Provider Matters – April 2016

Monthly updates about claim processing, policy and resources for Oregon Medicaid providers

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Provider collaborative - Oregon Eligibility (ONE), OHP renewals and OHP application reminders

Please join the Oregon Health Authority (OHA) Wednesday, May 18, from 10 to 11 a.m. for updates on the Oregon Eligibility (ONE) system and OHP renewals, and online Oregon Health Plan (OHP) application reminders.

Colette Gillies, provider campaign coordinator, will present information on ONE. Jennifer Smith, Medicaid program trainer, will have updates on OHP renewals and brief reminders for successful submission of the online (PDF) OHP application.

Link to register:
https://attendee.gotowebinar.com/register/6463439895327292418

After registering, you will receive a confirmation email containing information about joining the webinar.
View system requirements

Outreach and Enrollment funding opportunity closes May 2, 2016

OHA will again provide a funding opportunity for community partners to provide local, on-the-ground outreach and application assistance for uninsured or underinsured individuals and families.

Grant funds awarded as a result of this opportunity shall be used to support two primary activities:

1. Outreach to uninsured or underinsured Oregonians who may qualify for OHP in all regions of the state, with a particular focus on reaching refugees, unaccompanied
youth, tribes, domestic violence victims, ethnic minorities, rural communities, justice-involved individuals, LGBTQ population, and veterans.

2. Application assistance to any individual seeking assistance, both those eligible for OHP and those eligible for private health insurance through the Marketplace.

We are pleased to announce that a Request for Grant Proposal (RFGP) was posted on ORPIN, Friday April 15, and will remain open until May 2.

- OHA anticipates final agreements to be signed in July 2016.
- Grantee organizations will be chosen through a formal RFGP process, and OHA will evaluate proposals and award funds based on a proposed work plan and budget, reserving the right to make an award to a lower scoring proposal that advances specific objectives like geographic and demographic diversity.
- The solicitation documents can be accessed at orpin.oregon.gov by searching the open opportunities for **OHA-4188-16**. All questions specific to the RFGP should be directed to the contact listed in the solicitation.

Grants may be awarded at one of the following two funding levels:
- 23 grants are available for $100,000
- 1 grant is available for $200,000

The ORPIN Help Desk business hours are Monday through Friday from 7:30 a.m. to 4:30 p.m. Pacific Time. There are two ways to contact ORPIN support:

- **By phone:** (503) 373-1774. The ORPIN Automated Help Desk phone tree provides answers to some of the most commonly asked questions. You can also hit the star key * at any time to leave a message for a return call.
- **By email:** info.orpin@oregon.gov. Please include your company/organization name so that Help Desk staff can easily find your account in ORPIN.

We want to draw the attention of any interested organizations to the tight timeline, and encourage Proposers to review the opportunity and submit any questions as quickly as possible.

There will also be an informational webinar this **Monday, April 25 at 2:00 p.m.** For additional questions about this opportunity please email the OHP Community Partner Team at CP.Business@state.or.us.

**Medicaid Electronic Health Records (EHR) Incentive Program**

**Year 2015 updates for eligible professionals:**
- OHA is upgrading the MAPIR system so that providers can submit meaningful use (MU) attestations for Program Year 2015. We expect to complete these updates in **late May 2016**.
- Once these updates are complete, professionals will have until **August 31, 2016**, to attest for Program Year 2015 MU payment.

**Year 2016:**
Program year 2016 is the last year to begin the program (coming in under AIU or MU Payment Year 1). Eligible professionals can receive an incentive payment for adopting, implementing or upgrading certified EHR technology in their first year of participation.
What is the Medicaid EHR Incentive Program?
The program provides federal incentives, up to $63,750 paid over six years, to certain eligible providers who adopt, implement, upgrade or achieve meaningful use of certified electronic health record technology (CEHRT).

- **Eligible professionals** must choose to participate in either the Medicare or Medicaid EHR Incentive Program.
- Most but not all of the **eligible hospitals** in Oregon meet the federal requirements to participate in both the Medicare and Medicaid EHR Incentive Programs.
  - Hospitals that receive payments under both programs must first attest to Medicare and then attest for a payment through Medicaid.
  - Once payments begin in Medicare, hospitals must attest to demonstrating meaningful use every year to receive an incentive and avoid a payment adjustment.

For more information
- **About the program:** Please visit the Medicaid EHR Incentive Program website or contact the Medicaid EHR Incentive Program team at 503-945-5898 (Salem).
- **About EHR Incentive Programs resources:** Please visit the CMS EHR website.
- **About certified EHRs:** Please visit the Office of the National Coordinator (ONC)’s Certified Health Product Listing website.
- **About CMS and ONC rule changes for Program Years 2015-2017:** See the CMS Final Rule and the ONC Final Rule (dated October 2015), and ONC corrections and clarifications (HTML or PDF, dated January 2016).

New search tools for OHP providers
The Oregon Health Authority has two new search tools:

**The Searchable Prioritized List** at www.oregon.gov/oha/herc/Pages/searchable-list.aspx
For health plans, providers and clients alike, this tool is searchable by keyword and contains references or links to find:
- Prioritized List line text and codes (this tool is not built for search-by-code functionality; instead see ICD-10/HCPCS/CPT code placement files)
- Guideline Note wording
- Statements of Intent
- Services Recommended for Non-Coverage
- Related items such as administrative rules and coverage guidances (if applied to lines on the Prioritized List)

**Searchable OHP Tools for Providers** at www.oregon.gov/OHA/healthplan/pages/providers.aspx
This list contains all provider tools posted on the OHP website. You can search by keyword or topic to find the tools you need, such as:
- Supplemental rate information
- Billing tips and handbooks
- Program-specific provider guides, such as the *Out of Hospital Birth Reimbursement Guide*
• Self-paced training
• Code lists

If you have suggestions to improve these tools, please send Prioritized List suggestions to HERC.Info@state.or.us, and Provider Tools suggestions to hsd.distribution@state.or.us.

Changing Internet Explorer settings for Provider Web Portal compatibility
A new fact sheet on the OHP Provider Web Portal page explains how to best view the Provider Web Portal at https://www.or-medicaid.gov when using Internet Explorer 10 or 11. We hope you find this information helpful.

HCPCS code Q5101 open for claim processing
Although it is not listed on the current fee-for-service fee schedule, HCPCS code Q5101 (Injection, filgrastim (g-csf), biosimilar, 1 microgram) is open for claim processing. The maximum allowable rate for this code is $0.97 per unit.

AMH and DMAP are now the Health Systems Division
As you may know, the Addictions and Mental Health Division (AMH) and Division of Medical Assistance Programs (DMAP) are now united as a single division called the Health Systems Division.

Changes you will see on the OHP website include:
• In May, we will update most DMAP forms to remove DMAP references. We will also change their form numbers to begin with OHP instead of DMAP. This includes the provider enrollment attachments at www.oregon.gov/OHA/healthplan/pages/providerenroll.aspx.
• Oregon Administrative Rules for chapters 309 and 410 are now under the Health Systems Division.
• Provider guides, billing handbooks, and other tools are also being updated to reflect the Health Systems Division.

The contacts you have had for DMAP remain the same, except for the new agency name of Health Systems Division.

Before we make any changes that affect how you do business with us, we will let you know.

Reminder: Monthly payment recovery for OHP newborn claims
Every month OHA recovers a small number of payments made in the preceding month for services to newborns who are now enrolled in an OHP managed care organization (MCO) or CCO.
• Once the birth is reported, we enroll children born to MCO or CCO members in the mother’s plan.
However, depending on when the birth is reported to us, this process may take three or more weeks to complete.

To avoid future recoveries for newborn services:
- Please report births as soon as possible using the Newborn Notification Form. Allow two to three weeks for processing.
- Verify the newborn’s MCO or CCO enrollment using PWP, Automated Voice Response or Electronic Data Interchange.
- Once you have verified the newborn’s MCO or CCO enrollment, bill the MCO or CCO.

What you will see on the paper remittance advice (RA), electronic remittance advice (ERA) or PWP:
- **On the paper RA:** Adjusted claims will have an ICN beginning with “52”. The “Detail EOBs” for these ICNs will list Explanation of Benefits (EOB) code EOB 0090 – Service is covered by a managed care plan. Claim must be billed to the appropriate managed care plan.
- **On the ERA or PWP:** The ERA should list these adjustments as overpayment recoveries. PWP will show the adjustment ICN as a denied claim. In both ERA and PWP, the reason for recovery will be Adjustment Reason Code 24 - Charges are covered under a capitation agreement/managed care plan.

To learn more about recovery of overpayments or appeals, please see Oregon Administrative Rules 410-120-1397(7), 410-120-1560 and 410-120-1580 in the General Rules guidelines.

**Need help?**

Find more phone numbers, email addresses and other resources in our Provider Contacts List.
- **Client calls** – CCO members should call their CCO. Other clients should call OHP Client Services at 800-273-0557.
- **Claim resolution** – Contact Provider Services (800-336-6016).
- **Direct deposit questions** – Contact the DHS/OHA EFT coordinator (503-945-6872).
- **Electronic Data Interchange (EDI), the EDI Trading Partner Agreement, EDI mailbox help and the 835 ERA** – Contact EDI Support Services (888-690-9888).
- **ICD-10 transition questions** – OHAICD10.help@state.or.us
- **Pharmacy and prescriber questions (for technical help and fee-for-service prescription PAs)** – Contact the Oregon Pharmacy Call Center at 888-202-2126. You can also fax PA requests to 888-346-0178.
- **Prior authorization status** – Call the PA line at 800-642-8635 or 503-945-6821 (outside Oregon).
- **Provider enrollment updates** – Contact Provider Enrollment (800-422-5047).
- **Provider training videos and past provider collaborative webinars** – Visit the OHA YouTube channel.
- **Provider Web Portal help** – Visit our Provider Web Portal page. If you need a password reset, contact Provider Services (800-336-6016).