

Agenda

MMIS / NF Conference Call Meeting

Tuesday, September 21, 2010

1:00 pm – 2:00 pm

Conference line 866-249-5325

Participant Code 881335

Attendees:

MEMBERS	Present	MEMBERS	Present
Jo Birney, CNA/NF Staff SPD		Patricia Krewson, DMAP Claims	
Tom Jaeger, SPD Budget		Mary Durrant, DMAP Claims	
Carolyn Mauser, Fld Svc Mgr		Bonni Rose, DMAP Provider Svcs	
Veneda Frank, Operations Mgr		Vivien VanHatten, DMAP Provider Svcs	
Dave Allm, NF Prog. Coord.		Katie Digmann, DMAP Asst Prov Svc Mgr	
Becky Callicrate, CMAO Coord.		Linda Kremer, Business Support Unit	
Jennifer Smith, DMAP Trainer		Bambi Pappas, Special Claims Analyst	
Marilyn Wade, PHP Coord.		NF Providers	

Agenda topics:

Facilitators: Bonni Rose and Katie Digmann		
	Presenter	Time
Welcome and DHS introductions	Katie Digmann	5 minutes
Days 1-20 processing	Bambi Pappas	5 minutes
Co insurance work around – update	Bambi Pappas	10 minutes
Recipient Liability Defect #DF27347	Katie Digmann	5 minutes
PHEC and Kaiser	Marilyn Wade	5 minutes
Timely Filing bypass status	Patricia Krewson	5 minutes
Facility question and answer	All facilities	As time allows

Hand outs

N/A	

Meeting Notes-August 10, 2010 Teleconference

Jennifer Smith – Web Portal Basic Training is listed on DMAP Tools for Providers

<http://www.oregon.gov/DHS/healthplan/webportal.shtml>

There are no program-specific trainings for SPD providers. We do offer Provider Web Portal classes that SPD providers are welcome to attend. Live training is limited to Portland and Salem at this time, and most training is offered via Webinar.

Patricia Krewson – Bambi Pappas is now primary contact for SNF Coinsurance Claims. Please continue to send claims for the workaround to the Claims Unit at 2575 Bittern St NE, Salem OR 97301. Mary Durrant will be working on other projects but will still be available as a resource for Bambi.

Mary Durant – SNF Coinsurance days 1-20 cannot be on the same claim form as any of days 21-100 when sending claims for the workaround. Claims are being sent back and will include example claim. NPI and DMAP # are both required. Billed amount should always be the full amount (most likely the Medicare paid amount plus the coinsurance amount). The qualifying hospital stay on the claim must be the original hospital stay. If those occurrence dates are less than 20 days prior to the dates of service on the claim, even if coinsurance is due, DMAP cannot pay. Those are being sent back for the facility to correct the original qualifying stay dates and resend. UB claims may be hand written but make sure everything is very clear. The full dollar amount needs to be filled out with dollars and cents, no slashes. Post hospital is not requiring the work around.

Carolyn Thiebes from the Office of Payment Accuracy and Recovery can give information about OHP Regional Meetings.

Phone: 503 378-3507

E-mail: Carolyn.Thiebes@state.or.us

Mary Durant – Claims that have already paid at basic rate are coming in as new claims and are being denied as duplicates. To be paid for complex rate you must do as an adjustment to the original paid claim.

Please see Provider Matters for updated information.

<https://apps.state.or.us/cfl/OHP/index.cfm?fuseaction=controller.provider&s=1>

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