



Division of Medical Assistance Programs

Information Memorandum Transmittal

Donald Ross, Manager
DMAP Policy and Planning Section

Number: DMAP IM 11-106

Authorized Signature

Issue Date: 10/28/2011

Topic: Medical Benefits

Subject: **Provider announcement:** Nov. 12 reprocessing of claims incorrectly billed to DMAP

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 741 providers. It informs them that DMAP will reprocess incorrect payments made to these providers the weekend of Nov. 12. It also explains the following:

- This reprocessing will not change payments DMAP made to providers.
- DMAP is reprocessing to the affected claims reprocessing to show that these claims should have been billed to the managed care plan; however, providers will not need to refund DMAP or bill their managed care plans.

If you have any questions about this information, contact:

Contact(s):	Sharon Hill, MMIS Implementation Coordinator		
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E-mail:	sharon.k.hill@state.or.us		



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Date: October 28, 2011

To: Hospitals, pharmacies and medical providers

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

Subject: Nov. 12 reprocessing planned for certain Oct.-Dec. 2010 claims – Payments will not change

The week of Nov. 7, 2011, the Division of Medical Assistance Programs (DMAP) plans to reprocess claims paid from **Oct. 1, 2010**, through **Dec 31, 2010**, for services that should have been billed to the client's OHP managed care plan. Unfortunately, our system paid these claims in error.

This activity will not change payments you received for these claims, and will not affect any payments that process the weekend of Nov. 12. You do not need to refund DMAP or re-bill the managed care plan for these claims.

We apologize for any inconvenience this may cause. As we continue to work toward system improvements, we appreciate your patience and understanding.

Why is this happening?

DMAP incorrectly paid for claims that should have been paid by the client's managed care plan. We now need to reprocess these claims to correct information in our system.

What you should do?

No action is needed on your part. Please do not refund DMAP or bill the managed care plan for these adjustments. Please review the other side of this letter to learn how this reprocessing will report on your paper remittance advice (RA).

What you will see on the Nov. 12 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 original ICN will show the paid amount deducted from the claim.
- The adjustment ICN will show zero amount paid for the claim; however, the payment amounts to restore a zero balance will display in the Financial Transactions section of the RA.
- The “Detail EOBs” will list Explanation of Benefits (EOB) code *EOB 0090 – Service is covered by a managed care plan. Claim must be billed to the appropriate managed care plan.* This message gives the reason for the adjustment; you do not need to take any action based on this message.

The Financial Transactions section will list the reprocessed payment amounts in the “Non-Claim-Specific Payouts” section with Reason Code (*EOB*) 8467 – *This Accounts Receivable has been increased by a miscellaneous action.*

The Remittance Advice Summary will list the total amount of reprocessed payments in the “System Payouts (Non-Claim Specific)” field.

If you also receive the **electronic remittance advice** (ERA, or 835 transaction), your ERA should list these adjustments as a zero-dollar recoupment.

Thank you for your support

Thank you for your continued support of the Oregon Health Plan and the services you provide to Oregon’s most vulnerable people.

Again, we apologize for any inconvenience this may cause, and appreciate your patience as we continue to make system improvements.

Questions?

If you have any questions about this announcement: Please contact the Provider Services Unit at dmap.providerservices@state.or.us or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:30 p.m. and Friday 10 a.m. to 4:30 p.m. (phone lines closed 11:25 a.m. to 12:30 p.m. daily).

For more information about how to read the paper RA: Go to the OHP 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>.