



Montana Health Care Programs

CLAIM JUMPER

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Publications Reminder

It is the providers' responsibility to be familiar with Medicaid manuals, fee schedules, notices for their provider type, and other information published in the *Claim Jumper* and on the Medicaid website (www.mtmedicaid.org).

Health Literacy

Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

The concept of health literacy differs from literacy itself. Health literacy requires basic reading skills, but also requires the ability to understand oral communication,

the ability to use numbers and math skills, the ability to navigate the health system on a basic level, and the ability to communicate with health care providers and staff. These skills are imperative for patients to be able to:

- Communicate health problems to their providers and understand health information
- Read prescription bottles and understand treatment regimens
- Read and understand warning labels to recognize potentially life-threatening complications from medications
- Implement self-care strategies and manage their health at home
- Read and understand health insurance forms, informed consent, and public assistance applications

The North Carolina Program on Health Literacy developed the Health Literacy Universal Precautions Toolkit specifically to assist health care providers in communicating more effectively with patients. Their website has a short video demonstrating some of the effects of low health literacy and also has several tools to help providers assess their practices, raise awareness, and work on specific areas to help patients succeed in the health care environment. See the video and toolkit at: <http://www.nchealthliteracy.org/toolkit/>.

Submitted by Mary Noel, DPHHS

Modifier for Evaluation and Management (E/M) Services

Per the Uniform Billing Editor, "The OCE requires that modifier 25 only be used on an E/M code when it is reported with a

procedure code that has a payment status indicator of "S" or "T." However, this edit does not preclude a provider from reporting this modifier with E/M codes that are assigned to a payment status indicator other than the "S" or "T" as long as the procedure meets the definition of "significant, separately identifiable E/M service." This modifier may be used only with E/M service codes within the following code ranges under OPPS: 92002–92014, 99201–99499, G0101, and G0175.

Surgical Pathology for Prostate Needle Biopsies Is Now Subject to CLIA Editing

The surgical pathology, gross microscopic examination for prostate needle saturation biopsy sampling codes (G0416, G0417, G0418 and G0419) are now subject to CLIA editing. To be paid for these services, providers must have a valid, current CLIA certificate of registration, certificate of compliance, or certificate of accreditation; providers with waiver or provider-performed microscopy CLIA certificates will not be paid for these tests.

NDC Requirement: Oral Fludarabine Phosphate, Code Q2025

Beginning July 1, 2010, Oral Fludarabine Phosphate (code Q2025) will require a National Drug Code (NDC) when billed to Montana Medicaid. For details on billing, refer to the Medicaid Provider website, provider notice Billing Procedures Regarding National Drug Code (NDC) for Providers Using the CMS-1500 and 837P, dated April 10, 2008.

Updates to Montana Medicaid’s Global Surgery Edit

The global surgical edit for the Montana Medicaid Claims processing system has been updated to include the items below. Other components of the edit were not changed and still apply.

- The tax IDs of the rendering providers and the tax IDs of the pay-to providers will be compared to determine if the current claim and any history claims belong to the same group practice. If either the rendering providers or the pay-to providers have the same tax ID, the providers are considered to be in the same group practice.
- The global surgery edit will not post on minor surgical procedures (0-day and 10-day) done the day before a major surgical procedure (90- day). However, a 90-day procedure done the day of or within the global period of the 10-day procedure that does not have an appropriate modifier will post the global surgery edit.
- Modifier 57 on an E/M service on the day of a minor (0-day or 10-day) procedure will not bypass the global procedure edit.
- No modifier is required for an E/M service done the day before a minor (0-day or 10-day) procedure.
- Only modifiers in the list below will bypass the global surgery edit when a 90-day procedure is billed the day before another 90-day procedure or during the post-operative period of a 10-day or 90-day procedure:
 - ◆ Modifier 58 – Staged or related procedure by the same physician during the post-operative period
 - ◆ Modifier 76 – Repeat procedure by same physician
 - ◆ Modifier 77 – Repeat procedure by different physician
 - ◆ Modifier 78 – Return to the operating room for a related procedure during the post-operative period
 - ◆ Modifier 79 – Unrelated procedure or service by the same physician during the post-operative period

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 April and May, callers’ most frequent questions were pediatric.

Nurse First also offers patients a free Healthwise® website: patients may go to www.medicaid.mt.gov and click on Montana Health and Wellness Information. Chronic pain was the most sought after information during April and May.

Submitted by Michael Huntly, DPHHS

Nurse First Calls			
The top five Nurse First call topics are in the table below:			
May 2010 (542 total calls)		April 2010 (505 total calls)	
Number of Calls	Type of Call	Number of Calls	Type of Call
23	Pediatric health information	17	Pediatric health information
17	Pediatric vomiting	16	Pediatric vomiting
13	Pediatric cough	14	Pediatric cough
10	Abdominal pain	12	Pediatric cold
10	Pediatric fever (greater than 3 months of age)	9	Chest pain

Visits to Healthwise® Website			
The top five topics visitors were interested in are in the table below:			
May 2010 (128 website visits)		April 2010 (163 website visits)	
Number of Visits	Topic of Interest	Number of Visits	Topic of Interest
26	Chronic pain	22	Chronic pain
11	Fibromyalgia	10	Attention deficit hyperactivity disorder
10	Mental and behavior issues	8	Symptom checking
9	Acne	7	Pregnancy
7	Symptom checking	6	Dental Care

Recent Publications

The following are brief summaries of recently published Medicaid information and updates. For details and further instructions, download the complete document from www.mtmedicaid.org, 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 (800) 624-3958 or (406) 442-1837 in Helena or out-of-state.

Recent Publications Available on Website		
Date	Provider Type	Description
Notices and Replacement Pages		
07/01/10	Home and Community Based Services	Elderly and Physically Disabled Home and Community Based Services Waiver
06/08/10	Nursing Facility	Appendix A of the Manual-Nurse Aide Certification/Training & Competency Evaluation (Testing) Survey Form
06/23/10	All Provider Types	Cost Sharing Exemption Under ARRA
06/23/10	Physicians, Mid-Level Practitioners, Podiatrists, Physical Therapists, Occupational Therapists, Speech Therapists, Audiologists, Optometrists, Opticians, Public Health Clinics, Licensed Psychologists, Licensed Clinical Social Workers; Licensed Professional Counselors; Dentists providing medical services; Laboratory and X-ray services; Independent Diagnostic Testing Facilities (IDTF); School Based Services; QMB and EPSDT Chiropractors; Family Planning Clinics; and Anesthesia Services	Resource Based Relative Value Scale (RBRVS) Information Effective July 1, 2010
06/23/10	Hospital Inpatient, Hospital Outpatient, Psychiatric Residential Treatment Facilities (PRTF), Therapeutic Group Homes, Therapeutic Foster or Family Care Providers, Mental Health Centers, Psychologists, Social Workers, Licensed Professional Counselors, FQHC, PRTF Waiver Providers	Changes to the First Health Services Provider Manual(s), Clinical Guidelines and Forms Used for Utilization Management of Children's Mental Health Medicaid Services
Fee Schedules		
07/01/10	Home and Community Based Services	Elderly and Physically Disabled Home and Community Based Services Waiver
06/10/10	Outpatient Hospital	April 2010 Hospital OP Procedure Code Fee Schedule
06/21/10	Targeted Case Management	New Fee Schedule
Other Resources		
06/04/10, 06/11/10, 06/18/10, 06/25/10	All Provider Types	What's New on the Site This Week
06/01/10	Pharmacy	MT SMAC List for June 1, 2010
06/16/10	All Provider Types	Provider Training Registration for Fall 2010
06/14/10	All Provider Types	NDC Billing Instructions Added to the Claims Instructions Link
06/22/10	All Provider Types	Electronic Health Records Link

Top 15 Claim Denial Reasons		
Exception	June Ranking	May Ranking
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	2
DRUG CONTROL CODE = 2 (DENY)	3	3
RATE TIMES DAYS NOT = CHARGE	4	4
REFILL TOO SOON	5	6
PA MISSING OR INVALID	6	5
PARTIAL DENTURES	7	7
PASSPORT PROVIDER NO. MISSING	8	8
CLAIM INDICATES TPL	9	10
RECIPIENT COVERED BY PART B	10	9
REV CODE INVALID FOR PROV TYPE	11	11
SLMB OR QI-1 ELIGIBILITY ONLY	12	12
SUBMIT BILL TO OTHER PROCESSOR OR PRIMARY PAYER	13	13
MISSING/INVALID INFORMATION	14	14
DEPRIVATION CODE RESTRICTED	15	15

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

Email: MTPRHelpdesk@ACS-inc.com

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) 362-8312

Prior Authorization

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

Mountain-Pacific Quality Health Foundation—DMEPOS/Medical

(406) 457-5887 local, (877) 443-4021, Ext. 5887 long-distance

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