



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, notices for their provider type, and other information published in the *Claim Jumper* and on the Medicaid website (www.mtmedicaid.org).

Fall 2010 Provider Training

Montana Health Care Programs Fall Provider Training will be held during September and October.

Day 1 will focus on Billing Basics and will include presentations on verifying eligibility and claims basics, including electronic claims, preventing denials, and special forms, website and web portal, SURS, TPL, and Medicare.

Day 2 will consist of presentations from State staff.

A complete **agenda and registration form** is available on the Medicaid [website](#). Training sites and dates are:

Billings, September 29 and 30

Billings Hotel and Convention Center
1223 Mallowney Lane
Billings, MT 59101

Missoula, October 6 and 7

Holiday Inn Downtown at the Park
200 South Pattee Street
Missoula, MT 59802

Great Falls, October 13 and 14

Hilton Garden Inn
2520 14th Street SW
Great Falls, MT 59404

IHS-Specific Training in Great Falls

After the Provider Training regular session on October 13, DPHHS Director Anna Whiting Sorrell and Tribal Medical Specialist Ian McEwen will conduct a **special session for Tribal Health and Indian Health Services attendees** about issues and questions related to billing Medicaid.

The training will be held at the Hilton Garden Inn (the site of the Great Falls Provider Training) from 4:30–6:00 p.m. Light refreshments will be served.

Submitted by Ian McEwen, DPHHS

Additional NDC Editing Added to the Claims Processing System

The National Drug Code (NDC) submitted on a line item for physician-injectable drugs must be manufactured

by a labeler who has signed a rebate agreement with CMS, and the Drug Efficacy Study Implementation (DESI) indicator cannot be 5 (non-covered, less than effective for all indications) or 6 (non-covered, removed from market) to be considered rebateable by Montana Health Care Programs.

In addition, a recent change allows the claims processing system to check the individual NDC termination date as part of the determination whether or not it is rebateable.

This information from First Data Bank was not previously available in the system, so some lines that were billed with non-rebateable NDCs were paid when they should have been denied. Claims that required a valid NDC that were billed with a non-rebateable NDC have been mass adjusted.

If you have any questions regarding claims that were included in this adjustment or with this change to the claims processing system, contact Provider Relations at 1-800-624-3958.

Videoconference – October 5, 2010

It's not too late for in- and out-of-state hospitals, physicians, and mid-level practitioners to attend the Montana Health Care Programs videoconference.

To reserve a seat assignment at the venue closest to you, register by Friday, October 1, 2010, by contacting Mary Patrick at (406) 444-0061 or via email at mpatrick@mt.gov.

Submitted by Mary Patrick, RN, DPHHS

2011 ICD-9-CM Code Update – Effective October 1, 2010

The annual ICD-9-CM coding update is effective for dates of service on or after October 1, 2010 (effective for discharges on or after October 1, 2010, for institutional providers).

An ICD-9-CM code is required for all professional claims (e.g., physicians, non-physician practitioners, independent clinical diagnostic laboratories, occupational and physical therapists, independent diagnostic testing facilities, audiologist, ambulatory surgical centers) and for all institutional claims.

The 2011 ICD update has 130 new diagnosis codes, 16 revised diagnosis codes, 23 deleted diagnosis codes from 2009, 22 new surgical procedure codes, and 22 revised surgical procedure codes.

CMS posts the new, revised, and discontinued ICD-9-CM diagnosis codes on the [CMS website](#) on an annual basis. Providers are also encouraged to purchase a new ICD-9-CM book or CD-ROM on an annual basis.

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 June and July, 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 June and July.

Submitted by Michael Huntly, DPHHS

Nurse First Calls			
The top five Nurse First call topics are in the table below:			
July 2010 (443 total calls)		June 2010 (467 total calls)	
Number of Calls	Type of Call	Number of Calls	Type of Call
17	Adult health information	16	Pediatric health information
12	Pediatric health information	11	Pediatric medication question
8	Pediatric medication question	10	Adult health information
7	Pediatric cough	9	Pediatric colds
7	Pediatric fever	8	Nausea and vomiting

Visits to Healthwise® Website			
The top five topics visitors were interested in are in the table below:			
July 2010 (125 website visits)		June 2010 (86 website visits)	
Number of Visits	Topic of Interest	Number of Visits	Topic of Interest
31	Chronic pain	27	Chronic pain
7	Stopping unwanted thoughts	6	System checking
6	Pregnancy	4	Kidney function
6	Colonoscopy	3	Interactive health risk calculators
5	Prostate cancer screening	3	Cancer antigens

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		
NA		
Fee Schedules		
08/06/10	Podiatry	Fee Schedule
08/12/10	Hospital – Inpatient	Current Fee Schedule for 72-Hour Presumptive Eligibility Program for Crisis Stabilization for Individuals 18 Years of Age and Older
08/12/10	Hospital – Inpatient	Current Fee Schedule for Medicaid Mental Health for Clients 18 Years of Age and Older
08/12/10	Hospital – Inpatient	Current Fee Schedule for MHSP Services for Clients 18 Years of Age and Older
08/12/10	Hospital – Inpatient, Licensed Professional Counselor, Mental Health Center, Mid-Level Practitioner, Physician, Psychiatric Residential Treatment Facility, Psychiatrist, Psychologist, School-Based Services, Social Worker, and Targeted Case Management (Mental Health)	Fee Schedule for Mental Health – Children
08/13/10	EPSDT/Chiro	Fee Schedule
08/13/10	Denturists	Fee Schedule
08/13/10	Physician and Psychiatrist	Current Fee Schedule for 72-Hour Presumptive Eligibility Program for Crisis Stabilization for Individuals 18 Years of Age and Older
08/23/10	Dental	Fee Schedule
08/30/10	Ambulatory Surgical Center	Fee Schedule
08/30/10	Hospital – Outpatient	APC and Outpatient Procedure Fee Schedule
Other Resources		
08/04/10	Pharmacy	Preferred Drug List
08/06/10	Pharmacy	SMAC List for August 1, 2010
08/12/10	All Providers	<i>Claim Jumper</i> September 2010
08/23/10	Pharmacy	Preferred Drug List (updated)
08/24/10	Ambulatory Surgical Center, Freestanding Dialysis Clinic, Hospital Outpatient, IDTF, Lab and Imaging, Mid-Level Practitioners, Pharmacy, Physician, Podiatrist, Psychiatrist, Public Health Clinic	Rebateable Drug List
08/30/10	School-Based Services	Medicaid Administrative Claiming Coordinator and Financial Officer Training Summer 2010 (PDF)

Top 15 Claim Denial Reasons		
Exception	August Ranking	July Ranking
RECIPIENT NOT ELIGIBLE DOS	1	1
RATE TIMES DAYS NOT = CHARGE	2	4
EXACT DUPLICATE	3	2
DRUG CONTROL CODE = 2 (DENY)	4	3
PA MISSING OR INVALID	5	6
REFILL TOO SOON	6	5
PARTIAL DENTURES	7	7
PASSPORT PROVIDER NO. MISSING	8	8
RECIPIENT COVERED BY PART B	9	10
CLAIM INDICATES TPL	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
VACCINES FOR CHILDREN ADMIN	15	35

Key Contacts

Provider Information website: <http://www.mtmedicaid.org> (<http://medicaidprovider.hhs.mt.gov>)

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

Provider Relations
P.O. Box 4936
Helena, MT 59604

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

Claims Processing
P.O. Box 8000
Helena, MT 59604

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 (previously dba First Health Services)

(800) 770-3084

Third Party Liability
P.O. Box 5838
Helena, MT 59604

Transportation (800) 292-7114

Prescriptions (800) 395-7961