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**Oregon Department of Human Services
HIPAA Transactions and Code Sets
2005 Monthly Message**

October Contents

DHS Compliance deadline 1

Scheduled interruptions to "O" screens access 2

DHS Systems Alert Notification 2

834 Enrollment Medicaid Eligibility End Dates (PHP only) 2

Dental Providers and Claims Processing 3

Does OMAP want my National Provider Identifier (NPI)? 3

Medical Billing Workshops 3

270/271 Eligibility Inquiry/Response Transactions 4

276/277 Claims Inquiry/Response Transactions 4

Paper Remittance Advices (RA) or EOBs 4

Secondary Payer or Crossover Claims 4

Production File Naming Convention Changes 5

HIPAA Monthly Messages Become Quarterly 5

DHS Compliance deadline: December 30, 2005

After December 30, 2005, DHS can no longer accept proprietary eligibility inquiries or electronic claims in the NSF and UB-92 formats on the Bulletin Board for covered entities. That's fewer than 53 business days away!

OMAP cannot make any exceptions or extensions after this date.

Scheduled interruptions to "O" screens access

"O" screens. This testing will cause "blackout times" that will interrupt screen access through the end of the year. During October, we expect the system to be down one hour each day. The blackout times will increase to two hours in November and three hours in December.

During these blackout times, your organization will need to make other arrangements for client eligibility or claims verification. We hope this provides your organization an opportunity to test your replacement verification options. OMAP has sent notifications to all affected providers indicating the day the interruption will occur and for how long. Please forward the information to all interested parties.

If you did not receive a notification or have any questions or concerns about this process, please contact our Chief Data Steward, Terry L Grover at (503) 947-5488 or e-mail terry.l.grover@state.or.us.

DHS Systems Alert Notification

Periodically DHS may experience delays in our automated processes, such as electronic funds transfers or direct deposit due to all banks being closed on a Monday holiday. So that you may be notified via e-mail of such events with as much advance notice as possible, Oregon DHS has added a service to our Web site called a DHS EDI System Alerts page.

We will relay system status information to all DHS electronic processing partners who subscribe to the service. We added many of you to the e-Subscription list already. To receive these systems updates, or alerts, please e-Subscribe at: <http://www.oregon.gov/DHS/admin/hipaa/edi-sys-alerts.shtml>.

834 Enrollment Medicaid Eligibility End Dates (PHP only)

The Medicaid eligibility end date information for the Prepaid Health Plans (PHP only) will be included in the HD04 segment of the 834 Enrollment file effective October 14, 2005. The information will appear in the 834 enrollment files beginning October 17, 2005.

For the code crosswalk of the eligibility end dates please go to:

http://egov.oregon.gov/DHS/admin/hipaa/guides_man.shtml.

As requested in February 2004, DHS has moved the REF17 PERC indicator from the 2000 loop to the 2300 loop. This change took effect October 19, 2005.

Dental Providers and Claims Processing

OMAP's Information Systems unit has completed programming the Oral Cavity Designation (OCD) for all dental claim types (paper and electronic). We are now able to receive and process the OCD code. We will internally crosswalk that code to a tooth number. If you submit the OCD and the tooth number, we will use the tooth number rather than the OCD code sent.

If you have any questions, please contact Provider Services at (1-800) 336-6016 or e-mail them at OMAP.prov-callcenter@state.or.us.

Does OMAP want my National Provider Identifier (NPI)?

Yes, OMAP is now collecting NPIs. Once you have received an NPI designation, contact the DHS EDI Registration Unit at (503) 947-5347 or <http://www.oregon.gov/DHS/admin/hipaa/publications.shtml> to access the NPI collection form. Please include your OMAP provider number, NPI number and the taxonomy code(s) you selected when you registered for your NPI. OMAP will not require you to use your NPI when billing us until May 23, 2007, the NPI compliance date. You may submit both the NPI and the OMAP provider ID numbers on claims now, however, our system will only recognize your OMAP provider number at this time. You may fax your completed form to (503) 945-5359 or e-mail dhs.hipaatesting@state.or.us.

If you have any questions please contact the EDI Registration Team at (503) 947-5347 or as indicated above.

Medical Billing Workshops

OMAP is offering FREE Medicaid billing workshops in five regions around the state November through January. The sessions are designed to help you bill OMAP correctly the first time and to assist you in preventing common billing errors.

We encourage both new and experienced Oregon Health Plan (OHP) **fee-for-service** billers to participate. More information and registration forms are available online

<http://egov.oregon.gov/DHS/healthplan/notices_providers/billingomap.pdf>.

Space is limited, so we will take reservations on a first-come first-served basis.

To register, either:

- Fax (503) 947-5221, or
- E-mail omap.training@state.or.us, or
- Call (503) 945-6549.

270/271 Eligibility Inquiry/Response Transactions

OMAP is ready to receive both real-time and batch 270/271 transactions to respond to eligibility inquiries.

276/277 Claims Inquiry/Response Transactions

OMAP is ready to receive batch 276/277 transactions to respond to claims inquiries. DHS is currently seeking a 276/277 real-time entity to pilot test these transactions.

If you are interested in using the 270/271 or the 276/277 transactions, please contact DHS' Chief Data Steward, Terry L. Grover, at 503 947- 5488 or e-mail at terry.l.grover@state.or.us.

Paper Remittance Advices (RA) or EOBs

DHS' goal is to continue encouraging our providers to submit claims electronically. OMAP will be evaluating how we can influence more providers to use electronic RAs. We will discontinue sending paper RAs early next year to those providers who receive the HIPAA-compliant 835 RA transactions.

Secondary Payer or Crossover Claims

Are you sending secondary payer claims (a.k.a., Coordination of Benefits or crossover claims) using the paper OMAP 505, or are you having Medicare forward the claims to OMAP? If so, the electronic format is more accurate, more efficient

and more cost effective. If you are submitting electronically to OMAP in the 837 formats you can send in secondary claims electronically as well.

You must test these types of claims with our HIPAA Testing Team if you have not previously. We encourage you to test all scenarios of these claims prior to submitting them for payment. For testing instructions and other tips on testing, please contact the HIPAA Testing Team at DHS.HIPAAtesting@state.or.us or call 503-947-5347.

Production File Naming Convention Changes

To improve tracking of submission files and response files, DHS has modified our naming convention to allow for more than three characters for identifying the file. Effective immediately, you may begin using 3-10 alphanumeric characters in the file name.

EXAMPLE:

Was: t837p_***.dat

Expanded: t837p_*****.dat

Must be lower case.

For detailed information, please contact the HIPAA Testing Team at DHS.HIPAAtesting@state.or.us or call (503) 947-5347.

HIPAA Monthly Messages Become Quarterly

The HIPAA Monthly Message schedule is changing. The HIPAA Message will now be produced on a quarterly basis. For more information contact the HIPAA Compliance Analyst, William D. Johnson, Jr., at (503) 945-5889 or e-mail william.d.johnson@state.or.us.