

Montana Health Care Programs

CLAIM JUMPER

Volume XXVII, Issue 10, October 2012

In This Issue

Publications Reminder.....	1
FMAP Reminder for School-Based Providers	1
2012 Fall Provider Onsite Training Sessions.....	1
Payments to Physicians for Primary Care Services	2
Nurse First Services and Usage	2
Recent Publications.....	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 Medicaid [website](#).

FMAP Reminder for School-Based Providers

Effective October 1, 2012, the fee schedule for school-based health services will reflect updated fees based on the Federal Medical Assistance Percentage (FMAP) change.

The 2012 FMAP of 66.11% expires on September 30, 2012, and the federal fiscal year 2013 FMAP of 66.00% begins October 1, 2012.

The FMAP is important to school-based services because the reimbursement rate is calculated by multiplying the published fee by the appropriate FMAP in effect at the time your claim is adjudicated within the Department's claim processing system.

It is vital to remember that claims for school-based services are reimbursed based on payment date of the claim rather than by the date of service.

For your reference, a provider notice entitled *New FMAP Rate Reflects Changes to Reimbursement on the Fee Schedule* has been posted on the [Schools](#) page of the Department website.

Submitted by Rena Steyaert, DPHHS

2012 Fall Provider Onsite Training Sessions

Although the WebEx sessions are coming to an end, Xerox and DPHHS are getting ready for the onsite presentations in Bozeman (October 3, Wingate by Wyndham), Billings (October 10, Hilton Garden Inn), and Missoula (October 17, Holiday Inn Downtown)

To register for the onsite sessions and/or to view materials from the WebEx presentations, visit the [Training](#) page on the Provider Information website. The training schedule is below.

8:30 – 9:00 a.m.	Registration
9:00 – 9:30 a.m.	Eligibility Verification
9:30 – 10:15 a.m.	Denials
10:15 – 10:30 a.m.	Break
10:30 – 11:15 a.m.	Claims Processing
11:15 – 12:00 p.m.	Medicare/TPL
12:00 – 1:00 p.m.	Lunch (on your own)
1:00 – 2:00 p.m.	SURS
2:00 – 2:30 p.m.	Nursing Facility
2:30 – 3:45 p.m.	Children's Mental Health Bureau

Payments to Physicians for Primary Care Services

The Department of Public Health and Human Services is planning to implement the Payment for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration under the Vaccines for Children (VFC) program as proposed by the Patient Protection and Affordable Care Act of 2010.

The proposed rule requires an enhanced payment to physicians with a specialty or subspecialty designation of internal, pediatric, or family medicine certified by the American Board of Medical Specialties.

Physicians who do not have one of the defined specialty designations may also qualify if 60% of the codes billed for CY 2012 are for evaluation and management or vaccine administration codes. Additionally, the rule proposes increasing the payment for vaccine administration codes billed under the VFC program. Providers may access the rule at https://www.federalregister.gov/articles/search?conditions%5Bregulation_id_number%5D=0938-AQ63.

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 May and June, 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, and click on *Montana Health and Wellness Information*. During May and June, the most sought-after information was regarding rheumatoid arthritis and testosterone.

Submitted by Kriss Hensley, DPHHS

Nurse First Calls			
The top five Nurse First call topics are in the table below.			
June 2012 (622 total calls)		May 2012 (731 total calls)	
Calls	Type of Call	Calls	Type of Call
15	Pediatric fever – 3 months or older	18	Pediatric cough
14	Pediatric croup	16	Pediatric information
13	Adult information	14	Pediatric colds
12	Pediatric cough	10	Pediatric rash
11	Pediatric trauma – head	10	Adult information

Visits to Healthwise® Website			
The top five topics visitors were interested in are in the table below.			
June 2012 (76 website visits)		May 2012 (91 website visits)	
Visits	Topic of Interest	Visits	Topic of Interest
6	Testosterone	10	Rheumatoid arthritis
5	Deep vein thrombosis	7	Interactive tools
4	Klinefelter syndrome	3	Smart decisions: Know your options
4	Eyeglass prescriptions	3	Rheumatoid arthritis zones
4	Smart decisions: know your options	3	Weight management

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.

Recent Publications Available on Website		
Date	Provider Type	Description
Provider Notices, Manuals, and Replacement Pages		
08.08.2012	Pharmacy and Physician	Prior Authorization for Eylea® Afibercept Injection
08.10.2012	Pharmacy	Updated Plan First Billing Instructions
08.22.2012	All Providers	Deleted ICD-9-CM Codes
Fee Schedules		
08.03.2012	Hospital Inpatient, Hospital Outpatient, Psychologist, Physician, PRTF, Social Worker, Mid-Level, School-Based, LPC, Mental Health Center, TCM (Mental Health), TGH, TFC, Psychiatrist	72-Hour Presumptive Eligibility for Crisis Stabilization for Individuals 18 Years of Age and Older Medicaid Mental Health for Individuals 18 Years of Age and Older MHSP Services for Individuals 18 Years of Age and Older
08.06.2012	ASC	Fee Schedule
08.17.2012	Hospital Outpatient	APC Fee Schedule Outpatient Procedure Code
Other Resources		
08.03.2012	Ambulatory Surgical Center (ASC), Dialysis Clinic, Hospital Outpatient, IDTF, Lab and Imaging, Pharmacy, Physician, Podiatrist, and Public Health Clinic	Rebateable Manufacturers (updated August 2, 2012)
08.08.2012	Pharmacy	PDL Update, August 7, 2012
08.08.2012 08.20.2012 08.29.2012	Pharmacy	Montana SMAC List, August 8, 2012 Montana SMAC List, August 16, 2012 Montana SMAC List, August 28, 2012
08.28.2012	All Providers	Enrollment Materials
09.06.2012	Pharmacy	DUR Meeting Agenda, September 28
09.07.2012	Training and Upcoming Events	WebEx Training Material Eligibility Verification, Children's Mental health, Denials, Claims Processing, Medicare/TPL

Top 15 Claim Denial Reasons

Exception	August Ranking	July Ranking
RECIPIENT NOT ELIGIBLE DOS	1	2
EXACT DUPLICATE	2	1
DRUG CONTROL CODE = 2 (DENY)	3	3
RATE TIMES DAY NOT = CHARGE	4	4
PDCS REFILL TOO SOON	5	5
REFILL TOO SOON	6	6
PA MISSING OR INVALID	7	7
LINE ITEM DOS IS INVALID	8	13
RECIPIENT COVERED BY PART B	9	17
DEPRIVATION CODE RESTRICTED	10	9
MISSING/INVALID INFORMATION	11	12
SLMB OR QI-1 ELIGIBILITY ONLY	12	11
CLAIM INDICATES TPL	13	10
PASSPORT PROVIDER NO. MISSING	14	8
REV. CODE INVALID FOR PROV. TYPE	15	14

*This is due to many crossovers without line dates coming over from COBA. Upon researching, it was determined they are not coming with the line dates of service in their electronic file.

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: MTPRHlpdesk@xerox.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

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 (previously dba First Health Services) (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](#)