

PMMIS Screen RF113H

There have been questions from the sites asking if PMMIS has a screen to view changes in the unit limits and age restrictions for a certain procedure code. The RF113 historic table (RF113H) has this information. This screen lists all procedure code indicator and value updates that have occurred in the PMMIS system. To get to this screen, enter "RF113H" into the NTR field. This will bring up the original unit limits and age restrictions in the PMMIS system as of the listed update date "UPD:" in the upper right hand corner of the screen. You can view what the different unit limits and age restrictions have been at various points in time. Push the F8 key to scroll through the different change dates leading to the current "Add" date limits on the RF113 screen.

P330 AHCCCS Error Code

ADHS identified a number of encounters with Procedure Code S5109 and HA modifiers, pending at AHCCCS for error code P330 (Provider Not Eligible for COS on Service Date). The HA modifier indicates that the service is for a child, but the service providers do not have COS 35 (Adult Foster Care) which was the COS that AHCCCS had loaded into their system for Procedure Code S5109.

The Office of Program Support received notification from AHCCCS on April 8, 2008, that the COS for S5109 has been changed to 47 (Mental Health Services) with the procedure code's effective beginning date of January 01, 2007. With this change at AHCCCS, P330 pends that fit this scenario should clear from future AHCCCS Pend Reports.

Coding Q & A

Q

When a client needs additional face-to-face attention from a 2nd provider while another provider is transporting the client (i.e. 2nd provider engages the client to keep them calm or under control), can the 2nd provider encounter for case management services?

A

The provider not encountering transportation would be able to encounter case management to keep the client calm, under control, etc. It is important that the need for the additional staff is addressed in the client's treatment plan, and that the case management services provided while transporting the client are clearly and thoroughly documented.

Q

When billing H2027 (Psycho Educational Services), does the service that is being provided have to be face-to-face? For example, if a case manager is going out and picking up job applications for a client and they are not present, can the H2027 code be billed?

A

Per the Covered Services Guide, H2027 code (Psycho educational Services) can only be billed when there is direct face-to-face contact.

!! Edit Alerts !!

An Edit Alert is a faxed and/or e-mailed notice of system enhancements or changes. The Office of Program Support strives to ensure all Edit Alerts are communicated to all program participants in an accurate and reliable manner. Edit Alerts will be distributed when the information is first made available and again in the following monthly publication of Tidbits.

New/Changed Edit Alert

Tracking Number: 114

Implemented:

Reference Title N110 Edit relaxed for interim bill types

Notification Date: March 24, 2008

Expected Implementation Date: March 24, 2008

ADHS will provide 90 days notice when possible

Change Description:

ADHS has relaxed the N110 edit (Accommodation days not valid for date of service span), to allow submission of interim bill type encounters with the same start and end date of service. Encounters for the same start date and end date with discharge bill types will continue to error for N110 when submitted. (SSR 2425)

ADHS has relaxed the N110 edit (accommodation days not valid for date of service plan), to allow submission of interim bill type encounters with the same start and end date of service.

New/Changed Edit Alert

Tracking Number: 115

Implemented:

Reference Title Age calculation fixed

Notification Date: March 28, 2008

Expected Implementation Date: March 26, 2008

ADHS will provide 90 days notice when possible

Change Description:

Please be advised that the CIS system problem with age calculation on encounters has been found. The special run files for encounters pending incorrectly for age that were placed on the server by the RBHAs on Wednesday, March 26th had already been processed before the code to fix the problem was moved to production. No additional special run files will be needed, the encounters may now be submitted through the regular batch process. (SSR 2378)

Please be advised that the CIS system problem with age calculation on encounters has been found.

New/Changed Edit Alert

Tracking Number: 116

Implemented:

Reference Title Ancillaries for Out of State Providers

Notification Date: March 31, 2008

Expected Implementation Date: March 26, 2008

ADHS will provide 90 days notice when possible

Change Description:

ADHS has added an edit requiring provider type 73, Out of State 1 Time Provider, to submit ancillaries when billing an inpatient UB. (SSR 2397)

ADHS has added an edit requiring provider type 73, out of state 1 time provider, to submit ancillaries when billing an inpatient UB.

New/Changed Edit Alert

Tracking Number: 117

Implemented:

Reference Title Accept NPI on all providers

Notification Date: March 31, 2008

Expected Implementation Date: March 26, 2008

ADHS will provide 90 days notice when possible

Change Description:

(SSR 2438) Not all providers are required to have an NPI but many of these providers have elected to apply for and have received an NPI. ADHS has corrected a system problem that was rejecting encounters from providers who did not require an NPI, if they submitted their NPI on their encounters.

Providers who are not required to have an NPI may now submit their encounters with either their NPI or their AHCCCS provider ID. Encounters submitted with both an NPI and an AHCCCS provider ID will continue to be rejected.

Not all providers are required to have an NPI but many of these providers have elected to apply for and have received an NPI. ADHS has corrected the system problem that was rejecting encounter from providers who did not require an NPI, if they submitted their NPI on their Encounters.

PMMIS System Changes**Place of Service (POS)**

Effective immediately, Place of Service 22 (outpatient hospital) can be reported on the following services:

- 49255 (Omentectomy, epiploectomy, resection of omentum (separate))
- 44005 (Enterolysis (freeing of intestinal adhesion) (separate procedure))

Lab Indicator

Modifier QW (CLIA Waived Test) has been added to the following procedure codes:

- 80047 Basic metabolic panel (calcium, ionized) effective 1/1/2008
- 80051 Electrolyte panel effective 10/30/2007
- 80053 Comprehensive metabolic panel effective 1/16/2008

The laboratory indicator is now W (CLIA Waived) for the following procedure codes:

- 80047 Basic metabolic panel (calcium, ionized)
- 80048 Basic metabolic panel (calcium, total)
- 80051 Electrolyte panel
- 80053 Comprehensive metabolic panel
- 80178 Lithium

Codes

Effective for dates of service on or after April 1, 2008, the following codes have been end dated:

- J7602 (Albuterol, all formulations including separated isomers, inhalation solution, FDA-approved final product, non-compounded, administered through DME, concentrated form, per 1 mg (Albuterol) or per 0.5 mg (Levalbuterol))
- J7603(Albuterol, all formulations including separated isomers, inhalation solution, FDA-approved final product, non-compounded, administered through DME, unit dose, per 1 mg (Albuterol) or per 0.5 mg (Levalbuterol))

Effective for dates of service on or after January 1, 2008, the Provider Type 43 (Ambulatory Surgical Center) and Place of Service 24 (Ambulatory Surgical Center) has been added to the following codes:

- C9237 (INJECTION LANREOTIDE ACETATE, 1 MG.)
- C9240 (INJECTION, IXABEPILONE, 1 MG.)
- C9354 (VERITAS COLLAGEN MATRIX, CM2)
- C9355 (NEUROMATRIX NERVE CUFF, CM)

Provider Type

Effective for dates of service on or after January 1, 2003, the Provider Type 77 (BH Outpatient Clinic) can now report the following code:

- T1016 (Case management, each 15 minutes)
Modifier HN (Bachelor Degree Level/Amb Hsp 2 skill nurs facility)
Place of Service 11 (Office)

Effective for dates of service on or after July 1, 2007, Provider type 77 (Psychiatric Hospital) can now report the revenue code 0204 (ICU/psych stay).

Modifier(s)

Effective with dates of service on or after January 1, 2006, the modifier Q5 (Services furnished by a substitute physician under a reciprocal billing arrangement) has been added to the following HCPCS codes:

- 90767 (Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); additional sequential infusion, up to 1 hour (list separately in addition to code for primary procedure))

90775 (Therapeutic, prophylactic or diagnostic injection (specify substance or drug); each additional sequential intravenous push of a new substance/ drug (list separately in addition to code for primary procedure))

Revenue Code

Effective with dates of service on or after January 1, 2007, the HCPCS code G0260 (Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography) has been added to the revenue code 0490 (Ambul Surg) on the PMMIS screen RF773 (Revenue-Codes-To Procedure Codes)

Medicare Coverage Change

Effective with dates of service on or after March 26, 2008, the Medicare coverage indicator on PMMIS screens RF113 (Procedure code indicators and values) and RF127 (Procedure OPFS indicators and values) has been changed to "N" for the following codes:

- T4521 (Adult sized disposable incontinence product, brief/diaper, small,)
- T4522 (Adult sized disposable incontinence product, brief/diaper, medium)
- T4523 (Adult sized disposable incontinence product, brief/diaper, large,)
- T4524 (Adult sized disposable incontinence product, brief/diaper, extra)
- T4529 (Pediatric sized disposable incontinence product, brief/diaper, small)
- T4530 (Pediatric sized disposable incontinence product, brief/diaper, large)
- T4531 (Pediatric sized disposable incontinence product, protective underwear/pull-on, small/medium size, each)
- T4532 (Pediatric sized disposable incontinence product, protective underwear/pull-on, large size)
- T4533 (Youth sized disposable incontinence product, brief/diaper, each)

PMMIS Table Change

Effective May 1, 2008, the PMMIS screens RF773 (Revenue Codes to Procedure Codes) and RF774 (Revenue Codes to Bill Types) will contain a one-to-one code relationship only. The current code ranges will no longer populate these tables. This means the H5 (RF774) and H6 (RF773) records provided by AHCCCS in the Refer01.zip files will be larger.

BHS Encounter Production Schedule Key Dates and Events

BHS Encounter Production Schedule – Key Dates and Events

Events / Cycle	April 2008	May 2008	June 2008
Run H74603 New Day	Wed 03/26/08	Thurs 05/01/08	Wed 05/28/08
IT submit bba notifications to AHCCCS for acceptance	Mon 03/31/08	Thurs 05/01/08	Fri 05/30/08
Deadline for DelDup File submission to OPS (12 noon)	Mon 03/31/08	Mon 05/05/08	Mon 06/02/08
Deadline for RBHA CIS on-line pend corrections & deletes to OPS.	Tues 04/01/08	Tues 05/06/08	Tues 06/03/08
Run H74609 Create Pend correction file for AHCCCS	Mon 04/14/08	Fri 05/09/08	Fri 06/06/08
IT submit bba notification to AHCCCS for acceptance	Fri 04/04/08	Fri 05/09/08	Fri 06/06/08
New Day & Corrected Pends due to AHCCCS (12 noon)	Fri 04/04/08	Fri 05/09/08	Fri 06/06/08
AHCCCS Processing			
Files available from AHCCCS (5pm)	Fri 04/11/08	Fri 5/16/08	Fri 06/13/08
Receive AHCCCS notification	Mon 04/14/08	Mon 05/19/08	Mon 06/16/08
Run H74614 Pend Reset			
Run H74607 Pend Load			
Run H74611 Adjudication			
Cycle Completed – Files available from BHS			

Note: Any date change on the part of AHCCCS will result in a BHS date change.

CRS Encounter Production Schedule – Key Dates and Events

CRS Encounter Production Schedule – Key Dates and Events

FTP Processing Activities Contractor Submission Deadlines:	April 2008	May 2008	June 2008
1. Deadline for New Day Encounter File Submission to ADHS/CRSA - 12:00 P.M.	Mon 03/31/08 12:00 P.M.	Fri 05/02/08 12:00 P.M.	Mon 06/02/08 12:00 P.M.
2. Deadline for corrected Pend Encounters	Tues 04/1/08 12:00 P.M.	Mon 05/05/08 12:00 P.M.	Tues 06/03/08 12:00 P.M.
3. New Day & Corrected Pends due to AHCCCS (12 noon)	Fri 04/04/08	Fri 05/09/08	Fri 06/06/08
AHCCCS Processing			
Files available from AHCCCS (5pm)	Fri 04/11/08	Fri 05/16/08	Fri 06/13/08
Pended & Adjudicated Encounters Available to CRS Regional Contractors by 5:00 p.m.	Mon 04/14/08	Mon 05/19/08	Mon 06/16/08

Note: Any date change on the part of AHCCCS will result in a ADHS date change.

TPL Website Correction

The web address for submission of AHCCCS recipient Third Party Liability (TPL) information updates for verification is:

<https://cmts.hmsy.com/tplreferrals/>

ADHS Encourages Electronic Claims

The Arizona Department of Health Services requests all CRS Contractors and RBHAs to encourage their providers to submit claims electronically. The benefits of electronic claim submissions include:

- Faster claims processing
- More accurate claims entry
- Less expensive than manual data entry

Duplicate Pends

Duplicate pended encounters that are researched by the RBHAs/CRS and found not to be a duplicate encounter can be requested to be overridden, either through batch processing or AHCCCS override.

Duplicate pended encounters that are eligible for a batch override are to be included in the del-dup file submitted to DBHS each month with the override reason code of A001 (per RBHA/CRS review, not a duplicate encounter). Examples of duplicate pended encounters that are eligible for batch override are:

- Z305 Date of Service Overlap (non case management)
- Z630 Near duplicate found – from and thru dates overlap (UBs)
- Z640 Near duplicate found – dates overlap, provider not matched
- Z740 Near duplicate found
- Z760 Near duplicate found – from and thru dates overlap (HCFAs)

Duplicate pended encounters that are eligible for AHCCCS override should be submitted to the assigned Office of Program Support Representative on an excel spreadsheet. DBHS will submit the requested overrides to AHCCCS. Examples of duplicate pended encounters that are eligible for AHCCCS override are:

- Z635 Near duplicate, service dates overlap from different health plans
- Z645 Near duplicate found – dates overlap, provider not matched, different health plans
- Z680 Contiguous inpatient stay, same day admit/discharge reported by same health plan
- Z745 Near duplicate from different health plans

Duplicate pended encounters that are overridden, either through batch process or AHCCCS override are to be included in the Quarterly Deletion/Override Log.

The RBHAs/CRS can follow up by accessing the PMMIS screen EC262 (override audit trail) to see if AHCCCS has overridden a particular encounter by entering the CRN for that encounter.



Security IDs for All BHS Secure Systems

Any person needing access to the PMMIS system must submit the required paperwork and use the individual ID assigned from AHCCCS Data Security during the registration process. Under no circumstance should there be any 'sharing' of user names and/or passwords. Currently there is no limit (within reason) on the number of users available to the sites; individual providers are not authorized access to PMMIS through the Division.

The Office of Program Integrity must authorize all requests for access to CIS, Office of Human Rights, Office of Grievance and Appeals, Issue Resolution System and PMMIS (AHCCCS) databases. In order to obtain access to any of these databases, please fax or mail a copy of the appropriate User Access Request Form, User Affirmation Statement, or Confidentiality Agreement to Stacy Mobbs at (602) 364-4736.

If you have any questions, please contact Stacy Mobbs by telephone at (602) 364-4708 or by e-mail at mobbss@azdhs.gov.

Who Do I Call??

If you need assistance, please contact your assigned Office of Program Support Representative:

Eunice Argusta	Gila River Navajo Nation Pascua Yaqui White Mountain	(602) 364-4526 arguste@azdhs.gov
Javier Higuera	CPSA 26 & 27	(602) 364-4715 higuerj@azdhs.gov
Gary Szymanski	Magellan ValueOptions	(602) 364-4677 szymang@azdhs.gov
Renee Chavez	NARBHA Flagstaff CRS	(602) 364-4734 chavezr@azdhs.gov
Jerri Gray	Cenpatico 02 & 22	(602) 364-1479 grayj@azdhs.gov
Dustin Jackson	Phoenix CRS	(602) 364-4711 jacksod@azdhs.gov
Donna Logan	Yuma CRS Tucson CRS	(602) 364-4716 Logannd@azdhs.gov

Office of Program Integrity Staff

If you need assistance or to report an incident of suspected Fraud, Waste and/or Abuse, please contact us at:

Tim Stanley	Chief	stanleti@azdhs.gov (602) 364-4781
Bobby Rivera	Manager	riveraro@azdhs.gov (602) 364-4702
Stacy Mobbs	Analyst	mobbss@azdhs.gov (602) 364-4708
Sandra Reyes	Analyst	reyess@azdhs.gov (602) 364-4426
Stephanie Ortiz	Admin	ortizs@azdhs.gov (602) 364-4437

If you wish to remain anonymous, you may make a report through our Fraud and Abuse Hotline at (602) 364-3758 (locally) or 1-866-569-4927 (toll free).

If you prefer, you may write at:

Tim Stanley, Chief, Bureau of Audit Standards
Arizona Department of Health Services
Office of the Deputy Director
150 N. 18th Avenue, Suite 280
Phoenix, Arizona 85007

Or Email us at:

ReportFraud@azdhs.gov

All reports are kept confidential and may be reported to other agencies

DES Contact Number

For any changes in member enrollment (i.e. name changes, demographic changes, etc.)

DES Communications Center

Maricopa County: (602) 542-9935
Statewide: 1-800-352-8401

HCCCS CONTRACTED HEALTH PLANS CONTACT INFORMATION

*Indicates the AHCCCS Health Plan offers a Medicare Advantage/Special Needs Plan

ARIZONA PHYSICIANS IPA, INC.*

3141 N. 3rd Ave.

Phoenix, AZ 85013-4345

Behavioral Health Manager

Stacy A. Hochstadter (602) 664-5384

Fax: (602) 664-2876

E-mail: stacy_a_hochstadter@uhc.com

Please be aware that there are two underscore marks

stacy_a_hochstadter

Member Services: (800) 348-4058

HEALTH CHOICE ARIZONA*

1600 W. Broadway, Ste. 260

Tempe, AZ 85282-1136

(480) 968-6866

Behavioral Health Coordinator

Heidi Eccleston (800) 322-8670 x4423

Fax: (480) 317-3358

E-mail: heccelston@iasishealthcare.com

Member Services: (800) 322-8670

PIMA HEALTH PLAN

3950 S. Country Club Road, Suite 400

Tucson, AZ 85714

(520) 512-5500

Behavioral Health Coordinator

Melanie DiCicco (520) 243-8219

Fax: (520) 745-6592

E-mail: Melanie.DiCicco@pima.gov

Member Services: (520) 512-5500

(800) 423-3801

CARE 1st*

2355 E. Camelback, Ste. 300

Phoenix, AZ 85016

(602) 778-1800

Behavioral Health Coordinator

Donna Smith (602) 778-1834

Fax: (602) 778-1866

E-mail: dsmith@care1st.com

Member Services: (602) 778-1800

(866) 560-4042

MERCY CARE PLAN*

4350 E. Cotton Center Blvd. Bldg D. Phoenix, AZ 85040.

(602) 230-9921

Behavioral Health Coordinator Acute

Tad Gary (602) 453-6117

BH Fax: (602) 351-2316

E-mail: Tad.Gary@schalleranderson.com

Member Services: (602) 263-3000

UNIVERSITY FAMILY CARE/MARICOPA HEALTH PLAN (MHP)

2701 E. Elvira Road

Tucson, AZ 85704

(520) 874-5290 (Tucson)

Behavioral Health Coordinator

Shawnee Inez (520) 874-5214

Fax: (520) 408-4866

E-mail: sinez@uph.org

Member Services: (800) 582-8686 (Statewide)

DES/CMDP

CMDP

P.O. Box 29202

Phoenix, AZ 85038-9202

Site Code - 942C

(602) 351-2245

Behavioral Health Manager

Annette Sims (602) 351-2245 x13631

Fax: (602) 351-8529

E-mail: Asims@azdes.gov

Member Services: (602) 351-2245

PHOENIX HEALTH PLAN/ COMMUNITY CONNECTION*

7878 N. 16th St., Ste. 105

Phoenix, AZ 85020

(602) 824-3700

Behavioral Health Coordinator

Bonnie Urwiler (602) 824-3957

Fax: (602) 674-6674

E-mail: burwiler@abrzohealth.com

Member Services: (602) 824-3700