



Days Into Go-Live: 51

Subject: Behavioral Health Provider Integration

Release Date: August 21, 2012

Billing Pharmacologic Management for Medicare/Medicaid Dual Enrollees

We have heard concerns raised by providers regarding pharmacologic management service (CPT code 90862) rendered to dual eligible clients, but providers cannot bill to Medicare because the rendering professional (such as an RN) is not allowed to enroll with Medicare. Our analysis of Medicaid claims for 90862 submitted since 7/1/12 show that some providers are having success submitting claims to Medicare while others are not. Current MITS programming logic will deny Medicaid payment for pharmacologic management when the client has any other third party health insurance coverage. However, ODJFS staff and leadership have heard the concerns regarding this unique situation and have developed a programming solution – slated to take effect the end of August - that 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 will apply to all claims with dates of service 7/1/12 and later. Claims submitted prior to the programming change and denied for Medicare coverage must be resubmitted after the programming change takes effect. We will provide more specifics in future editions of the MITS BITS.

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 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