMK providers who received reimbursement from the MMIS for any service, other than procedure code H2019 (Community-Based Psychiatric Rehabilitative Services), will have an adjustment made to paid claims. Those claims and payments should have processed through Blue Cross and Blue Shield of Montana (BCBSMT).

Once the reimbursement adjustment is applied, HMK providers may submit the claim to BCBSMT for appropriate reimbursement. If the DOS on the claim is greater than 365 days, please contact HMK Program Officer Liz Lelacheur at (406) 444-6002 for special processing.

For more information, contact Provider Relations at (800) 624-3958

Submitted by Katherine Buckley-Patton, DPHHS

HMK and HMK *Plus* Claims Clarification

Children enrolled under the Healthy Montana Kids (HMK) and Healthy Montana Kids *Plus* (HMK *Plus*) coverage groups may occasionally have overlapping coverage under both programs. They may also have adjacent months’ coverage under each program. In those instances, it is critical that providers submit separate claims for each month.

For example, a child eligible for HMK (formerly CHIP) in January 2012 may be subsequently eligible for HMK *Plus* (formerly children’s Medicaid) in February 2012. In this instance, a single claim with service dates spanning more than one month (e.g., January 28–February 3) will be denied. In order for services to be paid correctly, two separate claims must be submitted; one for each program’s respective month’s eligibility. That is, one claim for January’s services payable by HMK and a second claim for February’s services payable by HMK *Plus*.

The majority of HMK member claims process through Blue Cross and Blue Shield of Montana (BCBSMT). There are the following exceptions:

- **Benefit** – Community-Based Psychiatric Rehabilitation and Support (CPBRS), with HCPCS code H2019, is billed through Xerox (formerly ACS) for HMK members. Claims with all other services should be submitted to BCBSMT.
- **Providers** – HMK reimburses Rural Health Clinics (55), Federally Qualified Health Centers (56), CHIP Dental (66), CHIP Eyeglasses (67) through Xerox. Those providers should continue to submit to Xerox all outpatient services provided to HMK members.

If a provider has any claims that deny due to the overlapping DOS submitted on one claim, please re-submit the separate month of services on separate claims.

Submitted by Katherine Buckley-Patton, 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 December and January, callers’ most frequent questions were pediatric-related.

Nurse First also offers patients a free Healthwise® website. Patients may go to www.dphhs.mt.gov/programsservices/medicaid.shtml, and click on *Montana Health and Wellness Information*. During December and January, the most sought-after information was regarding early disease detection and vision test.

Submitted by Michael Huntly, DPHHS

Nurse First Calls			
The top five Nurse First call topics are in the table below:			
January 2012 (745 total calls)		December 2011 (613 total calls)	
Calls	Type of Call	Calls	Type of Call
18	Pediatric cough	20	Pediatric cough
16	Adult chest pain	12	Adult medication question
16	Pediatric colds	11	Pediatric colds
13	Pediatric fever	11	Pediatric vomiting
13	Pediatric vomiting	10	Pediatric fever

Visits to Healthwise® Website			
The top five topics visitors were interested in are in the table below:			
January 2012 (89 website visits)		December 2011 (74 website visits)	
Visits	Topic of Interest	Visits	Topic of Interest
10	Vision test	12	Early disease detection
9	Smart decisions: know your options	7	Living with Type I DM
7	Ophthalmoscopy	6	Stroke
3	Slit lamp examination	3	Osteoporosis screening
3	Stroke	2	Type II DM

Recent Publications

The following are brief summaries of recently published Medicaid information and updates. For details and further instructions, download the complete document from 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 1-800-624-3958 or (406) 442-1837 in Helena.

Recent Publications Available on Website		
Date	Provider Type	Description
Notices, Manuals, and Replacement Pages		
03.01.12	Pharmacy	NCPDP D.0 Payer Sheet
03.02.12	RHC and FQHC	RHC and FQHC Rate Change
03.05.12	Nursing Facility and Swing Bed	Replacement Pages: <i>Nursing Facility and Swing Bed Services</i>
03.07.12	Personal Transportation	<i>Personal Transportation Services</i>
03.08.12	Pharmacy	Vaccines for Children (VFC) Training
03.19.12	All Providers	<i>General Information for Providers</i>
Fee Schedules		
03.27.12	Hospital Outpatient	APC and Procedure Code
Other Resources		
03.02.12	Pharmacy	DUR Meeting Agenda
03.06.12	All Providers	Provider Fair Agenda, Registration Information, and Course Descriptions
03.07.12 03.19.12	Pharmacy	SMAC Update, March 7, 2012 SMAC Update, March 19, 2012
03.07.12	Pharmacy	Preferred Drug List Meeting Schedule
03.19.12	All Providers	April 2012 <i>Claim Jumper</i>
03.19.12	All Providers	Key Contacts: Claims, Public Assistance Offices, Client Eligibility, Passport, Policy Information, and Prior Authorization
03.20.12	Pharmacy	Montana PDL
03.22.12	Optician and Optometric	Key Contacts: Optician, Optometric, and Eyeglasses
03.26.12	Pharmacy	Montana DUR Agenda, April 25, 2012
03.27.12	Pharmacy	Montana DUR Minutes, March 21, 2012
03.29.12	ASC, Family Planning, IDTF, Lab and Imaging, Mid-Level Practitioner, Pharmacy, Physician, Podiatrist, and Social Worker	Rebateable Drugs, March 28, 2012

Top 15 Claim Denial Reasons		
Exception	March Ranking	February Ranking
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	2
DRUG CONTROL CODE = 2 (DENY)	4	4
RATE TIMES DAY NOT = CHARGE	4	3
PDCS REFILL TOO SOON	5	6
PA MISSING OR INVALID	6	5
REFILL TOO SOON	7	7
PASSPORT PROVIDER NO. MISSING	8	8
MISSING/INVALID INFORMATION	9	8
REV CODE INVALID FOR PROV TYPE	10	22
CLAIM INDICATES TPL	11	12
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	12	9
PROC. FACT. CODE=4 (NOT ALLOW)	13	19
PROC. CONTROL CODE = 01	14	15
RECIPIENT COVERED BY PART B	15	17

Key Contacts

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

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

EDI Help Desk (800) 624-3958

Provider Relations

(800) 624-3958 (In/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

Voice Response System (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

[Return to page 1](#)