

## CLAIMS CLUES

A Publication of the AHCCCS DFSM Claims Department

June 2014

### NEMT Policy – Tribal Business Licenses Required

As published in the both February and March 2014 Claims Clues, billing manuals and on the AHCCCS website, effective April 1, 2014, non-emergency transportation providers that transport AHCCCS recipients on reservation will be required to obtain a Tribal business license from the Tribe whose reservation you are performing the service.

**A copy of the Tribal business license must be submitted to AHCCCS Provider Registration.** When auditing claims AHCCCS will ensure that this documentation is on file; if not the claims will be subject to recoupment.

### 2014 1<sup>st</sup> Quarter NEMT Quality Audits

Audits of 2014 NEMT claims with service dates from 1/1 through 3/31 have been completed. A random sampling of claims resulted in 50 providers and 360 claims.

The overpaid error rate for 1<sup>st</sup> Quarter 1014 24%

As compared to:	September 2013	17%
	October 2013	15%
	November 2013	17%
	December 2013	11%

The 1<sup>st</sup> Quarter 2014 categories with the most overpayment errors are:

- Incomplete or missing letterhead on trip report\*
- incomplete or incorrect trip report
- transport by driver for self or immediate family
- transport for service(s) not covered

\*The company's full letterhead must be in the space provided on the trip report; partial or no letterhead is not acceptable. The letterhead should be complete when the trip reports are given to the drivers for the day's transports. When the recipient is given the trip report to sign they should be able to see the company's complete information, which must match to the signage on the vehicle.

Use the Provider Billing Manuals chapter for Transportation for your guide when you have billing questions. These manuals are available online at:

[www.azahcccs.gov/commercial/ProviderBilling.gov](http://www.azahcccs.gov/commercial/ProviderBilling.gov)

**REMINDER: Transition from ICD-9 to ICD-10 code sets delayed until 10/1/2015**

On April 1, 2014, the Protecting Access to Medicare Act of 2014 (PAMA) (Pub. L. No. 113-93) was enacted, which states The Secretary of Health and Human Services may not, prior to October 1, 2015, adopt ICD-10 code sets as the standard for code sets under section 1173(c) of the Social Security Act (42 U.S.C. 1320d-2(c)) and section 162.1002 of title 45, Code of Federal Regulations.

Electronic claims submitted to the AHCCCS Administration with ICD-10 codes will be rejected from our validation system and will not be accepted into our claims system. Therefore, timely filing will not begin until a claim is submitted that is compliant with the national standard HIPAA code set transaction.

Paper claims submitted to the AHCCCS Administration with ICD-10 codes will be returned to the provider and timely filing will not begin until a claim is submitted that is compliant with the national standard HIPAA standard code set transaction.

**REMINDER: New ADA 2012 Version**

The American Dental Association (ADA) has updated their claim form on version 2012. AHCCCS will begin accepting the new form effective 6/1/2014 with a transition period through 7/31/2014, accepting both the new and the older 2006 version form. Effective 8/1/2014 AHCCCS will only accept the new ADA 2012 form and will return claims submitted on the old form.

**PERM 2014 CYCLE “Save the Date”**

The following is your invitation to the CMS provider education webinar/conference calls. We encourage all of our AHCCCS providers to take part in one of the scheduled sessions to help prepare for the coming PERM audit. Remember: your involvement is critical in the success of the audit.

### **Cycle 3 States:**

Alaska, **Arizona**, District of Columbia, Florida, Hawaii, Indiana, Iowa, Louisiana, Maine, Mississippi, Montana, Nevada, New York, Oregon, South Dakota, Texas, Washington

### **PERM Cycle 3 Provider Education Webinar/Conference Calls**

The Centers for Medicare & Medicaid Services (CMS) will host four Payment Error Rate Measurement (PERM) provider education webinar/conference calls during Cycle 3 (2014). The purpose is to provide opportunities for the providers of the Medicaid and Children's Health Insurance Program (CHIP) communities to enhance their understanding of specific Provider responsibilities during the PERM.

The PERM program is designed to measure improper payments in the Medicaid and CHIP programs, as required by the Improper Payments Information Act (IPIA) of 2002 (amended in 2010 by the Improper Payments Elimination and Recovery Improvement Act or IPERA, and the Improper Payments Elimination and Recovery Improvement Act of 2012 IPERIA).

Webinar/Conference call participants will learn from presentations that feature;

- The PERM process and provider responsibilities during a PERM review
- Recent trends, frequent mistakes and, best practices
- The Electronic Submission of Medical Documentation, esMD program

The presentations will be repeated for each session. You will have the opportunity to ask questions live through the conference lines, via the webinar, and through the dedicated PERM Provider email address at; [PERMProviders@cms.hhs.gov](mailto:PERMProviders@cms.hhs.gov) .

**Presentation materials and participant call in information will be posted as downloads on the "Providers" tab of the PERM website at;**

<http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/PERM/Providers.html>

**The Webinars are being presented on the Adobe Connect Pro platform. To test your connection in advance, launch:**

[https://webinar.cms.hhs.gov/common/help/en/support/meeting\\_test.htm](https://webinar.cms.hhs.gov/common/help/en/support/meeting_test.htm)

**There are 3 dates remaining for these Webinars:**

**Thursday June 26, 2014 3:00-4:00pm ET**

The two step audio/ webinar process is;

1. **Audio:** Login to: <https://cms.webex.com/cms/j.php?J=998353879> the call-in#/meeting ID/access code will display on your screen (keep this open) when you dial in.
2. **Webinar:** In a separate window, login to; <https://webinar.cms.hhs.gov/perm2014cycle3web/> to access the webinar.

**Wednesday, July 16, 2014, 3:00-4:00pm ET**

The two step audio/ webinar process is;

1. **Audio:** Login to: <https://cms.webex.com/cms/j.php?J=997166126> the call-in#/meeting ID/access code will display on your screen (keep this open) when you dial in.
2. **Webinar:** In a separate window, login to; <https://webinar.cms.hhs.gov/perm2014cycle3web/> to access the webinar.

**Wednesday, July 30, 2014, 3:00-4:00pm ET**

The two step audio/ webinar process is;

1. **Audio:** Login to <https://cms.webex.com/cms/j.php?J=991531095> the call-in#/meeting ID/access code will display on your screen (keep this open) when you dial in.
2. **Webinar:** In a separate window, login to; <https://webinar.cms.hhs.gov/perm2014cycle3web/> to access the webinar.

CMS encourages all participants to submit questions not addressed in the session to our dedicated PERM Provider email address at; [PERMProviders@cms.hhs.gov](mailto:PERMProviders@cms.hhs.gov) or, you may also contact **your** State PERM Representatives with any questions and for information about education and training in your state.

Please check the CMS Website and PERM Provider's page regularly for helpful education materials, FAQs, and updates at <http://www.cms.gov/PERM/>.