

Secretary of State
STATEMENT OF NEED AND FISCAL IMPACT
A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Department of Human Services, Administrative Services Division and Director's Office

407

Agency and Division

Administrative Rules Chapter Number

In the Matter of:

The permanent adoption of OAR 407-120-0400(T).

Rule Caption: (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

MMIS Emergent Alternative Communication Process and Procedures

Statutory Authority: **ORS 409.050, 414.065**

Other Authority:

Stats. Implemented: **ORS 414.065**

Need for the Rule(s):

The Department-wide provider rules (OAR 407-120-0300 to 407-120-0380) govern provider enrollment and claiming using the Medicaid Management Information System (MMIS). The Department is proposing to permanently adopt the temporary rule, OAR 407-120-0400, in concert with the permanent adoption of the Division of Medical Assistance Program's rule, OAR 410-120-0027, to continue to ensure that Oregon Health Plan clients will be able to receive consistent and uninterrupted service and that providers are assured their correct and appropriate reimbursement at times that necessitate exceptions to normal, on-going communications.

Documents Relied Upon, and where they are available:

None.

Fiscal and Economic Impact:

No significant impact is anticipated. This proposed rule provides instructions to providers for an alternative process to ensure claims reimbursement in light of system errors. These instructions are intended to have the same outcome as expected of standard policy and procedure.

Statement of Cost of Compliance:

1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)):

None.

2. Cost of compliance effect on small business (ORS 183.336):

a. Estimate the number of small businesses and types of business and industries with small businesses subject to the rule:

There will be no significant impact on small businesses.

b. Projected reporting, record keeping and other administrative activities required for compliance, including costs of professional services:

No significant change.

c. Equipment, supplies, labor and increased administration required for compliance:

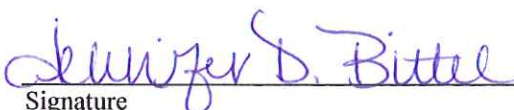
No significant changes are required.

How were small businesses involved in the development of this rule?

Small businesses were not involved in the development of this rule. The Department consulted key staff to request input and comments prior to this notice being issued.

Administrative Rule Advisory Committee consulted? If not, why?:

No. Department staff were consulted during the development of this proposed rule change. This proposed rule provides instructions to providers for an alternative process to ensure claims reimbursement in light of system errors. The instructions are intended to have the same outcome as expected of standard policy and procedure; therefore, a formal advisory committee was not used.



Signature

Jennifer Bittel, Rules Coordinator

Printed name

5/12/09

Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97301. ARC 925-2007

**CHAPTER 407
DEPARTMENT OF HUMAN SERVICES,
ADMINISTRATIVE SERVICES DIVISION AND DIRECTOR'S OFFICE**

**DIVISION 120
PROVIDER RULES**

407-120-0400

MMIS Replacement Communication Plan

- (1) The purpose of this rule is to describe the Department's plan for communicating instructions and guidance related to the Department's implementation of the replacement MMIS that began on December 9, 2008. System issues are anticipated to be identified for a period of time during and after implementation. This rule is adopted to be effective retroactively to December 9, 2008 for the purpose of providing continuity of all MMIS communication efforts throughout the transition implementation process and regular operations following the transition. By adopting this communication plan in rule, the Department seeks to assure that eligible Department clients receive all necessary and appropriate services, and that Department providers and PHPs are correctly reimbursed for covered services provided to eligible clients.
- (2) To the extent necessary to accomplish the purposes of this rule, the Department shall provide guidance and instructions related to MMIS for providers and PHPs using its web site and MMIS provider announcements.
 - (a) In cases of limitations or system errors in the replacement MMIS, the Department shall provide update information and important action required in concert with, or in place of, normal established procedures.
 - (b) In other cases, the Department shall provide instructions and guidance about the use of revised or improved functionality that is available through the replacement MMIS, such as the use of the web portal.
- (3) Providers and PHPs must follow all applicable instructions given on the Department's web page and any provider announcements for the dates specifically noted in the communications, or if a date is not specified, until further instructions are provided. Department web site information and links to specific topics may be accessed at: http://www.oregon.gov/DHS/healthplan/tools_prov/main.shtml.
- (4) This rule does not amend existing rules or contracts that require providers or PHPs to confirm eligibility, respond to requests for prior authorization, submit claims or encounter data, or comply with any other rule or contract that imposes obligations on a provider or PHP as a condition of receiving reimbursement for services. This rule is intended to provide assurance to providers and PHPs that the MMIS-related processes for meeting those obligations are being addressed by the Department by providing guidance

and instruction related to the provider's or PHP's interface with MMIS processes, and by identifying the resources providers and PHPs may use to obtain information during this time of transition to the replacement MMIS and during regular MMIS operations.

- (5) The Department shall work with providers and PHPs by providing instructions and guidance to assure that service delivery and reimbursement disruptions related to transition to the replacement MMIS are minimized. Providers and PHPs must appropriately document all eligibility, services, authorization, claims, and payment information during the transition time, and their efforts to comply with instructions and guidance provided by the Department, so that reimbursement may be correctly provided.
- (6) Providers and PHPs must immediately communicate to the Department any issues they encounter that are not addressed in the Department's instructions or guidance in seeking eligibility information or activities related to reimbursement for services through MMIS, errors discovered in the correct amount of any reimbursement received for those services, or in applying the instruction or guidance to resolve an issue.
- (7) After the transition period is complete, the Department shall continue to implement this communication plan as long as necessary during regular MMIS operations in order to assist providers and PHPs with technical and system requirements of the replacement MMIS.

Stat. Auth.: ORS 409.050, 414.065

Stats. Implemented: ORS 414.065