

Montana Health Care Programs

CLAIM JUMPER

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In This Issue

Publications Reminder	1
New Services for HMK.....	1
Register Now for Spring 2013 Provider Training!	1
Psychotherapy Add-On Codes	1
Is URGENT Patient Information Getting to You?.....	2
Recent Publications Available on the Website.....	2
Primary Care Enhanced Payment Program	3
Top 15 Claim Denial Reasons	4

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 Montana Medicaid [website](#).

Nurse First

How does Nurse First impact your practice? See [page 2](#) for details!

New Services for HMK

The Healthy Montana Kids (HMK) program recently added benefits. Chiropractic services and durable medical equipment are covered, effective January 1, 2013.

Cochlear implants, home health services, hospice services, nutrition services for diabetes and obesity, transplants (organ and tissue), medical transportation, and per diem services are covered effective October 1, 2012. All services must be medically necessary.

The following services must be prior authorized:

- Cochlear implants
- Transportation
- Per diem
- Durable medical equipment and supplies costing over \$500
- Home health
- Hospice
- Transplants

Claims for these services must be submitted to Blue Cross and Blue Shield of Montana, P.O. Box 7982, Helena MT 59604.

BCBSMT can be contacted at 1-800-447-7828. Details about the services HMK covers can be found in the “HMK Evidence of Coverage” found on the HMK website, www.hmk.mt.gov.

Submitted by Elizabeth LeLacheur, DPHHS

Register Now for Spring 2013 Provider Training!

Trainings are being held in:

- Billings, Hilton Garden Inn, May 15, 2013
- Great Falls, Hilton Garden Inn, May 22, 2013
- Helena, Best Western Premier Great Northern, May 29, 2013

Spring WebEx Trainings

The State, in conjunction with Xerox will be offering WebEx training sessions. All sessions are at 9 a.m. Click the link below to register for that program session.

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

Psychotherapy Add-On Codes

Effective January 1, 2013, codes for psychotherapy with medical evaluation and management (E/M) services were replaced with psychotherapy add-on codes 90833, 90836 and 90838.

These services are to be reported in conjunction with a primary E/M; the 2013 CPT® instructional notes under the psychotherapy add-on codes define the E/M codes that need to be billed.

Psychotherapy codes billed without a CPT defined E/M code may be denied; not all CPT defined E/M codes are payable for Montana Health Care Programs. Review the fee schedules for your provider type.

For more information, see the February 11, 2013 provider notice. If you have questions, contact Marcia Armstrong at (406) 444-2878 or Laura Taffs at (406) 444-3814.

Is URGENT Patient Information Getting to You?

During February, you should have received a telephone call from Montana Medicaid and Healthy Montana Kids (HMK) requesting updated contact information for your office.

It is vital that they have accurate information in order to best serve your patients and provide you with pertinent patient follow-up information.



One of the services provided for Montana Medicaid members is the Nurse First nurse advice line. Callers can speak with a nurse 24/7/365 and make inquiries about a health concern or questions, such as “My child has a fever; do I need to take him to see a doctor?” “I’m pregnant and having stomach pains; how long should I wait before I see a doctor?”

Nurse First RNs consult with patients by triaging their symptoms as presented, following nationally recognized Barton Schmitt/ David Thompson Guidelines. This results in dispositions that range from home health care, to referring patients to their Passport Provider, to directing patients to the emergency room for extreme cases.

RNs ultimately supplement your patient care by referring your patients to schedule a visit to see you within a designated time frame. The chart below shows how many patients were directed to see their Passport Provider during December 2012. The acuity codes listed below follow the Barton Schmidt/David Thompson Guidelines.

Disposition Summary for Montana Medicaid Recipients December 2012		
Final Disposition	Referrals	Acuity
Call PCP Now	6	78
Call PCP within 24 Hours	3	65
See PCP within 3 Days	48	50
See PCP within 2 Weeks	5	20
See Physician within 24 Hours	62	70
See Physician When Office Is Open	5	48
See Physician in 4 Hours (or PCP Triage)	31	80
Go to Emergency Department Now (or PCP Triage)	60	85
TOTAL CALLS	220	

If your office was not contacted, please call 1-888-869-7773. They will be happy to record your updated information.

Submitted by Teresa Kelley, Centene Corporation

Recent Publications Available on the Website

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.

Date	Provider Type	Description
Provider Notices, Manuals, and Replacement Pages		
02.06.2013	Pharmacy	Replacement Pages: Medicaid Covered Products
02.04.2013	Audiology and Hearing Aid	Replacement Pages: Covered Services
01.28.2013	Hospital Inpatient, Hospital Outpatient, and Public Health Clinics	Participating Providers: Prevention of Diabetes and Cardiovascular Disease
01.14.2013	Home- and Community-Based Services	Provider Notice: New Program, Montana i-Home, State Plan Amendment for Youth with Serious Emotional Disturbance (SED)
01.14.2013	Dentist, Dental Hygienist, and Denturist	Changes to Coverage of Procedure Codes D1203, D1204, and D1208

Recent Publications Available on the Website, cont'd		
Date	Provider Type	Description
Fee Schedules		
02.07.2013	Hospital Outpatient	Outpatient Procedure Codes, October 2012 (Revised)
02.01.2013	Hospital Outpatient, Podiatrist, Physician, Lab and Imaging, Mid-Level Practitioner, IDTF	ATP Tests and Fees
01.31.2013	Ambulatory Surgical Center	January 2013 ASC
01.31.2013	Physician	January 2013 Physician
01.31.2013	Mid-Level	January 2013 Mid-Level
01.31.2013	IDTF	January 2013 IDTF
01.31.2013	Podiatry	January 2013 Podiatry
01.31.2013	Lab and Imaging	January 2013 Lab and Imaging
01.31.2013	Family Planning	January 2013 Family Planning
01.30.2013	IHS	January 2013 IHS
01.30.2013	Oral Surgeon	January 2013 Oral Surgeon
01.30.2013	EPSDT	January 2013 EPSDT
01.21.2013	Ambulance	Ambulance
01.21.2013	Dentist/Dental Hygienist	Dental/Dental Hygienist
01.21.2013	EPSDT	Respiratory
01.18.2013	Mental Health Centers, Psychologist, Psychiatrist, and PRTF	72-Hour Presumptive Eligibility, Mental Health Adult, MHSP Adult
01.18.2013	Schools	School-Based Services Fee Schedule
01.15.2013	DME	DME
01.15.2013	Audiologist	Audiology
01.15.2013	Hearing Aid	Hearing Aid Fee Schedule
Other Resources		
02.07.2013 02.04.2013 01.18.2013 01.08.2013	Pharmacy	Montana SMAC Update, February 7, 2013 Montana SMAC Update, February 4, 2013 Montana SMAC Update, January 18, 2013 Montana SMAC Update, January 8, 2013
01.09.2013	Pharmacy DUR	DUR Meeting Minutes, January 23, 2013
01.04.2013	Hospital Outpatient, Podiatrist, ASC, Ambulance, Pharmacy, Physician, Family Planning, IDTF, 52 53, Lab and Imaging, Mid-Level Practitioner, Psychiatric, Social Worker, and Provider Information page	Rebateable Drug List

Primary Care Enhanced Payment Program

The Department of Public Health and Human Services will be participating in a program to enhance payments to primary care practitioners. The program is titled *Payment for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration* under the Vaccine for Children Program as defined in the Patient Protection and Affordable Care Act of 2010.

The program will be implemented in late March 2013 with claim adjustments retroactive to January 1, 2013. For more information, see the [Enhanced Payment page](#) on the Provider Information website.

Top 15 Claim Denial Reasons

Exception	January Ranking	December 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
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	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

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

[Return to page 1](#)