



Behavioral Health Redesign

# **EDI/IT BH Redesign Workgroup**

June 7, 2017

# Agenda

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Welcome

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Practitioner enrollment and affiliation

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Trading Partner Testing

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Q&A Document

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# Practitioner Enrollment

Enrollment status as of June 7th:

	Enrollments			Applications		
Provider Types	Total enrolled as of 5/10/2017	Total enrolled as of 5/24/2017	Total enrolled as of 6/7/2017	Oldest dated application	Applications in "Submit Status"	Applications Returned to Provider
LISW (Type 37)	2,059	2,161	2,205	5-23	6	70 2-7
LPCC (Type 47)	2,207	2,307	2,343	6-03	2	68 3-9
IMFT (Type 52)	52	52	54		0	2 5-11
LICDC (Type 54)	344	344	412	6-03	2	16 3-24
Nurses (Type 38)	1,018	1,051	1,051	5-23	27	129 3-22
	5,680	5,915	6,065		37	285

# Agency Affiliations

- Count of agencies with at least one affiliated practitioner:

Provider type	As of 4/10/2017	As of 4/17/2017	As of 4/24/2017	As of 5-08-2017	As of 5-22-2017	As of 6-7-2017
84 (MH)	223	233	241	254	266	270
95 (SUD)	133	147	155	171	190	203
Total:	356	380	396	425	456	473

# Agency Affiliations

- Agencies with **NO** affiliated practitioners:

Provider type	As of 4/10/2017	As of 4/17/2017	As of 4/24/2017	As of 5/08/2017	As of 5/22/2017	As of 6/7/2017
84 (MH)	106	85	90	77	67	65
95 (SUD)	154	142	134	119	101	89
Total:	260	227	224	196	168	154

# Agency Affiliations

- ODM continues efforts to reach agencies with no affiliated practitioners
- On June 1<sup>st</sup>, ODM deployed the first round of automated calls to agencies with no affiliated practitioners
  - Message encouraged agencies to ensure practitioner enrollment and affiliation before 7/1/2017
  - 67 Mental Health Agencies were contacted
  - 100 Substance Use Disorder Agencies were contacted








Department of Medicaid  
Department of Mental Health and Addiction Services

# *Trading Partner Testing – Fee For Service*



Behavioral Health Redesign

# Trading Partner Testing

Issues Identified Through UAT	Status
<del>Claims denied because of missing ORP when ORP not required</del>	<b>Complete</b> 
H0036 not bypassing TPL edits	<i>In progress</i>
5081 IOP and other services not allowed	<i>In progress</i>
6096 Detox and IOP not allowed on same day, but these 2 services were not on claim	<i>In progress</i>
1019 Supervisor has 2 IDs, one is active	<i>In progress</i>
Add-ons not looking at base codes	<i>In progress</i>
<del>5085 H2017 UT denying when delivered by trainees</del>	<b>Complete</b> 
Tiered pricing not cut back correctly	<i>In progress</i>
<del>4714 procedure denied due to age restriction</del>	<b>Complete</b> 
3001 Claim doesn't match approved prior authorization for codes that don't require prior authorization	<i>In progress</i>
<del>1013 Rendering provider not compatible with procedure code</del>	<b>Complete</b> 
<del>96118 provided by U1 psych assistant should not deny</del>	<b>Complete</b> 



# Trading Partner Testing

## Common errors with claims

Recipient not eligible for July once service dates are forwarded. Eligibility ended sometime between January and current date

Incorrect modifiers for new codes –

- Using practitioner that cannot deliver the service

- Using HE, UK modifier

Same NPI included in both rendering and supervising fields

Recipient has TPL and no indication on claim that third party was billed. Recommend using recipients with no TPL for testing or use codes that bypass TPL.

Trying to test current codes, e.g., new trading partner needing meet requirements. These agencies have been removed from our “forward date” list so they can test against current codes

Rendering or supervisor NPI not valid

- Practitioner not enrolled

- Name on claim doesn't match the name in MITS

- First and last name does not match what is in MITS

Detail line includes both rendering provider and U modifier indicating 2 practitioners delivered the service

Add-on codes must go after base code. Add-on codes must be same rendering practitioner as base code.

Place of service - SUD residential codes using POS 11 – office

No modifier or rendering provided for H0036

Primary diagnosis not covered for mental health services

## Trading Partner Testing – EDI Meetings

- ODM will continue to provide weekly status report of known issues with MITS
- Next scheduled meetings:
  - June 21, 2017    11:30 – 12:30
  - July 5, 2017     11:30 – 12:30
  - July 19, 2017    11:30 – 12:30
- Webinar registration:  
<https://attendee.gotowebinar.com/rt/6694318654325406977>

# Q & A Document

- Last updated 5/10/2017
- <http://bh.medicaid.ohio.gov/manuals>

Q&A: EDI/IT BH Redesign Workgroup <i>(Updated 5/1/2017)</i>	
Question	Answer
<b>General Questions</b>	
1. Where can I obtain a copy of the presentation and materials from this workgroup?	Materials from the EDI/IT BH Redesign workgroup may be found on the BH Redesign website under "IT Resources": <a href="http://bh.medicaid.ohio.gov/manuals">http://bh.medicaid.ohio.gov/manuals</a>
2. Whom do I contact if I have questions related to the material covered in this workgroup?	You may submit questions or topics for discussion to: <a href="mailto:Joan.Schlagheck@medicaid.ohio.gov">Joan.Schlagheck@medicaid.ohio.gov</a> and <a href="mailto:Nichole.Small@medicaid.ohio.gov">Nichole.Small@medicaid.ohio.gov</a>
<b>3. Updated 5/1/2017:</b> Where can I access the webinar recordings if I am unable to attend these meetings?	The recording for the April 29 <sup>th</sup> meeting can be found here: <a href="https://attendee.gotowebinar.com/register/7112600363774810371">https://attendee.gotowebinar.com/register/7112600363774810371</a>  The recording for the April 12 <sup>th</sup> meeting can be found here: <a href="https://attendee.gotowebinar.com/recording/7235626919604541959">https://attendee.gotowebinar.com/recording/7235626919604541959</a>

- Will continue to add questions as we receive them.

# Questions





# Appendix



## Billing Example: Correct Reporting of Supervisor

- Supervisor reported at header applies to all detail lines
- Claim will pay based on the supervisor's rate

Header Level		
Supervisor	Rendering	Billing Provider
Supervisor NPI	-	Agency NPI

Detail Level								
Line #:	DOS	Code	Units	Modifiers	Rendering	Supv	Ordering	Prior Authorization
1	7-2-17	90839	1	U9	-	-	-	-
2	7-2-17	90840	2	U9	-	-	-	-
3	7-10-17	90839	1	U9	-	-	-	-



## Billing Example: Incorrect Reporting of Supervisor

- Supervisor reported at the header applies to all detail lines
- Services that are not performed under supervision should not be reported on the same claim – the claim may adjudicate incorrectly

Header Level		
Supervisor	Rendering	Billing Provider
Supervisor NPI	-	Agency NPI

Detail Level							
Line #:	DOS	Code	Units	Modifiers	Rendering	Supv	Ordering
1	7-2-17	90839	1	U9	-	-	-
2	7-2-17	90840	2	U9	-	-	-
3	7-10-17	90839	1	U9	-	-	-
4	7-11-17	90839	1	-	LISW NPI	-	-
5	7-12-17	90839	1	-	RN NPI	-	Ordering NPI

# Update to 837P Companion Guides

- Supervisor NPI should always be reported at the header – do not report the Medicaid billing ID
- Report the Supervising Provider Name (NM1) and Supervising Provider Identifier (NM109) as shown below

Loop ID	Reference	Name	Codes	Notes/Comments
★ 2310D	NM1	Supervising Provider Name		Provider must be enrolled with Ohio Medicaid
★ 2310D	NM109	Supervising Provider Identifier		Provider NPI
2310D	REF	Supervising Provider Secondary Identification		ODM generally expects Supervising Providers to be 'Typical' Providers
2310D	REF01	Reference Identification Qualifier	G2	Provider Commercial Number
2310D	REF02	Supervising Provider Secondary Identifier		Atypical Provider ID assigned by ODM (Medicaid Billing ID)