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DMAP Policy and Planning Section

**Number:** DMAP IM 12-109

**Authorized Signature**

**Issue Date:** 10/17/2012

**Topic:** Medical Benefits

**Subject:** Provider announcement - Rebill DMAP for maternity case management claims that incorrectly denied due to CCO enrollment

**Applies to:**

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

**Message:**

DMAP will post the following announcement and distribute to the [OHP Provider Announcements](#) eSubscribe list.

It explains that since August 1, DMAP had been incorrectly denying maternity case management claims for services to Coordinated Care Organization members.

DMAP corrected this error on Friday, Oct. 12. Providers can now rebill DMAP for claims that denied due to this error.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Sharon K. Hill, MMIS Implementation Coordinator		
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# Maternity case management providers

## Rebill DMAP for claims that incorrectly denied due to CCO enrollment

From August 1, 2012, until October 12, 2012, maternity case management (MCM) claims billed to the Division of Medical Assistance Programs (DMAP) incorrectly denied with *EOB 0090 – Service is covered by a managed care plan. Claim must be billed to the appropriate managed care plan.*

On the Provider Web Portal or electronic remittance advice, the denial displays with *Adjustment Reason Code 24 - Charges are covered under a capitation agreement/managed care plan.*

### Why is this happening?

Effective August 1, we incorrectly updated our payment system to indicate these MCM services as part of Coordinated Care Organization (CCO) contracted services. However, these services are not currently included in CCO contracts or global budget payments. We corrected this error on Friday, Oct. 12.

The services subject to this error were:

- G9001, COORDINATED CARE FEE, INITIAL RATE
- G9002, COORDINATED CARE FEE, MAINTENANCE RATE
- G9005, COORDINATED CARE FEE, RISK ADJUSTED MAINTENANCE
- G9006, COORDINATED CARE FEE, HOME MONITORING
- G9011, COORDINATED CARE FEE, RISK ADJUSTED MAINTENANCE, LEVEL 5
- G9012, OTHER SPECIFIED CASE MANAGEMENT SERVICE NOT ELSEWHERE CLASSIFIED

### What do you need to do?

Please rebill DMAP for MCM claims that were denied due to CCO enrollment from August 1 to October 12.

We apologize for the error and any confusion or inconvenience it caused. As we continue to work toward system improvements, we appreciate your patience and understanding.

### Questions?

**If you have any questions about this announcement**, contact the Provider Services Unit at [dmap.providerservices@state.or.us](mailto:dmap.providerservices@state.or.us) or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:00 p.m. and Friday 10 a.m. to 4:00 p.m. (phone lines closed 11:30 a.m. to 12:30 p.m. daily).

