

Donald Ross, Manager
DMAP Policy and Planning Section

Number: DMAP-IM-11-109

Authorized Signature

Issue Date: 11/09/2011

Topic: Medical Benefits

Subject: Provider announcement: Recovery of claims incorrectly billed to DMAP

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 mail the following letter to 97 providers. It informs them that DMAP will recover incorrect payments made to these providers the weekend of Nov. 19. It also explains the following:

- When an expectant OHP mother is enrolled in an OHP medical plan, the delivery and newborn services need to be billed to the mother’s medical plan (not DMAP). Otherwise, DMAP will recover the incorrect payments.
- However, because newborns are enrolled with their mother’s plan no earlier than 2 weeks after birth, providers need to wait to make sure the newborn is enrolled in the mother’s plan before billing the plan.
- To avoid future recoveries and make sure newborns are enrolled in the plan as soon as possible, providers should report the birth to OHP Central Processing Center using the [Newborn Notification form](#) (DMAP 2410).

If you have any questions about this information, contact:

Contact(s):	Sharon Hill, MMIS Implementation Coordinator		
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Date: November 9, 2011

To: Hospitals and medical providers

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

Subject: Nov. 19 payment recovery planned for newborn services claims

The weekend of Nov. 19, 2011, the Division of Medical Assistance Programs (DMAP) plans to recover payments made from **Oct. 1, 2011**, through **Oct. 31, 2011**, for services to newborn clients. These services should have been billed to the mother's OHP managed care plan. Unfortunately, our system paid these claims in error. The incorrect payments will be deducted from payments you receive in the Nov. 19 payment cycle.

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

Your electronic remittance advice (ERA) should list these adjustments as overpayment recoveries.

Why is this happening?

Whenever possible, our system enrolls OHP newborns in their mother's managed care plan effective the date of delivery, so that you can bill the mother's plan for all newborn services. However, newborn enrollment generally occurs no sooner than two weeks after the delivery date.

Unfortunately, DMAP was billed for newborn services before enrollment took place. When this happens, DMAP will automatically recover these payments.

What you should do?

To be paid for the October 2011 newborn claims, please bill the managed care plan. Verify the newborn's plan enrollment using the Client ID and original date of service listed for the adjusted claim.

- Send claims and a copy of this letter as proof of timely filing to the appropriate managed care plan.
- These plans are expecting your claims, and are committed to working with you to resolve any issues you may have. Please contact the plan for more information.

To avoid future recovery efforts:

- **Report the birth to OHP as soon as possible.** Send a completed Newborn Notification form (DMAP 2410) to OHP Central Processing. The sooner we know about the newborn, the sooner we can complete newborn enrollment.
- **Bill the mother's managed care plan for newborn services.** Please wait until the newborn is enrolled in the mother's plan, then bill the plan.

What you will see on the Nov. 19 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 recovery activity.
- 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.*
- The total amount recovered for the claim will be listed as a "Net Overpayment."

The Financial Transactions section will list the adjustment ICNs, recovery amounts and any outstanding balance with *EOB 8400 - Accounts receivable has been established - The amount will be deducted from your future payments.*

For more information

- **Provider recovery of overpayments or appeals:** Please see Oregon Administrative Rules 410-120-1397(7), 410-120-1560 and 410-120-1580 in DMAP's General Rules, found at www.dhs.state.or.us/policy/healthplan/guides/genrules/main.html.
- **Newborn notification form (DMAP 2410):** To report OHP births, please use this form found at <https://apps.state.or.us/Forms/Served/oe2410.pdf>.

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).

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>.