



Subject: Behavioral Health Provider Integration

Release Date: September 7, 2012

****IMPORTANT UPDATE****

Billing Pharmacologic Management for Medicare/Medicaid Dual Enrollees

MITS programming logic has been adjusted to accommodate instances in which pharmacologic management service (CPT code 90862) is rendered to dual eligible clients and the rendering professional (such as an RN) is not allowed to enroll with Medicare. This change to MITS was put into production on September 4, 2012, and will allow claims for pharmacologic management to be submitted and paid by Ohio Medicaid when the rendering professional is not allowed to enroll with Medicare. This programming change applies to all claims with dates of service 7/1/12 and later. Claims submitted prior to the programming change and denied for Medicare coverage may now be resubmitted.

It is important to note that the provider still has a responsibility to bill Medicare or any third party payer for a service that **is** covered by the third party. Medicaid remains the payer of last resort. This means that third party information must be included on the claim when the third party covers the service. For example, if counseling is a covered service by a Medicaid recipient's third party insurance, then the claim to Medicaid should reflect the appropriate information from the third party.

Reminder to Use Existing Help Lines for Assistance

In the transition to MITS ODJFS, ODMH and ODADAS staff reached out personally to the provider community to answer questions and obtain information needed to assure that providers were set up correctly in MITS to submit and get claims paid beginning July 1, 2012. Since that time, we have generally seen broad success in the provider submission and payment of Medicaid claims. However some providers continue to have instances where they need assistance on particular claims, denial codes, eligibility issues, etc. **We ask providers to direct their calls to the established Help Lines with their provider questions.** Following is the contact information for those help lines and descriptions of the types of issues that providers should be directing there:

ODJFS Medicaid Provider Call Center

Call with questions about Medicaid claims, consumer eligibility, third party liability, remittance advice, or claims payment, or assistance with the MITS Web Portal.

Phone: 1-800-686-1516 8:00 am – 4:30 pm Monday – Friday

Listen to the entire recorded message until you hear the prompt **“Please hold while your call is being transferred”** and you will then be able to speak with a customer service representative.

ODJFS Electronic Data Interchange (EDI) Help Desk

Contact with questions regarding EDI file submission or testing (837, 835, 270, 271 files) trading partner status, error codes being received on 835 files, etc. Phone: 614-387-1212, M-F 8am-5pm

OIS-EDI-Support@jfs.ohio.gov

MACSIS Support Desk

Contact with questions regarding Medicaid claims billed through MACSIS prior to 7/1/12 or with claims for non- Medicaid eligible services for any date within the last year.

Phone: 1-877-462-2747 or 614-466-1562 Fax: 614-365-9006

MacsisSupport@mh.ohio.gov