

Montana Health Care Programs

CLAIM JUMPER

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In This Issue

Publications Reminder.....	1
Fall 2014 Provider Fair Trainings	1
ICD-10 Information	1
Home Support Services and Therapeutic Group Home Services for Youth.....	1
HMK Member ID Change	1
October Is Breast Cancer Awareness Month.....	2
Montana Prescription Drug Registry ..	2
Publications Available on the Website	3
Top 15 Claim Denial Reasons	4
Key Contacts.....	4

Publications Reminder

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

Fall 2014 Provider Fair Trainings

On-site presentations are scheduled in Missoula (October 15), in Bozeman (October 22), and in Billings (October 29).

Visit the [Training page](#) for the agenda and other information.

ICD-10 Information

Visit the [ICD-10 page](#) for the latest ICD-10 news and provider communication and to take the fourth ICD-10 Readiness survey!

*Submitted by Amber Sark and Jennifer Tucker,
ICD-10 Co-Coordinator*

Home Support Services and Therapeutic Group Home Services for Youth

Effective September 19, 2014, upon adoption of the new CMHB Medicaid Services Provider Manual, Children's Mental Health Bureau will manage the utilization review and appeals processes for Home Support Services (HSS) and Therapeutic Group Home (TGH) services for youth.

The new forms are available at the [Forms and Applications](#) link on the Children's Mental Health page.

Completed forms can be faxed to Children's Mental Health Bureau at 406-444-6864 or e-mailed to CMHB.UR@mt.gov using the state's File Transfer Service (ePass). To access the File Transfer Service, go to <https://transfer.mt.gov/>.

Do not send completed forms via regular e-mail as it is not secure for sending identifiable health information.

Submitted by Laura Taffs, DPHHS

HMK Member ID Change

Reprinted from last month with correction: Members will receive their new HMK cards in September.

HMK is changing member health plan ID numbers effective October 1, 2014.

When you provide health care services for HMK members after October 1, 2014, please check their health plan ID numbers to be sure you have the new number.

HMK members will receive their new ID cards with updated health plan numbers in September.

Continue using the HMK member ID card with YDA802XXXXXX for services provided through September 30, 2014.

Beginning October 1, 2014, use the updated HMK member ID that begins with YDE00XXXXXX.

This change provides a uniform ID number for HMK Plan members and does not affect HMK member benefits.

Thank you for your service to HMK members.

Submitted by Pat Dawes, DPHHS

Nurse First

Think pink!
See [page 2](#) for details!

October Is Breast Cancer Awareness Month

The United States Department of Health and Human Services offers suggestions on how you can help spread the word about steps your patients can take to detect breast cancer early.

The U.S. DHHS says that 1 in 8 women in the United States will be diagnosed with breast cancer at some point. The good news is that many women can survive breast cancer if it is found and treated early.

A few ideas for spreading awareness are:

- Speak to your patients about the importance of getting screened for breast cancer.
- Encourage women 40–49 years of age to have regular mammograms.
- Educate male patients about the risk of breast cancer in men. Many people do not know that breast cancer can occur in men. While male breast cancer accounts for less than 1% of all cases of breast cancer, over 2,000 men are diagnosed each year.

National Breast Cancer Awareness Month is a chance to raise awareness about the importance of early detection of breast cancer. Help make a difference!

For more information, visit www.healthfinder.gov.

Submitted by Connie Olson, DPHHS



Montana Prescription Drug Registry

The goal of the [Montana Prescription Drug Registry \(MPDR\)](#) is to assist prescribers in providing safe and effective treatments for their patients. It aids in identifying and inhibiting the abuse of controlled substances.

Montana Medicaid encourages all prescribers to obtain access to the MPDR. At this time, Montana-licensed pharmacists, physicians (M.D., D.O.), physician assistants, naturopathic physicians, dentists, optometrist, podiatrist, telemedicine physicians (M.D., D.O.), and advanced practitioner nurses with prescriptive authority are eligible to access the MPDR.

To obtain access, providers must complete (1) the Online Training Program and (2) the the Online Registration Form.

Once registered, you will receive an e-mail containing instructions on accessing the MPDR. Access to the MPDR requires an [ePass Montana](#) account. Please make sure your e-mail account and your computer network security settings allow you to receive e-mail from pdrrassiance@egovmt.com. If you cannot find the MPDR e-mail, please check your junk mail or spam folders.

MPDR Tips

Patient Search. Patient profiles are entered by name and date of birth; therefore, there is a potential that one individual will have multiple profiles due to variations in how a name was entered. To avoid missing important information, we recommend searching for a patient by date of birth. Using this method will allow you to determine if there are multiple profiles associated with your patient.

Prescribing History Search. If you entered your DEA number when registering, and you prescribe controlled substances, you will be able to access the My Prescribing History section.

By searching this section, you can examine all prescriptions that were dispensed under your DEA number. Many prescribers have been able to identify prescription forgeries by using this feature of the MPDR.

For questions regarding registration, contact MPDR at dlibsdpdr@mt.gov or 406-841-2240.

If you have additional questions, contact Katie Hawkins at 406-444-2738 or khawkins@mt.gov or Dave Campana, R.Ph. at 406-444-5951 or dcampana@mt.gov.

Submitted by Katie Hawkins, DPHHS

Publications Available on the Website

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.

Date	Provider Type	Description
Provider Notices, Manuals, and Replacement Pages		
08.22.2014	Pharmacy, Dental, Physicians, Mid-Levels	Tobacco Cessation Products
08.18.2014	Mental Health Centers	Modifiers Added to Community Based Psychiatric Rehabilitation and Supports (CBPRS) Updated
08.13.2014	Pharmacy	Multisource Preferred Brand Name Products
08.13.2014	Mental Health Centers, 1915(i) Providers, PRTFs	Montana Child and Adolescent Needs and Strengths (CANS)
08.13.2014	Mental Health Centers, 1915(i) Providers, PRTFs	Community-Based Psychiatric Rehabilitation and Support (CBPRS) Clarification
08.05.2014	All Providers	Montana Prescription Drug Registry
07.30.2014	Mental Health Centers	Modifiers Added to Community Based Psychiatric Rehabilitation and Supports (CBPRS)
Fee Schedules		
08.14.2014	Proposed Fee Schedules	Proposed DME
08.06.2014	EPSDT (Children's Services)	Children's Special Health Services
07.30.2014	All Providers	RBRVS, July 1, 2014
07.30.2014	Physician	Anesthesia
Other Resources		
08.29.2014	Pharmacy	DUR Boards Agenda
08.26.2014	Pharmacy	MHSP Preferred Pharmaceuticals List, September 1, 2014
08.25.2014 08.07.2014	Pharmacy	Montana SMAC Update, August 22, 2014 Montana SMAC Update, August 7, 2014 Montana SMAC Update, July 25, 2014
08.18.2014	Claim Jumper Newsletter and Upcoming Events	September 2014 Claim Jumper
07.31.2014	All Providers	Address Correction Form (Revised)

Top 15 Claim Denial Reasons		
Exception	August Ranking	July Ranking
RECIPIENT NOT ELIGIBLE	1	1
EXACT DUPLICATE	2	2
RATE TIMES DAYS NOT = CHARGE	3	3
PA MISSING OR INVALID	4	4
DRUG CONTROL CODE = 2 (DENY)	5	6
REFILL TOO SOON PDCS	6	7
PROVIDER TYPE/PROCEDURE MISMATCH	7	17
REFILL TOO SOON	8	8
PASSPORT PROVIDER NO. MISSING	9	5
PROCEDURE/AGE MISMATCH	10	21
RECIPIENT COVERED BY PART B	11	9
SLMB OR QI-1 ELIGIBILITY ONLY	12	10
MISSING/INVALID INFORMATION	13	13
DEPRIVATION CODE RESTRICTED	14	14
REV CODE INVALID FOR PROVIDER TYPE	15	11

Key Contacts

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

Xerox EDI Solutions
<http://www.acs-gcro.com/gcro/>

Xerox EDI Support Unit
 1.800.987.6719

Provider Relations
 1.800.624.3958 In/Out of state
 406.442.1837 Helena
 406.442.4402 Fax
MTPRHelpdesk@xerox.com

Third Party Liability
 1.800.624.3958 In/Out of state
 406.443.1365 Helena
 406.442.0357 Fax

EFT and ERA
 Fax completed documentation to
 Provider Relations, 406.442.4402.

Verify Member Eligibility
 FaxBack 1.800.714.0075 or
 Voice Response 1.800.714.0060

POS Help Desk for Pharmacy Claims
 1.800.365.4944

Passport 1.800.362.8312

PERM Contact Information
 406.444.4171 or HeatherSmith@mt.gov;
 visit the website,
<http://www.dphhs.mt.gov/perm/>

Prior Authorization
 MPQH 1.800.262.1545
 MPQH – DMEPOS/Medical
 406.457.5887 Local;
 877.443.4021 X 5887 Long-Distance

Magellan Medicaid Administration
 (dba First Health) 1.800.770.3084;
 Transportation 1.800.292.7114;
 Prescriptions 1.800.395.7961

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

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

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