



Division of Medical Assistance Programs

Information Memorandum Transmittal

Donald Ross, Manager
DMAP Policy and Planning Section

Number: DMAP-IM-12-037

Authorized Signature

Issue Date: 5/7/2012

Topic: Medical Benefits

Subject: Provider announcement: 5/18 reprocessing planned for some pharmacy claims

Applies to:

- All DHS employees
- Area Agencies on Aging
- Children, Adults and Families
- County DD Program Managers
- County Mental Health Directors
- Seniors and People with Disabilities
- Other (please specify): DHS and OHA staff and others identified on the SPD, CAF, AMH and DMAP transmittal lists

Message:

DMAP will mail the following letter to 22 pharmacies. It informs them that on the weekend of May 18, DMAP will reprocess approximately 100 pharmacy claims.

- This activity will not affect payments they have already received for these claims.
- The prescriptions for these claims were written by providers who were on the federal Health and Human Services (HHS) List of Excluded Individuals/ Entities at the time the claims were paid. Services provided or prescribed by excluded providers cannot be paid with federal health care program dollars.
- The MMIS will be updated to prevent claims prescribed or provided by excluded providers from paying in the future. When this happens, we will let providers know.

If you have any questions about this information, contact:

Contact(s):	DMAP Pharmacy Program
E-mail:	dmap.rxquestions@state.or.us



Date: May 4, 2012

«AddressBlock»

To: Pharmacy providers

From: Don Ross, Manager
Policy and Planning Section, DMAP

For billing ID: «Billing_ID»

Subject: Reprocessing planned for some claims – **Your payments will not be affected**

During the weekend of May 18, 2012, the Division of Medical Assistance Programs (DMAP) plans to reprocess approximately 100 pharmacy claims from **Oct. 1, 2009**, through **Sept. 30, 2010**.

Your paper remittance advice will show this activity as an overpayment recovery; however, this activity **will not** affect any payments you have already received from DMAP for these claims.

Why is this happening?

We have learned that the prescriptions for these claims were written by providers who were not eligible for payment with federal health care program dollars during this time period.

DMAP will reprocess the original payment to reflect this information.

What you should do?

No action is needed on your part.

After learning of this processing error, we're working to correct our system to prevent this from happening again. We will notify you when the change is made in our system.

What you will see on the paper remittance advice

The Claim Adjustments section will list the affected claims by original Internal Claim Number (ICN).

- Each ICN will have an adjustment ICN (beginning with "52") to indicate reprocessing.
- The "Detail EOBs" will list Explanation of Benefits (EOB) code *EOB 0974 - PRESCRIBING PROVIDER EXCLUDED*.
- The total amount reprocessed will be listed as a "Net Overpayment."

The Financial Transactions section will list the following information:

- **Non-Claim Specific Payouts** will show amounts equal to the “Net Overpayment” amounts.
- **Accounts Receivable** will list the adjustment ICNs, reprocessed amounts and a zero dollar balance.

What you will see on the electronic remittance advice or Provider Web Portal

Your electronic remittance advice (ERA) may list these adjustments as overpayment recoveries. The Provider Web Portal will show the adjustment ICN as a denied claim.

In both the ERA and Provider Web Portal, the reason for the adjustment will be Adjustment Reason Code 184 - *The prescribing/ordering provider is not eligible to prescribe/order the service billed.*

Thank you for your support

Thank you for your understanding as we continue to identify opportunities to help prevent Medicaid fraud and abuse. As always, we appreciate your support of the Oregon Health Plan and the services you provide to Oregon’s most vulnerable people.

Questions?

- **About this announcement:** Please contact the DMAP Pharmacy Program at dmap.rxquestions@state.or.us.
- **About the HHS Office of Inspector General (OIG) Exclusions Program and the federal List of Excluded Individuals/Entities:** Visit the HHS OIG Web site at <http://oig.hhs.gov/exclusions/index.asp>.
- **About how to read the paper Remittance Advice:** Review the updated information on our Web site at www.oregon.gov/OHA/healthplan/tools_prov/read-ra.shtml.

Help us improve future announcements:

Answer six survey questions about this provider announcement at <https://survey.emp.state.or.us/cgi-bin/qwebcorporate.dll?idx=J2ESKJ>.