

# 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 Montana Medicaid [website](#).

### Attention Home Health Providers!

Beginning with October 1, 2013, dates of service, remember to use Type of Bill (TOB) series 32X, instead of 33X, on claims.

*Submitted by Sandy Karrick-Nelson, DPHHS*

## New CMS-1500 Form

Effective April 1, 2014, the 08/05 version of the CMS-1500 will be discontinued and only the 02/12 version will be accepted. If the 08/05 claim form is used after April 1, the claim will be returned to the provider.

If rebilling a claim after April 1, 2014, providers must use the 02/12 version even though the 08/05 version was used to bill the claim.

Although a sample CMS-1500 (02/12) is on the [Forms](#) page, claim forms must be ordered from an authorized vendor.

Please note the following when submitting the 02/12 version:

### • Box 10d – Claim Codes

This box is no longer scanned for the member ID. The Medicaid system scans Boxes 1a, 9a, and 11 for the member ID.

### • Box 17 – Name of Referring Provider or Other Source.

Continues to be accepted with the referring provider's name.

### • Box 17a – Passport Referral Number

This box remains the same: Passport to Health referral number.

### • Box 17b – IHS Referral Number

This box remains the same: Indian Health Services referral number.

### • Box 21 – Diagnosis or Nature of Illness or Injury

Decimal points are not allowed in Boxes A–L for diagnosis pointer.

Initially, the State will accept only 4 diagnosis codes when processing claims. Use only Boxes A–D.

Once ICD-10 is implemented, the State will begin accepting diagnosis codes A–L and the corresponding Diagnosis Code Pointers.

### • Box 29 Amount Paid

This box remains the same: Reserved for third party liability payments.

## Nursing Facility Services Bureau WebEx Trainings

The Nursing Facility Services Bureau will continue offering quarterly provider training via WebEx for Nursing Facility providers and staff.

The Bureau would like feedback on topics to include in these trainings.

Please contact Becky McAnally, Nursing Facility Services Program Officer, at [bmcanally@mt.gov](mailto:bmcanally@mt.gov) with your suggestions.

**Our next training is scheduled for May 7, 2014.** Additional information and an agenda will be sent to all Nursing Facility providers.

*Submitted by Becky McAnally, DPHHS*

## 2014 Spring Provider Fair

The fair will be held May 20–21, 2014, at the Helena Great Northern Hotel,

[Register online](#) no later than May 1. If registering after May 1, please call Provider Relations. Each participant must register individually. An e-mail confirmation of your registration will be sent to the e-mail address provided in during registration.

This training gives medical billers and providers an opportunity to learn more about Medicaid, Healthy Montana Kids (HMK)/CHIP, and Children's Mental Health Services policies and billing practices.

### Nurse First

The Nurse First light is on 24/7/365!  
See [page 2](#) for details!

Day 1 focuses on materials for all Montana Health Care Programs providers and billing entities.

Day 2 is valuable for providers and billers, with individualized sessions running throughout the day.

Presentations are scheduled on the following topics.

- Adult Mental Health
- Children's Mental Health
- Community Services Bureau
- Dental/Orthodontics
- EPSDT
- Health Improvement Program
- HMK/CHIP
- ICD-10
- Medicare/TPL
- Nurse First
- Nursing Facility Services
- Optometric
- Passport to Health
- Physician-Related Services
- Presumptive Eligibility
- School-Based Services
- SURS
- Team Care
- Website/Web Portal Assistance

If you have questions regarding the Spring Provider Fair, contact Provider Relations at 1-800-624-3958. Visit the [Training](#) page to register and for up-to-date information!

### **Billing Multiple Same-Day Visits on a UB-04 or 837I**

To better assist providers when billing multiple same-day visits on a UB-04 or 837I, Montana Health Care Programs will now allow Condition Code G0 on the claims. The G0 condition code is used to indicate multiple medical visits that occur on the same day in the same revenue center. The G0 condition code can be put in form locator fields 16–28.

For 837I X12 5010 transactions, this information is located in Loop 2300, Segment HI, Data Element BG. This information can be found in the TR3 manual for HIPAA X12 5010 837I transactions available from the Washington Publishing Company at [www.wpc-edi.com](http://www.wpc-edi.com).

Modifier 27 may also be used for hospital outpatient reporting purposes. Utilization of hospital resources related to separate and distinct E/M encounters performed in multiple outpatient hospital settings on the same date may be reported by adding Modifier 27 to each appropriate level outpatient and/or emergency department E/M code.

This modifier is used when reporting an E/M services provided by physicians in more than one outpatient hospital setting (e.g., hospital emergency department, clinic) and cannot be used for the reporting of E/M services performed by the same physician on the same date of service.

For those instances in which the same physician is being reported for all outpatient E/M services provided by the same physician on the same date and performed in multiple outpatient settings, refer to your UB-04 manual for proper coding.

Due to current limitations of the MMIS system, a claim could deny for exact duplicate even if a provider includes the G0 condition code.

For a claim to be an exact duplicate, the total billed charges, revenue codes, and Pay to NPI must be the same. Xerox will identify these claims on a monthly basis and automatically adjust them on the provider's behalf.

### **IMPORTANT Effective Immediately for All Providers Use the Medicaid Member ID**

Use the Medicaid member ID, **not** the member's Social Security number, for billing purposes and checking eligibility to ensure expenditures go to the correct member and query information is for the correct member. If you only have the member's SSN, have questions, or need assistance, contact Provider Relations at 1.800.624.3958.



### **OPEN! Nurse First Is Never Closed**

To say that we understand your business is an understatement. Nurse First is the statewide solution for your busy practice. Whether it's helping you meet state and federal requirements or working to improve continuity of care, Nurse First ensures that you never stop serving your patients.

Nurse First is there for your patients when you can't be because we know that providers need sleep too. We deliver our care exactly when your patients need it and report back to you via secure, HIPAA-compliant technology. That's how our experienced team seamlessly integrates our services with your business. Your patients benefit from year-round 24/7/365 access to:

- Competent, compassionate health care professionals who have the resources to instantly assess needs and provide actionable recommendations;
- An online audio library of health and wellness information that supports and empowers healthy decision making;
- Support for behavioral health crisis intervention; and
- The exceptional care they have come to expect from providers like you

Your organization benefits from:

- Peace of mind knowing that your patients are receiving exceptional care 24/7/365 from a URAC Accredited Health Call Center;
- Referral of symptomatic patients to the most appropriate source for routine, urgent, and emergency care;
- Instant reporting on our engagements with your patients, allowing for appropriate follow-up and continuity of care; and
- Outreach initiatives promoting self-care responsibility, the importance of prevention and early detection, and utilization of primary care providers.

The Nurse First Nurse Advice Line can be reached 24/7/365 at 1-800-330-7847.

*Submitted by Heather Racicot, DPHHS*

## 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.

<b>Date</b>	<b>Provider Type</b>	<b>Description</b>
<b>Provider Notices, Manuals, and Replacement Pages</b>		
02.28.2014	PPS Outpatient Hospitals	Medicaid Outpatient Laboratory Billing (Revised)
02.06.2014	Mental Health Center, LCSW, LCPC, and TFC	Interactive Audio and Video Mental Health Services for Licensed Psychologists, LCPCs, and LCSWs
<b>Fee Schedules</b>		
02.05.2014	Physicians and Mid-Levels	Enhanced Payment Fee Schedule, January 1, 2014
02.05.2014	Hearing Aid	Hearing Aid Fee Schedule, January 1, 2014
02.06.2014	Ambulance	Ambulance Fee Schedule, January 1, 2014
02.06.2014	EPSDT	EPSDT and EPSDt/Respiratory Fee Schedules, January 1, 2014
02.06.2014	Family Planning	Family Planning Fee Schedule, January 1, 2014
02.06.2014	IDTF	IDTF Fee Schedule, January 1, 2014
02.06.2014	Lab and X-Ray	Lab and X-Ray Fee Schedule, January 1, 2014
02.06.2014	Occupational Therapy	Occupational Therapy Fee Schedule, January 1, 2014
02.06.2014	Optician	Optician Fee Schedule, January 1, 2014
02.06.2014	Optometric	Optometric Fee Schedule, January 1, 2014
02.06.2014	Physical Therapy	Physical Therapy Fee Schedule, January 1, 2014
02.06.2014	Podiatry	Podiatry Fee Schedule, January 1, 2014
02.06.2014	Occupational Therapy	Occupational Therapy Fee Schedule, January 1, 2014
02.06.2014	Schools	School-Based Fee Schedule, January 1, 2014
02.06.2014	Speech Therapy	Speech Therapy Fee Schedule, January 1, 2014
02.07.2014	DMEPOS	DME Fee Schedule, January 1, 2014
02.07.2014	Hospice	Hospice Fee Schedule, January 1, 2014
02.25.2014	Mid-Level	Mid-Level Fee Schedule, January 1, 2014 (Revised)
02.25.2014	Physician	Physician Fee Schedule, January 1, 2014 (Revised)
02.21.2014	Hospital Outpatient	OPPS Fee Schedule and CLAB Fee Schedule, January 1, 2014
02.25.2014	Public Health Services	Public Health Clinic Fee Schedule, January 1, 2014 (Revised)
<b>Other Resources</b>		
02.07.2014 02.25.2014	Pharmacy	DUR Meeting Minutes, January 29, 2014 DUR Meeting Agenda, March 26, 2014
02.13.2014	All Providers	March 2014 <i>Claim Jumper</i>
02.07.2014	Pharmacy	Montana SMAC Update

<b>Top 15 Claim Denial Reasons</b>		
<b>Exception</b>	<b>February Ranking</b>	<b>January Ranking</b>
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	3
RATE TIMES DAYS NOT = CHARGE	3	2
PA MISSING OR INVALID	4	4
DRUG CONTROL CODE = 2 (DENY)	5	5
PASSPORT PROVIDER NO. MISSING	6	8
REFILL TOO SOON PDCS	7	6
REFILL TOO SOON	8	7
DEPRIVATION CODE RESTRICTED	9	9
SLMB OR QI-1 ELIGIBILITY ONLY	10	11
RECIPIENT COVERED BY PART B	11	10
MISSING OR INVALID INFORMATION	12	12
REV CODE INVALID FOR PROV TYPE	13	14
SUSPECT DUPLICATE	14	13
CLAIM INDICATES TPL	15	15

## Key Contacts

**Provider Information**

<http://medicaidprovider.hhs.mt.gov/>

**Xerox EDI Solutions (previously ACS EDI Gateway)**

<http://www.acs-gcro.com/gcro/>

**EDI Support Unit – Montana** 1-800-987-6719

**Provider Relations** 1-800-624-3958 (In/Out of State)

406.442-1837 (Helena)

406.442-4402 Fax

[MTPRHelpdesk@xerox.com](mailto:MTPRHelpdesk@xerox.com)

**Third Party Liability** 1-800-624-3958 (In/Out of State)

406-443-1365 (Helena)

406-442-0357 Fax

**Electronic Funds Transfer and Electronic Remittance Advices**

Fax completed documentation to Provider Relations, 406-442-4402.

**Verify Member Eligibility**

FaxBack 1-800-714-0075

Voice Response 1-800-714-0060

**Point-of-Sale Help Desk for Pharmacy Claims** 1-800-365-4944

**Passport** 1-800-362-8312

**Prior Authorization**

Mountain-Pacific Quality Health 1-800-262-1545

Mountain-Pacific Quality Health – DMEPOS/Medical

406-457-5887 Local; 877-443-4021, Ext. 5887 Long-Distance

Magellan Medicaid Administration (dba First Health) 1-800-770-3084

Transportation 1-800-292-7114

Prescriptions 1-800-395-7961

**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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