

Montana Healthcare 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 Healthcare Programs Provider Information [website](#).

Register Now Fall Trainings

Billings

October 5, 2016

Bozeman

October 13, 2016

Missoula

October 20, 2016

Click to Register

Training For All

The 2016 Training Survey had a record number of responses from providers. Provider Relations is excited to develop the 2016 Fall Training based on those responses. We appreciate and value your time and are working to help increase your knowledge of current claim procedures and recent rule changes. This may help you bring efficiency to your claims processing and account adjustments. The trainings are designed for both new and long-time billers as well as providers. As of press time, the range of presentations and program presenters may include: HELP, SURS, HIP, Team Care, Nurse First, Provider 101, Enrollment, WinASAP Overview & Tips, Top Claim Denials, Medicaid Provider Website, and – new this year - A Round Robin at each event with attendee participation.

Fall Trainings will be:

Wednesday, October 5, 2016, Billings, Doubletree

(Formerly the Crown Plaza)

Thursday, October 13, 2016, Bozeman, Homewood Hilton Suites

Thursday, October 20, 2016, Missoula, Downtown Holiday Inn

Information is updated as available on the [Training](#) page at <http://www.medicaprovider.mt.gov/Training>

Register for 2016 Fall Trainings at:

<https://www.surveymonkey.com/r/SS7J63X>

I look forward to meeting all of you at the 2016 Fall Trainings.

*Submitted by Daniel Hickey
Field Representative
Xerox State Healthcare, LLC*

New Form 1500 Signature Line Policy

In response to Provider request, DPHHS will now accept 1500 claim forms with the notation 'signature on file'. A 1500 form without this authorized signature requirement or the actual authorized signature will still be returned to the provider.

Revalidation and Faxes

Provider Relations has received concerns about an inability to get faxes submitted to the revalidation fax line, 406-457-9566. If a provider is having trouble getting a fax through this line we suggest the following times to avoid the busy signal:

- Mondays and Fridays are the highest traffic
- On any day, Early mornings and later afternoon are the best.
- The time to avoid is the 11 to 1 lunch hour

Nurse First: Stop the Cycle of Domestic Violence

Domestic violence hits close to home.

October is Domestic Violence Awareness Month, and many will recall Montana's record number of 16 domestic violence deaths within a nine-month period in 2015 (current or ex-spouses, partners, and children). It was the highest for the state in 15 years.

In fact, according to the Montana Domestic Violence Fatality Review Commission, from 2000 to 2015, Big Sky Country saw 145 total fatalities in 94 incidents (76 percent gun-related). A National Network to End Domestic Violence Census cites that in just one day in 2015, 364 of Montana's domestic violence victims got help, with 199 finding safe havens in emergency shelters or transitional housing through the state's many local domestic violence programs and support systems.

The Centers for Disease Control (CDC) views domestic violence as a national public health issue—and it is, affecting 12 million victims annually. It exists in every community, regardless of age, gender, nationality, race, religion, sexual orientation, or socio-economic status (85 percent of domestic violence victims are women).

While fatalities can be the direct result of domestic abuse, this patterned practice of one individual exerting systematic control and power over someone else can take on many different forms, from ongoing demeaning emotional and verbal abuse, to physical intimidation and injury (including hitting, stalking, and rape). Financial abuse (like blocking access to money, job interference, or ruining one's credit) can also come into play. Isolation from friends and family members is in the mix, too. The impact on victims—depression, disassociation, lack of focus, and post-traumatic stress disorder (PTSD)—can be long-lasting.

Recognizing the early signs of abuse is crucial, so victims (and their loved ones) can move toward taking courageous steps to ask for help. Resources like Nurse First are at the ready, and hotlines are literally lifelines for survivors to escape the physical and psychological blows of domestic violence, and get their lives back.

Nurse First is a confidential, 24/7, year-round advice line staffed by licensed, registered nurses. It provides Medicaid members with current recommendations from the Centers for Disease Control and Prevention (CDC) and the American Congress of Obstetricians and Gynecologists (ACOG). Members can call 1 (800) 330-7847 or visit <http://dphhs.mt.gov/MontanaHealthcarePrograms/NurseFirst.aspx> under "Would you like more Montana Health and Wellness Information?"

*Submitted by Connie Olson, DPHHS
Nurse Advice Line Program Office*

Did You Know?

Important documents including: provider notices, fee schedules, announcements, manual updates, and other critical resources that are added to the web are listed in a weekly summary published on Fridays afternoons. Weekly Postings are found at:

<http://www.medicaprovider.mt.gov>

Choose: "Quick Links"

Then Choose "What's New on the Website"

Domestic Violence Awareness/Prevention: What Can Providers Do?

Provider and patient visits are short.

Make the most of them!

- **Look** for common physical signs of domestic abuse that a victim might try to hide, dodge, or excuse: black eye, bruises on the neck or elsewhere, sprained or broken wrists. Other signs include chronic fatigue, eating/sleeping pattern changes, muscle tension, shaking, shortness of breath, sexual dysfunction, and (in women) fertility or menstrual issues.

- **Explore** intervention training: Domestic Abuse Training Programs at www.theduluthmodel.org.

- **Post** local/national resources and posters in exam/waiting rooms.

Resources Providers Can Share with Medicaid members:

Montana Coalition Against Domestic and Sexual Violence

www.mcadsv.com •

Email: mcadsv@mt.net

Phone: (406) 443-7794 •

Toll Free: (888) 404-7794

National Network to End Domestic Violence Hotline

1-800-799-SAFE (7233) or TTY 1-800-787-3224

Joyful Heart Foundation

www.joyfulheartfoundation.org

Poster: "Living Healthier, Living Safer":

Provider Handout: "Positively Safe: The Intersection of Domestic Violence & HIV/AIDS"

Inside Provider Relations

What a CRN Can Do For You

Many, if not all of you, have experience in placing a call to the Provider Inquiry Unit and are familiar with the part of every call where you are offered a CRN (Call Reference Number), not once, but twice! Have you ever wondered why we give you that number? That number allows us to efficiently recall that record should you have to place a follow up call. Also, if you need to escalate the situation to a supervisor or a DPHHS staff member who then comes to Provider Relations for resolution, we locate the call and determine a resolution much quicker if we have a CRN so it is important to jot it down. Another reason to write the number down is if you need to follow up on the issue you are calling about. As advertised, when you call 1-800-624-3958, our incoming calls are recorded for quality but we also capture notes during the call in a unique record. Having that number handy allows us to locate either the call record or pull the recording quickly if needed. You are encouraged to write the CRN down for your records. It will be different for each call you make.

*Submitted by Julia (Porter) Harris
Provider Relations Manager
Xerox State Healthercare, LLC*

Where to Report Passport Referral Numbers on Common Claim Forms	
Paper Form 1500	Field 17A
Paper Form UB	Field 7
Electronic Claims	Loop 2300 Segment 1 9F
UB	Loop 2300 Segment 1 9F
WinASAP	Claim Code Tab Referral #

Call Center Questions

Is Medicare TPL on the Claim?

One of the most common questions posed to call center agents is how to handle members with both Medicaid and Medicare. In short, if a Member also has Medicare do not put yes in Field 11D and/or a dollar amount in Field 29 – LEAVE THEM BLANK. It is confusing to many providers because the claim instructions refer to 29 as reserved for MT Medicaid Third Party Liability or TPL. However, the General Manual, which is available on every provider type page on the [provider website](#), says “Medicare is processed differently than other sources of coverage... Medicare claims are processed and paid differently than other non-Medicaid claims. The other sources of coverage are called third party liability or TPL, but Medicare is not.”

If a provider enters Yes in Field 11D or an amount in Field 29 our system will then see the claim as being eligible for less funding than when the system sees the member as Medicare/Medicaid dual pricing eligible.

Is the Passport Provider’s Authorization for Service the Same as a PA - or - What Field Does It Go Into?

No, it is not the same. Over 75% of Montana Medicaid members are Passport members. With so many Passport members, questions about claims are inevitable. By regulation, the Passport program mandates that “With some exceptions, all services to Passport members must be provided or approved by the member’s Passport provider or Medicaid/HMKPlus will not reimburse for those services.” (from the [Passport to Health Manual](#) <http://medicaidprovider.mt.gov/Portals/68/docs/manuals/passport112015.pdf>).

When a provider receives a referral number from a member’s Passport provider to deliver service, the table in the left column indicates where to report the Passport referral number in common types of claims.

It should be noted that a member may need BOTH a Passport provider referral number and a PA for a service. The [Passport Manual](#) explains that “Passport referral and prior authorization are different. Passport referral is a referral to visit another provider; prior authorization refers to a list of services that require Department authorization before they are performed. Some services may require a Passport referral and/or prior authorization. Prior authorization is obtained through a Department contractor, Mountain-Pacific Quality Health (MPQH). Different numbers are issued for Passport referral and prior authorization, and if required, both numbers must be listed on the requesting provider’s claim.

For more information on prior authorization, see the Prior Authorization chapter in the General Information for Providers manual, your provider type manual, and the [Prior Authorization](#) page on the Provider Information website.”

More information is also available on the [Passport](#) page of the website, <http://www.medicicaidprovider.mt.gov/passport>.

Publications Available on the Website

Below is a list of recently published Medicaid information and updates available on the Provider Information [website](#). On the website, select Resources by Provider Type in the left menu to locate information specific to your provider type. If you cannot locate the information below, contact Provider Relations at 1.800.624.3958 or 406.442.1837 in Helena.

Provider Notices					
Date	Provider Type/Page		Description		
08.12.2016	Psychiatrists Physicians Mid-Level Practitioners	Pharmacy Community Mental Health Centers Psychological Services	Removal of 15-Day Supply Limit on Initial Atypical Antipsychotic Prescriptions		
08.12.2016	Psychiatrists Physicians Mid-Level Practitioners	Pharmacy Community Mental Health Centers Psychological Services	Vaccine Administration by Pharmicists		
Forms					
Date	Form Name				
08.30.2016	Nursing Facility Request for Nursing Home Bed Reservation During Resident's Temporary Hospitalization DPHHS-SLTC 052				
08.30.2016	Nursing Facility Request for Therapeutic Home Visit Bed Reservation DPHHS-SLTC 041				
08.30.2016	Nursing Facility Request for Bed Reservation for Home Visit in Excess of 72 Hours				
08.30.2016	Nursing Facility Discharge Request				
Fee Schedules					
All Fee Schedules Revised in August 2016 were Retroactive to July 1, 2016:					
ASC	HCBS - SDMI				
Lab & Imaging	Mid-Level				
Physician	Psychiatrist				
Public Health Clinic					
Manuals with Replacement Pages					
08.26.2016	Adult Mental Health	08.08.2016	ASC	08.08.2016	Dialysis Clinic
08.08.2016	IHS	08.31.2016	Physician		

Other Resources

- Medicaid Statistics 2016 Update Found under Additional Resources on the Menu
- IHS - Monthly Agenda and Medicaid Transportation Program Slides
- Pharmacy - Weekly MT AAC
- Pharmacy - DUR Agenda *Revised*

*Thank You For Being
A Montana Medicaid Provider!
We Appreciate Your Service to Montanans!*

Top 15 Claim Denial Reasons		
Exception	AUGUST 2016	JULY 2016
EXACT DUPLICATE	1	1
PA MISSING OR INVALID	2	2
REFILL TOO SOON	3	4
RECIPIENT NOT ELIGIBLE DOS	4	3
PASSPORT PROVIDER NO. MISSING	5	26
DRUG CONTROL CODE = 2 (DENY)	6	6
RECIPIENT COVERED BY PART B	7	14
MISSING/INVALID INFORMATION	8	7
NDC MISSING OR INVALID	9	9
RATE TIMES DAYS NOT = CHARGE	10	8
RECIP NON COVERED SERVICES	11	16
SLMB OR QI-1 ELIGIBILITY ONLY	12	11
REV CODE INVALID FOR PROV TYPE	13	21
CLAIM INDICATES TPL	14	10
PROVIDER TYPE/PROCEDURE MISMAT	15	25

An Ounce of Prevention

This is what your billers can do to prevent denied claims based on a few of this month's top denial reasons.

PROVIDER TYPE/PROCEDURE MISMATCH

In General, Medicaid services must be performed by practitioners licensed and operating within the scope of their practice as defined by law (ARM 37.85.401). Additionally, services must be covered by Medicaid and not be considered cosmetic, experimental or investigational. (ARM 37.86.206–207, and ARM 37.86.1006). The most recent edition of your provider type's manual found on your provider type page on the website (<http://www.medicaidprovider.mt.gov/provider-type>) specifically address covered services for your provider type. Additionally current and historical fee schedules with codes available for your provider type are updated regularly on your provider type page on the website. Codes can change so check them prior to submitting claims.

PASSPORT PROVIDER NO. MISSING

The solution to preventing these denials is found in the [Passport](#) section of the [provider website](#).

Providers should obtain a Passport referral in advance, in writing, and specific to services and dates. If a provider accepts a member as a Medicaid/HMK Plus member and provides a service requiring a Passport referral without a referral from the member's Passport provider, Medicaid will deny the claim. When a provider bills Medicaid for services rendered to a member, the provider has accepted the member as Medicaid and cannot bill the member for services. If a provider tried unsuccessfully to get approval from the Passport Provider, the provider cannot bill the member unless the member agreed to pay privately before services were rendered. (ARM 37.85.406)

More information is available at <http://www.medicaidprovider.mt.gov/passport>.

Key Contacts

Montana Healthcare Programs
Provider Information
<http://medicaidprovider.mt.gov/>

Xerox EDI Solutions
<http://www.acs-gcro.com/gcro/>

Xerox EDI Support Unit
1.800.987.6719

Provider Relations
P.O. Box 4936
Helena, MT 59602
1.800.624.3958 In/Out of state
406.442.1837 Helena
406.442.4402 Fax
MTPRHelpdesk@xerox.com

Third Party Liability
1.800.624.3958 In/Out of state
406.443.1365 Helena
406.442.0357 Fax

EFT and ERA
Fax completed documentation to
Provider Relations, 406.442.4402.

Verify Member Eligibility
FaxBack 1.800.714.0075 or
Voice Response 1.800.714.0060

POS Help Desk for Pharmacy
1.800.365.4944

Passport
1.800.362.8312

PERM Contact Information
HeatherSmith@mt.gov or
406.444.4171
<http://www.dphhs.mt.gov/qad/PC/PERMPC.aspx>

Prior Authorization
MPQH 1.800.262.1545
MPQH – DMEPOS/Medical
406.457.5887 Local
1.877.443.4021 X 5887

Magellan Medicaid
Administration
(dba First Health)
1.800.770.3084
Transportation 1.800.292.7114
Prescriptions 1.800.395.7961

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

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

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