

# Montana Health Care Programs

# CLAIM JUMPER

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## 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 Medicaid [website](#).

## Montana i-Home

Montana Medicaid's State Plan Amendment under the 1915(i) Home- and Community-Based Services (HCBS) program is called Montana i-Home

The program provides specific service for qualifying youth with Serious Emotional Disturbance (SED) the opportunity to receive Medicaid reimbursed services while living in their community.

For more information about the program, see the provider notice and fee schedule on the [HCBS](#) page of the Montana Medicaid website.

*Submitted by Jane Bernard, DPHHS*

## BRCA1 and BRCA2 Testing

BRCA1 and BRCA2 testing are clinical diagnostic tests for hereditary breast and ovarian cancer.

These tests consist of DNA sequencing and testing for mutated forms of two genes known as BRCA1 and BRCA2. These tests will help predict the patient's future risk of cancer. Effective January 1, 2013, the Department will cover these tests.

Procedure codes associated with these services are 83891, 83898, 83904, 83909, 83912, and 88386. Providers are required to obtain prior authorization from Mountain-Pacific Quality Health (MPQH). Claims that have been prior authorized must be sent to the Department.

Criteria to be used are CMS Local Coverage Determination for Genetic Testing (L24308). The [document](#) is available on the CMS website.

Contact MPQH to request prior authorization.

Mountain-Pacific Quality Health  
3404 Cooney Drive  
Helena, MT 59602

(877) 443-4020 X 5887 (toll-free)  
(406) 457-5887 (local/out of state)  
(877) 443-2580 (fax)

Send claims to:

Montana DPHHS/HRD/MCB/  
Physician Program  
1400 Broadway  
P.O. Box 202951  
Helena, MT 59620-2951

*Submitted by Bob Wallace, DPHHS*

## Medicaid/HMK *Plus* Toll-Free Number

As the Department of Public Health and Human Services (DPHHS) continues to implement a new Medicaid/HMK *Plus* eligibility system, a toll-free telephone line has been instituted to assist members whose Medicaid/HMK *Plus* benefits are impacted.

Please provide this telephone number, 1-855-415-5558, to affected members to help DPHHS provide better service. When calling, leave a message that includes:

- First and last name (include spelling)
- Best telephone number at which to reach you
- Case number or Social Security number
- Date of birth
- How DPHHS can help

*Submitted by Mary Noel, DPHHS*

## Home Oxygen Therapy for Clients Residing in SNFs

This notice clarifies Montana Medicaid Durable Medical Equipment program policy regarding home oxygen therapy for clients residing in skilled nursing facilities (SNFs).

In accordance with the Administrative Rules of Montana (ARM) 37.86.1802, Montana Medicaid has adopted Medicare coverage criteria for Medicare covered durable medical equipment as outlined in the Region D Supplier Manual, local coverage determinations (LCDs), and national coverage determinations (NCDs). For prosthetic devices, durable medical equipment, and medical supplies not

covered by Medicare, coverage will be determined by the Department.

The Department will follow criteria set forth in the LCD for Oxygen and Oxygen Equipment (L11457) for clients residing in a skilled nursing facility.

The only exception is that the Department will allow oximetry tests ordered

by a physician and performed by qualified nursing personnel at the skilled nursing facility as an acceptable blood gas study.

In order to be reimbursed for this service, DME providers shall follow all other criteria set forth in LCD (L11457), available on the Noridian® website, <https://www.noridianmedicare.com/dme/coverage/lcd.html>.

The Department will back date this coverage policy 365 days from the date of this notice to comply with the Department’s timely filing rules.

If you have questions regarding this notice, contact Donna Liedle at (406) 444-5296.

*Submitted by Donna Liedle, DPHHS*

## Nurse First Services and Usage

All Montana Medicaid, Healthy Montana Kids, and Healthy Montana Kids *Plus* patients are eligible for the Nurse First Advice Line. They can call 1-800-330-7847 at any time to speak with a registered nurse. It’s free and confidential. During September and October, callers’ most frequent questions were pediatric related.

Nurse First also offers a free Healthwise® website. Patients may go to [www.dphhs.mt.gov/programsservices/medicaid.shtml](http://www.dphhs.mt.gov/programsservices/medicaid.shtml), and click on *Montana Health and Wellness Information*. During September and October, the most sought-after information was regarding immunizations and malocclusion and orthodontics.

*Submitted by Kriss Hensley, DPHHS*

<b>Nurse First Calls</b>			
The top five Nurse First call topics are in the table below.			
<b>October 2012 (672 total calls)</b>		<b>September 2012 (686 total calls)</b>	
<b>Calls</b>	<b>Type of Call</b>	<b>Calls</b>	<b>Type of Call</b>
21	Colds (Pediatric)	23	Colds (Pediatric)
20	Information Only Call (Adult)	11	Information Only Call (Adult)
19	Vomiting without Diarrhea (Pediatric)	11	Vomiting without Diarrhea (Pediatric)
12	Cough (Pediatric)	10	Medication Question Call (Adult)
12	Fever – 3 Months of Older (Pediatric)	10	Trauma, Head (Pediatric)

<b>Visits to Healthwise® Website</b>			
The top five topics visitors were interested in are in the table below.			
<b>October 2012 (92 website visits)</b>		<b>September 2012 (96 website visits)</b>	
<b>Visit</b>	<b>Type of Call</b>	<b>Visit</b>	<b>Type of Call</b>
7	Malocclusion and Orthodontics	16	Immunizations
6	Healthy Eating for Children	10	Attention Deficit Hyperactivity Disorder (ADHD)
5	Testosterone	9	Interactive Tools
5	Children’s Health	6	Bipolar Disorder
4	Smart Decisions: Know Your Options	5	Interactive Tool: Are You Depressed

## 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](#).

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.

<b>Recent Publications Available on Website</b>		
<b>Date</b>	<b>Provider Type</b>	<b>Description</b>
<b>Provider Notices, Manuals, and Replacement Pages</b>		
12.26.2012	All Providers	Medicaid/Healthy Montana Kids (HMK) Plus Toll-Free Number
12.26.2012	Physician, Hospital Inpatient, Hospital Outpatient, RHC, FQHC, and Public Health Clinic	BRCA1 and BRCA2 Testing
12.26.2012	DME and Skilled Nursing Facility	Home Oxygen Therapy for Clients Residing in Skilled Nursing Facility
12.20.2012	Pharmacy, Physician, and Mid-Level Practitioner	Provider Notice Prior Authorization Requirements for Namenda®, Natroba®, Sklice®, Rayos DR®, and Sorilux®
12.17.2012	Physician, Mid-Level Practitioner, Outpatient Hospital, RHC, FQHC, Public Health Clinic, Dentist, Dental Hygienist, Licensed Psychologist, Licensed Clinical Social Worker, and Licensed Professional Counselor	Provider Notice American Medical Association Adopts New Psychiatric Diagnostic and Psychological Codes
12.03.2012	HCBS	Bridge Waiver for Youth with Serious Emotional Disturbance manual
12.04.2012	FQHC and RHC	Provider Notice: Payment Rate Increases for Calendar Year 2013 (Effective January 1, 2013)
<b>Fee Schedules</b>		
12.28.2012	Hospital Outpatient	OPPS Fee Schedule, October 1, 2012 (revised)
12.06.2012	Freestanding Dialysis	Dialysis Fee Schedule, October 1, 2011
<b>Other Resources</b>		
12.07.2012	Pharmacy	Montana SMAC Update, December 7, 2012

## Integrated Voice Response

Using the Integrated Voice Response (IVR) can be a timesaver for providers. Below are tips for providers to improve their call-in experience.

- When asked for the billing number, enter your NPI/API. This allows the Custom Care representative to pull up the information before they answer the call.
- Call the correct line (EDI, Claims, or Eligibility) to ensure you get the right person helping you the first time.
- Have necessary information such as ICN or client ID, the date of service, and the charge amount on hand before you call.
- Have pen and paper on hand to note information provided to you during the call.

## Spring 2013 Provider Training

See the Provider Information page of the website for the spring provider training [survey](#). This is your opportunity to assist with program development for the spring sessions!

To view the agenda or register for sessions, see the [Training page](#) of the website.

### Top 15 Claim Denial Reasons

Exception	December Ranking	November Ranking
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	2
RATE TIMES DAYS NOT = CHARGE	3	3
DRUG CONTROL CODE = 2 (DENY)	4	4
REFILL TOO SOON PDCS	5	6
REFILL TOO SOON	6	7
PA MISSING OR INVALID	7	5
PASSPORT PROVIDER NO. MISSING	8	8
REV. CODE INVALID FOR PROV. TYPE	9	12
CLAIM INDICATES TPL	10	9
DEPRIVATION CODE RESTRICTED	11	11
RECIPIENT COVERED BY PART B	12	10
MISSING OR INVALID INFORMATION	13	22
SLMB OR QI-1 ELIGIBILITY ONLY	14	14
PROC. FACT. CODE=4 (NOT ALLOW)	15	19

### Key Contacts

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

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

EDI Help Desk (800) 624-3958

**Provider Relations** (800) 624-3958 (In/Out of State)  
 (406) 442-1837 (Helena)  
 (406) 442-4402 Fax  
 E-Mail: [MTPRHelpdesk@xerox.com](mailto:MTPRHelpdesk@xerox.com)

**Third Party Liability** (800) 624-3958 (In/Out of State)  
 (406) 443-1365 (Helena)  
 (406) 442-0357 Fax

**Direct Deposit Arrangements** (406) 444-5283

**Verify Client Eligibility**  
 FaxBack (800) 714-0075

**Integrated Voice Response** (800) 714-0060

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

**Passport** (800) 362-8312

**Prior Authorization**

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

**Mountain-Pacific Quality Health – DMEPOS/Medical**

(406) 457-5887 Local; (877) 443-4021, Ext. 5887 Long distance

**Magellan Medicaid Administration (dba 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

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