

July 1, 2005

Montana Medicaid Notice

Physicians, Mid-Level Practitioners, RHCs, FQHCs, IHS, and Hospital Providers

Revised Processing for Emergency Room Visits

Montana Medicaid recently made changes to the claims processing system to recognize claims for clients who are under two years of age and are seen in the emergency room after hours, on weekends, and major holidays as emergency services. These changes apply to claims that have a first date of service on or after January 1, 2005. In addition, there are now procedure codes that will always be considered emergent, regardless of client age. The 'always emergent' procedures apply to claims with first date of service on or after January 1, 2005, with several procedures effective August 1, 2003. These updates became effective in early July, and a mass adjustment will be processed to correct the claims processed prior to this policy change. Previously, claims that met these conditions would have to be submitted to Medicaid for review and pricing. Now the claims processing system has been updated to recognize claims as emergency services if they meet the following criteria:

Professional Claims

If the client is under two years old and is seen in the emergency room, and the date of service is on a weekend, or on January 1, July 4, or December 25, then the claim will be considered and processed as emergent. If the client is under two and is seen in the emergency room on a weekday outside of regular office hours and the claim contains procedure code 99050 (services requested after posted office hours in addition to basic service), then the claim will be considered and processed as an emergency. This procedure code is set to bundle, and the provider should bill this code with zero charges. In addition, cost share will not be taken on these claims.

Another change is the addition of procedure codes that are always considered emergent in an emergency room setting, regardless of age. Lines with the same date of service as one of these procedures will be considered an emergency, and cost share will be overridden. This procedure list can be found on www.mtmedicaid.org.

Institutional Claims

If the client is under two years old as of the first covered day on the claim, and the service is performed in the emergency room between 6 p.m. and 8 a.m., or at any hour on a weekend (Saturday or Sunday), or on January 1, July 4, or December 25, the claim will be considered an emergency and priced accordingly. In addition, cost share will not be taken. Claims that reflect more than one emergency department visit in a 72-hour period should not be span billed on one claim. In order for you to be properly reimbursed for each visit, separate claims

must be submitted for each visit. In the case where one client has two visits on the same day, the second claim must be submitted to Rena Steyaert (Health Policy and Services Division, P.O. Box 202951, 1400 Broadway, Helena, MT 59620-2951) for review.

Please note this material does not apply to Montana's critical access and exempt hospital claims because their claims bypass the emergent services list and receive payment for emergency room visits based on their cost to charge ratio.

Contact Information

For claims questions or additional information, contact Provider Relations:

Provider Relations in Helena and out-of-state: (406) 442-1837

In-state toll-free: 1-800-624-3958

Visit the Provider Information website:

<http://www.mtmedicaid.org>