



# Montana Medicaid

# CLAIM JUMPER

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## Benefits of Electronic Billing

ACS has always encouraged providers to bill electronically. Recently ACS has been promoting electronic billing through our "Paperless Partnership" campaign. Electronic billing is often quicker and cheaper than paper claims, saving both time and money for your office.

Electronically billed claims have a quicker turnaround time than paper claims. While paper claims can take 4-6 weeks for you to see the claim processed and showing on a remittance advice, electronic claims can take as little as a few days for processing. Clean, payable claims received by 1 p.m. on Wednesday of cycle weeks can, and do, process on that day and pay the following Monday. Claims received by 1pm on Monday of that week give you the opportunity to correct any errors found

in pre-process, and still allow time for the claim to process and pay by Wednesday night cycle.

Electronic billing can be free. Medicaid never charges a fee for electronic billing. Unlike paper claims where you have to pay for the paper, ink, and stamps, electronic billing software is available free of charge from ACS. This software is HIPAA compliant, and is available to all Medicaid providers. Even the technical support for this particular software is free. Simply call Provider Relations and ask for a free copy of WinASAP 2003.

If you haven't considered billing electronically before, call Provider Relations to talk more about the benefits of electronic billing.

*Submitted by ACS*

## Attachments: One Time Form Filing

Did you know these forms don't have to be filed at the same time as claims? Sterilization Consent forms (MA-38), Hysterectomy Acknowledgment forms (MA-039), Abortion Certification forms (MA-037) and Retroactive Medicaid Eligibility approvals (FA-455) can be sent to ACS one time prior to filing claims that require this paperwork. In addition these forms are stored by client for retrieval by multiple providers. This means if a physician submits an appropriately completed consent form and submits that form to ACS when an anesthesiologist submits a claim, it will be available for their use also.

Please take the following steps when sending these forms to ACS:

1. Ensure the form is completed appropriately.
2. Fill out a paperwork attachment cover sheet, making sure the client ID is present. The form is available on [mtmedicaid.org](http://mtmedicaid.org).
3. Mail the completed form and coversheet to

ACS  
ATTN: PAPERWORK ATTACHMENTS  
PO Box 8000  
Helena, MT 59604

4. Submit your claims to ACS. Please be sure to set the 'Paperwork Indicator' on electronic claims.

*Submitted by ACS*

## Rates for Psychiatrists

The recent session of the Montana State legislature passed legislation which increases the fees for psychiatrists from 125% to 150% of the physician's fee effective July 1, 2005. Because the rate paid to psychiatrists is not date sensitive (i.e. we can not change the rate as of a specific date), Medicaid will continue to pay psychiatrists 125% of the physician's rate until October 1, 2005. At that time the percentage will be changed to 150% and retroactive adjustments will be made for dates of services on or after July 1, 2005.

If you have any questions regarding this policy, please contact Charlie Williams at (406) 444-1955 or email him at [chwilliams@mt.gov](mailto:chwilliams@mt.gov).

*Submitted by Charles Williams, DPHHS*

## Medicare Part D Plans to be Named Soon

In just a few days, Medicare will release the names of prescription drug plans approved to participate in the new Medicare Part D prescription drug program. Starting Nov. 15, 2005, people with Medicare can choose a Medicare-approved prescription drug plan from several plans that will be available in Montana.

Recent research by the Kaiser Family Foundation reveals that 68 percent of people with Medicare said they will look to their doctors or pharmacists for information about the new Medicare prescription drug benefit. DPHHS and ACS want to help providers and their staff become more familiar with the new benefit.

Medicare recently developed a "Toolkit for Healthcare Professionals" that can be accessed at <http://www.cms.hhs.gov/medlearn/drugcoverage.asp>. The toolkit includes fact sheets, brochures, articles, and other resources designed for office staff, social workers, financial counselors, and health professionals to help make the transition to Medicare Part D as smooth as possible for patients.

For people with both Medicaid and Medicare (full benefit dual eligible individuals), there are three important facts to remember:

- They will be assigned to a plan during October 2005 and may change plans at any time.
- They will have no premiums, deductibles, or coinsurance for the Medicare Part D drug benefit.
- Their copayments for a prescription drug will be between \$1 and \$5, depending on the individual's income and type of drug. People with Medicaid and Medicare in institutions will have no copayments.

Healthcare professionals who need more information on Medicare Part D, especially how dual eligible individuals will be affected, can contact

Mary Noel at the Department of Public Health and Human Services, [manoel@mt.gov](mailto:manoel@mt.gov) or 444-2584.

*Submitted by Mary Noel, DPHHS*

## Montana Access to Health Web Portal

If you have been on the Medicaid website recently, you may have noticed some changes. There is a new option titled Provider Services. Starting September 2005, providers will be able to select this option and go to the new Montana Access to Health web portal.

The Montana Access to Health web portal will be implemented in three phases. Phase one will be completed in September 2005 and will allow providers the ability to check eligibility, look at provider summary information, view claim status and exchange all HIPAA compliant X12 transactions. Phase two will be implemented in November 2005 and will give providers the ability to print remittance advices and view medical claims history. Phase three will give new providers the ability to enroll in Medicaid, CHIP, and PASSPORT online.

All Montana Medicaid providers will automatically be enrolled to have access to the new Montana Access to Health web portal. Welcome packets with login information and instructions will be mailed to providers the last week of August. Additionally, providers will be able to access an online tutorial from the Montana Medicaid website that will walk through the process of validating enrollment and using the new functionality.

ACS will be conducting 8-10 training sessions at various locations around the state to educate providers on how to use the new Montana Access to Health web portal. ACS will be mailing out welcome packets that will include locations, dates and times for these training sessions.

*Submitted by ACS*

## Vaccines for Children

There has been a change in Vaccines for Children (VFC). The VFC codes as of dates of service July 1, 2005 and after are:

90633, 90645, 90647, 90648, 90655, 90656, 90657, 90658, 90669, 90700, 90707, 90713, 90714, 90716, 90718, 90723, 90732, 90743, 90744, and 90748.

The reimbursement for dates of service July 1, 2005 and after has increased to \$14.13 per VFC vaccine administration. The reimbursement for dates of service before July 1, 2005 is \$9.50 per VFC vaccine administration.

As a reminder -- for Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) only: VFC vaccines can be administered at RHCs and FQHCs. However, they generally are not billable visits because a core provider is not the health care professional administering the vaccine. VFC costs are calculated into your all-inclusive prospective payment rate.

*Submitted by Doug Girard, DPPHS*

## Pharmacy Providers

If you are presented with a Medicaid letter of authorization/eligibility indicating a client is eligible for Medicaid services, you can accept it as eligibility even if the claim will not process through the POS system. You can fill the prescription and submit it for payment the following day. If you do not want to dispense based solely on the letter of authorization you can call ACS at 1-800-624-3958 to get the client eligibility added into the system. ACS will verify the client eligibility and add the client into the system allowing the claim to be processed through the POS system the same day. If you have any questions with regard to this policy, call ACS and we will be happy to address any concerns you may have.

*Submitted by ACS*

## 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 at [www.mt-medicaid.org](http://www.mt-medicaid.org). 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 (800) 624-3958 or (406) 442-1837 in Helena or out-of-state.

<b>Recent Publications Available on Website</b>		
<b>Date</b>	<b>Provider Type</b>	<b>Description</b>
<b>Notices</b>		
07/14/05	Physicians, Mid-level Practitioners, RHCs, FQHCs, Hospital Inpatient, Hospital Outpatient, Indian Health Services	VFC Update
07/15/05	Physicians, Mid-level Practitioners, RHCs, FQHCs, Hospital Inpatient, Hospital Outpatient, Indian Health Services	Revised Processing for ER Visits
07/19/05	Physicians, Mid-level Practitioners, RHCs, FQHCs, Hospital Inpatient, Hospital Outpatient, Indian Health Services	Revised Processing for ER Visits
07/26/05	HCBS - Private Duty Nursing	August Rate Increase
07/28/05	All Providers	Scales -- Congestive Heart Failure
07/28/05	Private Duty Nursing	Reimbursement Rate Increase
<b>Fee Schedules</b>		
07/15/05	HCBS	July Fee Schedule
07/15/05	Dental/Denturist	July Fee Schedule
07/26/05	HCBS	Corrected July 2005 Fee Schedule
07/26/05	HCBS	August Fee Schedule
07/29/05	Lab and X-Ray	New July Fee Schedule
07/29/05	Mid--Level Practitioners	New July Fee Schedule
07/29/05	Physicians	New July Fee Schedule
07/29/05	Podiatrists	New July Fee Schedule
07/29/05	Public Health Clinic	New July Fee Schedule
07/29/05	Independent Diagnostic Testing Facility	New July Fee Schedule
07/29/05	Occupational Therapy	New July Fee Schedule
07/29/05	Optometric, Optician, Eyeglasses	New July Fee Schedule
07/29/05	Speech Therapy	New July Fee Schedule
07/29/05	Schools	New July Fee Schedule
07/29/05	Physical Therapy	New July Fee Schedule
<b>Other Resources</b>		
07/14/05	All Provider Types	Added Health Disclosure Authorization
07/11/05	PASSPORT to Health	Link to Billings Gazette News Article re: PASSPORT
07/15/05	All Provider Types	Updated FY05 Statistics
07/15/05	All Provider Types	Added Medicare Part D News
07/15/05	All Provider Types	Updated August Claim Jumper
07/15/05	Pharmacy	Updated PDL
07/19/05	School Based Services	Added CSCT Workgroup meeting minutes for March and April
07/26/05	Pharmacy	Updated PDL
07/26/05	All Provider Types	Updated Enrollment Form
07/26/05	All Provider Types	Updated Electronic RA Form

Montana Medicaid  
ACS  
P.O. Box 8000  
Helena, MT 59604

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## Key Contacts

Provider Information website: <http://www.mtmedicaid.org>

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

ACS EDI Help Desk (800) 624-3958

### Provider Relations

(800) 624-3958 (In and out-of-state)

(406) 442-1837 (Helena)

(406) 442-4402 Fax

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

Automated Voice Response (AVR) (800) 714-0060

Point-of-sale Help Desk for Pharmacy Claims (800) 365-4944

PASSPORT (800) 624-3958

### Prior Authorization

DMEPOS (406) 444-0190

Mountain-Pacific Quality Health Foundation (800) 262-1545

First Health (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