

Claim Jumper

Montana Healthcare Programs Claim Jumper

May 2022 Volume XXXVII, Issue 5

In This Issue

Provider Services
Portal News

PERM

Top 15 Denial Reasons

Recent Website Posts

Upcoming Training

FQHC and RHC May 19, 2022

SURS June 16, 2022

Billing 101 July 16, 2022

Register Now

Provider Services Portal News

Changes Requiring a Technical Service Ticket

Many changes previously requiring Provider Services staff involvement can now be done by the Provider or Provider Designee, including changes to licensure, address, telephone numbers, banking, and contact information, and more.

However, there are changes that **do** require technical staff, including:

- Tax ID changes (during re-enrollment)
- Updating the Legal Name of an organization (for providers enrolled prior to 12/13/2021)
- Ownership percentage changes (for organization/group enrollments only)
- Changing current enrollment from a pay-to provider to a rendering Provider or vice versa.

These types of changes tend to take additional processing time. Providers can email MTEnrollment@conduent.com for questions related to enrollment, MTPRHelpdesk@conduent.com for maintenance inquiries or call (800) 624-3958. Ask your Conduent representative for the Technical Helpdesk ticket associated with your request.

Provider Revalidation

Providers have had many questions about revalidation. The most common questions are answered below.

What is revalidation?

Revalidation is intended to "refresh" or "update" your information on record with Montana Healthcare Programs.

Why do I have to revalidate my information?

To comply with the Patient Protection and Affordable Care Act, Section 6401(a) and 42 CFR 455.414, Montana Healthcare Programs now requires all actively enrolled providers and suppliers to revalidate the enrollment information on file every 3 to 5 years, depending on provider type and risk level.

Continued on page 4.

Payment Error Rate Measurement (PERM)

The PERM program measures improper payments in Medicaid and CHIP and produces error rates for each program. The error rates are based on reviews of the fee-for-service (FFS), managed care, and eligibility components of Medicaid and CHIP in the fiscal year (FY) under review. It is important to note the error rate is not a fraud rate but simply a measurement of payments made that did not meet statutory, regulatory, or administrative requirements.

The Reporting Year (RY) 2021 PERM cycle, which looked at SFY 2020 claims, wrapped up and results have been posted. The most common errors identified were:

- Provider records did not support the number of units billed.
- Provider records did not contain provider's signature.
- Provider documentation did not support the claim.

The RY 2024 PERM cycle will be kicking off in the coming months. Information will be shared as it becomes available. You may visit the CMS website, https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Improper-Payment-Measurement-Programs/PERM, for more information on the PERM program.

Providers – DPHHS thanks you for your responses to the PERM program and for the wonderful work you do!

Submitted by Becky Yancy PERM Program Support Office of Inspector General

Top 15 Claim Denials

Claim Denial Reason	March 2022	February 2022
MISSING/INVALID INFORMATION	1	1
RATE TIMES DAYS NOT = CHARGE	2	4
PA MISSING OR INVALID	3	2
EXACT DUPLICATE	4	3
PROC. CODE NOT COVERED	5	5
RECIPIENT COVERED BY PART B	6	7
PROVIDER TYPE/PROCEDURE MISMATCH	7	10
PROVIDER SPECIALTY/PROC MISMATCH	8	6
PROCEDURE/AGE MISMATCH	9	19
RECIPIENT NOT ELIGIBLE DOS	10	9
PROC. CODE NOT ALLOWED	11	8
CLAIM INDICATES TPL	12	12
REVENUE CODE NOT COVERED	13	20
DEPRIVATION CODE RESTRICTED	14	13
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	15	17

Recent Website Posts

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

PROVIDE Date Posted	ER NOTICES Provider Types	Provider Notice Title
03/22/2022	Optometric	Billing Update for Bandage Contact Lenses
03/29/2022	All Providers	Nurse First Advice Line Services Ending
04/01/2022	Inpatient Hospital	Billing Instructions for Split Eligibility Coverage
04/05/2022	Chemical Dependency	Resumption of Prior Authorizations and Continued Stay Reviews for SUD Clinically Managed High Intensity Residential Treatment (ASAM 3.5)

FEE SCHEDULES

January 2021

January 2021 School-Based Services Fee Schedule Revised

July 2021

July 2021 School-Based Services Fee Schedule Revised

January 2022

January 2022 Optometric Fee Schedule Revised

January 2022 OPPS Fee Schedule Revised

January 2022 IHS Fee Schedule

January 2022 Laboratory Services Fee Schedule Revised

April 2022

Proposed April 2022 DME Fee Schedule

ADDITIONAL DOCUMENTS POSTED

- CMP Application Instruction and Information Revised
- April 2022 DURB Meeting Agenda
- School-Based Services Manual updated
- March 2022 DURB Meeting Minutes
- Passport Manual Updated

- Quarterly Rebateable Manufacturers Updated
- Tribal Health Improvement Program Manual Updated
- Presumptive Eligibility Income Calculation Tool
- Electronic Funds Transfer (EFT) Authorization Agreement Updated

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

Your work is appreciated!

Provider Services Portal News

Continued from page 1

When can I revalidate?

On December 13, 2021, Montana Healthcare Programs began sending revalidation notices to providers who were due for provider revalidation. The letters specify a due date. Montana Healthcare Programs is extending the required revalidation date for any provider who has received a revalidation notice. This extension is primarily due to a known system issue that is creating challenges for some providers when trying to revalidate. Providers should not attempt to revalidate their provider information at this time. Notices will be posted when the online revalidation feature is working properly.

Providers will be given a minimum of 90 days to complete revalidation activities once notification has occurred.

When to Access the MPATH Provider Services Portal

As additional features become available on the MPATH Provider Services Portal, knowing which portal to access for a given situation may not always be clear.

The table below simplifies when to access the MPATH Provider Services Portal and when to access the MATH Portal:

MPATH Provider Services Portal	MATH Portal
Account Administration (Manage	Manage users
Users)	
Bulk HIPAA Transactions	Upload HIPAA transactions
Create claim templates	
Find a Provider	
Inquire on claim status	Member eligibility inquiry
Member search (claim inquiry only;	
eligibility inquiry navigates user to	
the MATH Portal)	
Provider enrollment (document	
upload)	
Provider file maintenance and	
updates (document upload)	
Provider profile	
Submit original claims and claim	
adjustments	
View Correspondence History	
View/Download Remittance Advice	View or download remittance
and Payment information	advice or provider payment
	summary or view e!SOR

Submitted by Shellie McCann Medicaid Systems Operations Manager DPHHS

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 Fax

Provider Enrollment

Enrollment Email: MTEnrollment@conduent.com

P.O. Box 89 Great Falls, MT 59403

Conduent EDI Solutions

https://edisolutionsmmis.portal.condu ent. 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 or Voice Response (800) 714-0060

POS Help Desk for Pharmacy (800) 365-4944

Passport (406) 457-9542

PERM Contact Information

Becky Yancy Email: Rebecca.Yancy@mt.gov (406) 444-9365

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)