

# 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](#).

## ICD-10 Information

Have you checked out the [ICD-10 Information page](#)? Have you taken the ICD-10 Readiness Survey? Visit the ICD-10 page today!

*Submitted by Amber Sark and Jennifer Tucker,  
ICD-10 Co-Coordinators*

## Provider Training 2013

DPHHS and Xerox wrapped up their on-site provider trainings this week.

Thank you to all the providers who attended and made the trainings so successful, and congratulations to our door prize winners!

Questions arose during the trainings, the answers to which would benefit many providers. Those questions and answers will be available on the [Training](#) page with other presentation-related documents.

## Update! Nursing Facility Services Bureau WebEx Trainings

The Nursing Facility Services Bureau will be 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 first training is scheduled for November 6, 2013. Additional information and an agenda will be sent to all Nursing Facility providers in October.

*Submitted by Becky McAnally, DPHHS*

## Update! EFT / ERA Requirements

By January 1, 2014, Montana Health Care Programs providers (Medicaid/HMK Plus, HMK/CHIP, and Mental Health Services Plan) who receive paper warrants or paper remittance advices will be transitioned to electronic funds transfer (EFT) and electronic remittance advices (ERAs), mirroring the change Medicare is implementing.

See the website for the provider notice which explains the process in detail. Providers who have not yet enrolled in the electronic-only system will receive monthly reminders with instructions on enrolling; however, we recommend providers be proactive and enroll in EFT and ERA today!

DPHHS/Xerox presented a segment on the requirements for the electronic-only system at the Fall 2013 provider training sessions in October.

For information regarding the requirements, contact Provider Relations at 1.800.624.3958.

## Nurse First

Nurse First helps you have a stress-free holiday. See [page 2](#) for details!

## De-Stressing the Holidays – Making a List and Checking It Twice!

Why does a season that's supposed to be about happiness and joy so often result in just the opposite? A survey by *Consumer Reports* found that 90% of Americans find at least one thing stressful about the holiday season.

As a physician, you are well aware of the health issues that can plague your patients during the season of festivities, many with lingering effects post-holiday. Nurse First registered nurses are available 24/7 during the holidays to answer your patients' questions when you are not available.

By being knowledgeable of health conditions that can be exacerbated by stress, Nurse First can guide your patients on how best to manage conditions, such as those listed below, until they can see you:



- Diabetics high blood sugar from overindulging
- Risk for heart attack
- Skin conditions, including psoriasis and shingles
- Irritable bowel syndrome or colitis
- Immune disorders, including flare-ups of multiple sclerosis and lupus
- Anxiety, depression, and insomnia
- Worsening pain from disorders, such as arthritis or back pain

With Nurse First at the helm 24/7 throughout the holidays, we can pull the reins in on your patients' issues. We'll follow Barton Schmidt and David Thompson's nationally recognized triage guidelines to ensure we deliver the best care in your absence.

The light is always on at Nurse First. ... So feel free to eat, drink, and be merry! We'll take care of your patients until you are back in your office and can better assess their needs.

*Submitted by Kathy Wilkins, DPHHS*

## Mid-Level Provider Services in a NICU Setting

Effective October 1, 2013, Montana Medicaid will reimburse for mid-level professionals services rendered in a neonatal intensive care unit (NICU).

Mid-level practitioners include physician assistants and advanced practice registered nurses (APRNs). APRNs include nurse practitioners, nurse anesthetists, nurse midwives, and clinical nurse specialists.

Mid-level practitioners are health care providers described in ARM. 37.86.201–37.86.205.

At one time all professional services performed in a NICU were performed by physicians. That business model has changed over time and some of these services are now performed by specially trained mid-level providers. This change in business model will now be reflected in the Medicaid fee schedule by the addition of procedure codes that specially trained mid-level providers will be permitted to bill.

Mid-level providers will be required to practice within the scope of their license. These professional services must also be performed in a NICU recognized by DPHHS.

Other RN or LPN nursing services performed in a NICU may in part include performing care, administering medications, holding for x-rays, drawing blood work, starting peripheral IV, caring for infants with chest tubes, and caring for infants with advanced airways. These services are not billable separately. They are considered nursing services and these costs would be included as a reimbursable nursing cost on hospital cost reports.

Professional services typically performed by a specially trained mid-level practitioner in a NICU may include ordering care, ordering medications, ordering and interpreting x-rays, ordering and interpreting lab work, inserting central lines, inserting chest tubes, performing lumbar punctures, placing advanced airways, and managing ventilator settings. These services will now receive separate reimbursement. These costs should be reclassified to a non-reimbursable section of the hospital cost report.

These services will appear on the January 1, 2014 fee schedule. In the interim, refer to the Physician fee schedule to determine the reimbursement amount for these services.

If you have questions, contact Bob Wallace at 406.444.5778.

*Submitted by Bob Wallace, 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.

Date	Provider Type	Description
<b>Provider Notices, Manuals, and Replacement Pages</b>		
09.23.2013	Schools	New FMAP Rate Reflects Changes to Reimbursement on the Fee Schedule
09.24.2013	Public Health Clinic, Hospital Inpatient, Hospital Outpatient, Mental Health Center, Licensed Professional Counselor, Mid-Level Practitioner, Physician, PRTF, Psychiatrist, Psychologist, Schools, Social Worker, TCM Mental Health, TFC, TGH	Changes to Contract with Magellan Medicaid Administration (MMA)
09.27.2013	Pharmacy, Physician, Mid-Levels	Prescription Drug Services/ Reimbursement
09.27.2013	FQHC and RHC	Healthy Montana Kids (HMK) Vaccination Billing Changes
09.27.2013	Public Health Clinic, Hospital Inpatient, Hospital Outpatient, Mental Health Center, Licensed Professional Counselor, Mid-Level Practitioner, Physician, PRTF, Psychiatrist, Psychologist, Schools, Social Worker, TCM Mental Health, TFC, TGH	Changes to Prior Authorization Requirements for Therapeutic Youth Group Homes – Additional Information
09.18.2013	Pharmacy	Healthy Montana Kids (HMK) Pharmacy Benefit
09.09.2013	PRTF and HCBS, 1915(i) and Bridge Waiver Providers	Montana CANS System (MCS) Electronic Database
09.09.2013	Physician, Pharmacy, and Mid-Level	Updated Prior Authorization Request Form for Suboxone® and Subutex®
09.10.2013	EPSDT and Schools	New Services Orientation and Mobility Specialist for Schools
09.11.2013	All Providers	Electronic Funds Transfer (EFT) and Electronic Remittance Advice (ERA) Changes
09.03.2013	Physician, Mid-Level, Public Health, Family Planning, Hospital Inpatient, Hospital Outpatient, Licensed Professional Counselor, Mental Health Center, PRTF, Psychiatrist, Psychologist, School-Based Services, Social Worker, TCM Mental Health, TFC, TGH	Changes to Contract with Magellan Medicaid Administration (MMA)
09.03.2013	Physician, Mid-Level, Passport	Passport to Health Member Pending Lists and Provider Caseload Capacities
<b>Other Resources</b>		
09.18.2013	All Providers	ICD-10 Training Boot Camp
09.20.2013	IHS	IHS Teleconference Minutes
09.19.2013	IHS	IHS Tribal Teleconference Agenda
09.10.2013	Pharmacy	Montana SMAC Update
09.02.2013	Physician and Mid-Level	Enrollment Data, September 2013
09.03.2013	Pharmacy	Prescription Drug Services, Replacement Pages
<b>Fee Schedules</b>		
09.20.2013	Public Health Clinic, Hospital Inpatient, Hospital Outpatient, Mental Health Center, Mid-Level Practitioner, Physician, PRTF, Psychiatrist, Psychologist, Schools, Social Worker, TCM – Mental Health, TFC, TGH	Proposed Mental Health Fee Schedule for Youth

<b>Top 15 Claim Denial Reasons</b>		
<b>Exception</b>	<b>September Ranking</b>	<b>August Ranking</b>
RECIPIENT NOT ELIGIBLE DOS	1	1
EXACT DUPLICATE	2	3
RATE TIMES DAYS NOT = CHARGE	3	2
DRUG CONTROL CODE = 2 (DENY)	4	4
PA MISSING OR INVALID	5	5
REFILL TOO SOON PDCS	6	7
REFILL TOO SOON	7	8
PASSPORT PROVIDER NO. MISSING	8	6
CLAIM INDICATES TPL	9	15
RECIPIENT COVERED BY PART B	10	10
DEPRIVATION CODE RESTRICTED	11	9
REV CODE INVALID FOR PROV TYPE	12	13
NDC MISSING OR INVALID	13	22
SLMB OR QI-1 ELIGIBILITY ONLY	14	11
PROC. FACT CODE=4 (NOT ALLOW)	15	29

## Key Contacts

**Provider Information**

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

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

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

**EDI Help Desk** 1.800.624.3958

**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

**Direct Deposit Arrangements**

Fax information to Provider Relations, 406.442.4402.

**Verify Client 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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