



Claim Jumper

Montana Healthcare Programs Claim Jumper

July 2022 Volume XXXVII, Issue 7

In This Issue

SURS Revelations

Provider Services
Portal News

Providers and TPL

Top 15 Denial Reasons

Recent Website Posts

Who Ya Gonna Email

Upcoming Training

Billing 101 July 21, 2022

CSCT Schools August 18, 2022

Optometric September 15, 2022

Register Now

SURS Revelations

Written Therapy Orders

In the wonderful world of therapy, a referral is the golden ticket for services. Some therapy services are crucial to a patient's immediate recovery and can be provided after receiving a simple verbal order from the patient's physician or mid-level practitioner. However, it is the therapist's responsibility that the verbal order is followed up with a signed and dated *written* order no later than 30 days after receiving the verbal order.

Referrals are another excellent tool for providers to thoroughly communicate about the state, needs, and goals of their shared patient. Patient needs are ever changing, and a written order provided for therapy services in only valid for 180 days. A new written order must be obtained for the continuation of care once these 180 days are up.

The Administrative Rule of Montana (ARM) 37.86.606 states that not only must the provider maintain the referral or order, but also maintain appropriate documentation that demonstrates compliance with Medicaid requirements. The *Physical Therapy, Occupational Therapy, and Speech Therapy Services Manual* outlines the requirements for required therapy documentation submitted to Montana Medicaid including the signed and dated order from the member's physician or mid-level practitioner; the member's name on each page of documentation; diagnosis, duration and time, course of treatment, and expected outcomes. In addition, documentation must be complete and illustrative of what the therapist has provided each time a member is seen and must support the procedures that are billed to Montana Healthcare Programs. For further information, refer to the manual on any of the therapy provider type pages (Physical, Occupational, Speech Therapist) after accepting the end user agreement.

Laurie Nelson, Therapies Program Officer, conducted an online provider training for Therapy Services in March 2022. The PDF version can be found on the <u>Training page</u> of the Provider Information website. While it may seem burdensome to obtain the written order, it is a tool to transmit key information about the care the patient needs. Remember, a written order is the golden ticket to great care!

Submitted by Callan Brick Program Integrity Compliance Specialist Office of the Inspector General

Provider Services Portal News

Provider Services Portal Versus Fax and Mail

Historically, providers have only been able to send file update requests and documentation to Montana Healthcare Programs via mail or fax. The new Provider Services Portal eliminates the need for these outdated processes.

The Provider Services Portal is a great tool that enables providers to control the information on their file. Providers are able to submit updates to their provider file, upload the documentation, and track the progress of their update request online. This feature of the Provider Services Portal speeds up the processing time of provider file update requests.

Additional information on updating provider files can be found in the Provider File Updates tab on the <u>Provider Enrollment page</u> of the Provider Information Website.

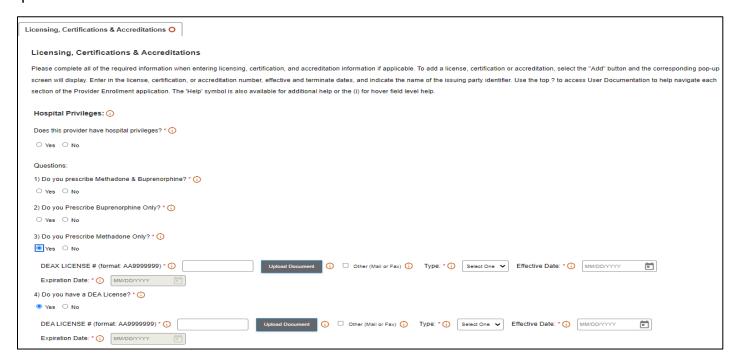
With the Provider Services Portal, Montana Healthcare Programs is updating to paperless and moving away from faxed and mailed file update requests. Please help us reach our goal by registering for the Provider Services Portal. Thank you for all you do for our Montana Healthcare Programs members.

Important DEA/DEAX Information

Providers who prescribe medications are required to include their DEA/DEAX license information with their enrollment information.

When completing an enrollment application or update for a provider with prescribing privileges in the MPATH Provider Services Portal, note that the DEA/DEAX questions are presented in a single line question format versus the standard grid format used for other licensure types in the portal.

DEA/DEAX Licensure questions are presented on the Credentials Menu option on the Licensing, Certifications & Accreditations tab. Each question requires a Yes/No response. Prescribing providers enrolling with Montana Healthcare Programs should answer Yes to all applicable questions on this tab.



Montana Medicaid Providers and Third-Party Liability

Part 2 of 4: Full and Final Versus Adjustments to Pursue TPL

The TPL article in the June 2022 issue of the Claim Jumper, stated that Part 2: Establishing Provider Lien and Billing Medicaid for Tort Recovery Purposes would be in the July edition. The series order changed to provide information in a more comprehendible sequence.

This article covers accepting Montana Medicaid payments as full and final and whether or not a provider, or third-party vendor can return Medicaid payments when a potential or known liable third party is discovered after Medicaid has paid.

Providers are required by federal law and Administrative Rules of Montana (<u>ARM) 37.85.407</u>, to bill liable third parties before Medicaid for all medical services provided to an eligible Medicaid recipient. Providers must not seek any payment in addition to or in lieu of the amount paid by the Montana Medicaid program.

TPL is frequently asked if providers or their third-party vendors can refund Medicaid and pursue payment from the liable third party. <u>ARM 37.85.406 (11)</u> states that Medicaid providers agree to accept, as payment in full, the amount paid by Medicaid for services or items provided to an eligible Medicaid recipient. Simply stated, providers accept Medicaid's payment as full settlement of the claim. Therefore, providers are prohibited from refunding Medicaid's payment in order to bill any other source for the same claim. Providers must bill any liable third parties for all other claims that have not already been submitted to Medicaid.

Medicaid has a few exceptions to the full and final rule when there is a need for Medicaid to costavoid a claim. For example, Workers Compensation rules and statutes can prevent Medicaid's recovery of funds paid for medical services provided to a Medicaid recipient. For this reason, Medicaid will invoke the exception and contact the provider to request a return of Medicaid's payment and have the provider bill the liable third-party.

For questions related to this article or to notify the Department, please email hhstraumaprogram@mt.gov or call the TPL Program at (406) 444-9440 and select option 4.

	Submitted by Olivia Roussan and Sara Sparks TPL Recovery DPHHS
Coming in the August iss Montana Medicaid Providers a	• · · · · · · · · · · · · · · · · · · ·

Provider Services Portal News

Continued from page 2

A missing DEA/DEAX License can result in a longer enrollment process time. If you inadvertently answered No to the questions for DEA/DEAX Licensure, and have already submitted your application, you can upload the DEA/DEAX License to the Portal using the Document Upload feature on the Portal using the Additional Documents Menu option. See the June 2022 Claim Jumper article titled Uploading Supplemental Documentation in the MPATH Provider Services Portal for further instructions on uploading documents to the MPATH Provider Services Portal.

Submitted by Denise Juvik MPATH Provider Services Project Manager DPHHS

Top 15 Claim Denials

Claim Denial Reason	May 2022	April 2022
MISSING/INVALID INFORMATION	1	1
PROC. CODE NOT COVERED	2	5
EXACT DUPLICATE	3	3
PA MISSING OR INVALID	4	2
RATE TIMES DAYS NOT = CHARGE	5	4
PROC. CODE NOT ALLOWED	6	7
PROVIDER TYPE/PROCEDURE MISMATCH	7	8
RECIPIENT COVERED BY PART B	8	6
REVENUE CODE NOT COVERED	9	11
PROCEDURE/AGE MISMATCH	10	14
DEPRIVATION CODE RESTRICTED	11	13
CLAIM DATE PAST TIMELY FILING LIMIT	12	17
RECIPIENT NOT ELIGIBLE DOS	13	9
REV CODE INVALID FOR PROVIDER TYPE	14	18
CLAIM INDICATES TPL	15	10

Recent Website Posts

Below is a list of recently published Montana Healthcare Programs information and updates available on the <u>Provider Information Website</u>.

PROVIDER NOTICES			
Date Posted	Provider Types	Provider Notice Title	
05/27/2022	- • • • • • • • • • • • • • • • • • • •	Resumption of Prior Authorizations and Continued Stay Reviews	
05/27/2022	Pharmacy	Albuterol HFA Inhalers – Preferred Drug List Enforcement	
05/31/2022	Pharmacy	2022 Average Acquisition Cost (AAC) Survey	
06/01/2022	Mental Health Center and PRTF	Children's Mental Health Bureau Service Information – Targeted Case Management Initial Clinical Assessment Concurrent with Psychiatric Residential Treatment Facility Enrollment	
06/03/2022	Inpatient Hospital	Out-of-State Inpatient Admissions Prior Authorizations REISSUED	
06/03/2022	ASC, FQHC, Inpatient Hospital, Mid- Level Practitioner, Outpatient Hospital, Physician, and RHC	Circumcision Prior Authorization Changes REISSUED	
06/03/2022	•	Unlisted Billing Codes Reminder REISSUED	
06/03/2022	Inpatient Hospital	Condition Code – LARC Immediately After Delivery REISSUED	
06/03/2022	Ambulance, DME, Home Health Agency, Inpatient Hospital, Mid-Level Practitioner, Outpatient Hospital, Physician, and Private Duty Nursing	New Early and Periodic Screening, Diagnostic and Treatment (EPSDT) Review and Approval Process Through Qualitrac Portal	
06/15/2022	Nursing Facilities	Medicaid Medical Transportation Services for Nursing Facilities	
06/17/2022	ASC, CAH, Family Planning Clinic, FQHC, Hospital Inpatient, Hospital Outpatient, IHS, Mid-Level, Pharmacy, Physician, Public Health Clinic, and RHC Providers	Plan First Updated Code List Descriptions	

FEE SCHEDULES

January 2022

January 2022 DME Fee Schedule Revised

July 2022

Proposed July 2022 Dialysis Clinic Fee Schedule

Proposed July 2022 DDP Fee Schedule

ADDITIONAL DOCUMENTS POSTED

- IHS Pharmacy Training Presentation
- May 2022 PDL Meeting Minutes

Preferred Drug List Updated

• June 2022 SURS Training Presentation

Who Ya Gonna Email?

Knowing the right Montana Healthcare Programs Support Services email address to send a request may affect how quickly your request is addressed. Below are Support Services email addresses and a description of the types of questions to send.

Provider Relations Helpdesk <u>MTPRHelpdesk@conduent.com</u> For general questions regarding:

- Address change
- EDI information and research requests
- Provider Services Portal
- Remit copy requests

Provider Enrollment MTEnrollment@conduent.com

For questions regarding:

- Status of a provider enrollment
- How to make a change to an enrollment
- What information to put in a field on an enrollment record

Third Party Liability MTTPL@conduent.com.

For questions regarding:

- Medicaid Member third-party insurance updates
- Claims information (Include dates of service and, if known, the claim number (ICN))
- Payment sent to Medicaid (Include check number and amount)

Using an encrypted or secure option of communication is not allowed for these email addresses. Any encrypted of secured emails will be rejected.

Submitted by Jenne Caudle MPATH Project Manager DPHHS

Thank you for the care and support of Montana Healthcare Programs members that you provide.

Your work is appreciated!

Key Contacts

Montana Healthcare Programs

Provider Relations

General Email: MTPRHelpdesk@conduent.com

P.O. Box 4936 Helena, MT 59604 (800) 624-3958 In/Out of state (406) 442-1837 Helena (406) 442-4402 or (888) 772-2341

Provider Enrollment

Enrollment Email: MTEnrollment@conduent.com P.O. Box 89 Great Falls, MT 59403

Conduent EDI Solutions

https://edisolutionsmmis.portal.conduent.com/gcro/

Third Party Liability

Email: MTTPL@conduent.com P.O. Box 5838 Helena, MT 59604 (800) 624-3958 In/Out of state (406) 443-1365 Helena (406) 442-0357 Fax

Claims Processing

P.O. Box 8000 Helena, MT 59604

EFT and ERA

Attach completed form online to your updated enrollment or mail completed form to Provider Services.

P.O. Box 89 Great Falls, MT 59403

Verify Member Eligibility FaxBack (800) 714-0075 Voice Response (800) 714-0060

Pharmacy POS Help Desk (800) 365-4944

Passport

(406) 457-9542

PERM Contact Information

Email: HeatherSmith@mt.gov (406) 444-4171

Prior Authorization

OOS Acute & Behavioral Health Hospital, Transplant, Rehab, PDN, DMEPOS/Medical, & Behavioral Health Reviews (406) 443-0320 (Helena) or (800) 219-7035 (Toll-Free)