

# Alaska Medical Assistance NEWSLETTER

First Health Services, in conjunction with the Division of Health Care Services, publishes this monthly newsletter that offers providers useful information, monthly reminders, and tips on how to make billing easier.

September Holiday Closures

■ S = State Offices Closed  
■ SF = State & FHSC Offices Closed

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## Chronic and Acute Medical Assistance (CAMA) Eligibility

The Chronic and Acute Medical Assistance (CAMA) program, unlike Medicaid, receives no federal funding. CAMA is an Alaska state-funded program that provides medical assistance for Alaska residents who do not qualify for Medicaid and do not have access to any other health care coverage. Eligibility is determined by the Division of Public Assistance (DPA).

To be eligible for CAMA, a person must have a diagnosis of a terminal illness, cancer requiring chemotherapy, diabetes, diabetes insipidus, chronic hypertension, chronic mental illness (as defined in 7AAC 43.1990), or chronic seizure disorder. A CAMA recipient with one of the diagnoses listed above is considered to have a CAMA covered medical condition. Alaska Medical Assistance will reimburse enrolled providers for the following services rendered to eligible CAMA recipients:

- Physician services for a CAMA covered medical condition. (Physician services provided in an inpatient hospital or nursing facility are not covered).
- Three (3) prescriptions filled or re-filled in a calendar month. Prescriptions cannot exceed a 30-day supply and must be prescribed for a CAMA covered medical condition.
- Limited medical supplies necessary for monitoring or treating a CAMA covered medical condition. No durable medical equipment (DME).

- Prior-authorized outpatient hospital radiation and chemotherapy services for cancer treatment. (Updated 09/03)

In addition to having a covered medical condition, CAMA recipients must meet the following financial eligibility requirements.

Household income must be:

- \$300 a month or less for one person
- \$400 a month or less for two people
- add \$100 for each additional person

CAMA applicants must have less than \$500 in countable resources that could be used to pay medical bills. Countable resources include cash, bank/credit union accounts, or personal property. CAMA does not count an applicant's home, one vehicle, income producing property, property that is used for the applicant's job (boat, fishing gear, etc.), or a fishing permit.

If you have further questions regarding CAMA eligibility, please contact FHSC's Provider Inquiry Unit at 907-644-6800 or 1-800-770-5650 (in-state, toll-free), or refer to Section III of your provider billing manual.

## Updates...

The following has been updated and is available to you on FHSC's Website:

- Behavioral Health Policy & Procedure Manual (<https://alaska.fhsc.com/providers/priorauth/ppmanuals.asp>)

# PROVIDER TRAINING

Providers and billing staff are encouraged to attend training. There is no charge to attend, as training is sponsored under contract with the State of Alaska, Department of Health and Social Services, Division of Health Care Services. All participants should bring their provider billing manual(s).

Because of limited space, you are encouraged to register early; registration for each class will close one week prior to the date of the class. Only registered attendees (with a confirmed registration) are guaranteed a seat; those without a confirmed registration may be turned away. If registration requests exceed the available seats, additional sessions may be offered.

Register for classes in one of the following ways:

- Complete the online registration form on the First Health Services Website at <http://alaska.fhsc.com>
- Complete the registration form found in the Alaska Medicaid Training Schedule and fax to First Health Services at 907-644-5900 or mail to P.O. Box 240808, Anchorage, Alaska 99524-0808

After your registration is received and processed by First Health Services, you will receive a confirmation for the classes in which you are enrolled.

The training schedule through September 2005 is available on First Health Services' Website at <http://alaska.fhsc.com>. If you would like an electronic version sent to you, please contact the FHSC training unit at [anctraining@fhsc.com](mailto:anctraining@fhsc.com). If you prefer a paper copy of the schedule, please contact the First Health Services Provider Inquiry Unit at 907-644-6800 or 1-800-770-5650 (toll free in Alaska).

## TRAINING E-MAIL AND FAX NUMBER

Medicaid's training e-mail address ([anctraining@fhsc.com](mailto:anctraining@fhsc.com)) is provided for your convenience to send in your questions and comments regarding training offered by FHSC, and to submit completed training registration forms.

Training also provides a fax number (907-644-5900) for your convenience in sending in registration forms or correspondence to FHSC's training department. Remember, our professional staff is ready to assist you, whatever your training needs may be.

**Please do not send sensitive or confidential information via e-mail, as this is not a securely protected environment.**

Watch the RA messages and the upcoming Newsletter for the release of the October-December '05 Training Schedule.

## September Training

<b>09/09/05</b> Transportation & Accomodation	<b>Teleconference</b> 10:00 am – 12:00 pm
<b>09/15/05</b> Mental Health/Substance Abuse	<b>Teleconference</b> 1:00 pm – 3:00 pm
<b>09/16/05</b> Inpatient/Outpatient Hospitals Long Term Care	<b>Teleconference</b> 9:00 am – 11:00 am  1:00 pm – 3:00 pm
<b>09/28/05</b> Introduction to Alaska Medicaid	<b>Anchorage</b> 8:30 am – 5:00 pm
<b>09/29/05</b> Introduction to Alaska Medicaid	<b>Anchorage</b> 8:30 am – 5:00 pm
<b>09/30/05</b> Transportation & Accomodation	<b>Teleconference</b> 10:00 am – 12:00 pm

## Transportation & Accommodation Teleconference

First Health Services will be conducting a Transportation/Accommodation Teleconference on Friday, September 30, 2005 at 10:00 am. To register for this teleconference go to FHSC's Website at <http://alaska.fhsc.com>, click **Training**, then click **Teleconference Materials**. The registration form is located under **Transportation/Accommodation**. You may submit the registration form using any of these options:

- 1) Download the form, fill it out, and email it to [anctraining@fhsc.com](mailto:anctraining@fhsc.com)
- 2) print the form and return it to FHSC via fax at (907) 644-5900, or
- 3) mail it to:  
First Health Services Corporation  
Attention: Training Unit  
1835 South Bragaw, Suite 200  
Anchorage, Alaska 99508-3469.

The Training Unit will contact registered participants and provide the phone number and access code to join the teleconference. Registered participants will need to obtain teleconference materials prior to Friday, September 30, 2005. All materials are available and can be downloaded or printed from FHSC's Website at <http://alaska.fhsc.com>. Click **Training**, then click **Teleconference Materials**. Participants will need the Transportation/Accommodation presentation, packet, and tips found at the bottom of the list of Teleconference Materials on the Website.

If you are unable to access the FHSC Website to obtain the registration form or teleconference materials, please contact the provider trainers at (907) 644-6800 or 1-800-770-5650 (in state, toll-free).



### ALASKA CARE COORDINATION

First Health Services Corporation recently hired two new Care Coordinators:

Lyn Tashea, LPC	(907) 644-8119	email: <a href="mailto:lyntashea@fhsc.com">lyntashea@fhsc.com</a>
Denise Marenah, MSW:	(907) 644-8118	email: <a href="mailto:dmarenah@fhsc.com">dmarenah@fhsc.com</a>

Care Coordination in Alaska is a service that works hand-in-hand with constituents looking for solutions to effectively and efficiently link children to levels of care appropriate to their clinical needs. Care Coordinators provide information regarding adequate resources to achieve the best possible outcomes for Alaska's children with special needs.

We are currently updating the Web page with more comprehensive resources for providers to enhance level of care for Alaska's youth. Watch for updates and changes on the revised Care Coordinator Website at [www.alaska.fhsc.com/links](http://www.alaska.fhsc.com/links)

If you have additional questions, please call or email one of our Care Coordinators for more assistance.

**Emergency Treatment for Aliens** is a special category of the Medicaid program that provides coverage for aliens who do not meet the Medicaid citizenship requirements. An alien eligible under this special category is not considered to be a regular Medicaid recipient. Coverage is limited to the treatment of emergency medical conditions.

Non-qualified aliens include illegal aliens. These aliens either were never legally admitted to the United States for any period of time, or were admitted for a limited period of time and did not leave the U.S. when that time expired. These aliens are eligible only for emergency coverage for aliens. Because they will not be issued a Social Security Number (SSN), they are not required to provide or apply for one.

Because Medicaid coverage for this eligibility category is limited to emergency services, most aliens will apply for emergency medical assistance only after the services have been provided. Hospitals in the state have been instructed to send medical records to the Division of Health Care Services (DHCS) office in Anchorage for review. However, there may be times a hospital does not automatically send the medical records and the caseworker must assist the individual in obtaining medical documentation to support the emergency medical claim. When assistance is requested, the caseworker should request that the hospital submit medical documentation, including the discharge summary to:

Division of Health Care Services  
Attention: Physician Program Manager  
4501 Business Park Blvd., Suite 24  
Anchorage, AK 99503-7167

The DHCS will:

1. Determine if the services received were of an emergency nature.
2. Determine the covered dates of service.
3. Provide written authorization to the provider, who will then provide a copy of this authorization to the alien.

When an alien applies for emergency treatment, they must provide a copy of the written approval from DHCS to their caseworker.

Some aliens may be lawfully admitted to the United States but only for a temporary or specified period of time as legal non-immigrants. These aliens are never qualified aliens. However, in some cases, an alien in a currently valid non-immigrant classification may meet the State residence rules. When this is the case, such an alien is eligible for Medicaid for the treatment of emergency medical conditions as defined in 3211.11 (below) if the individual also meets the other eligibility criteria of the State Medicaid Manual. Such individuals may possess valid employment authorization documents (Form I-688B or Form I-766).

Among otherwise ineligible aliens are visitors, tourists, some workers, and diplomats who are currently lawfully admitted as legal non-immigrants. These aliens would have the following types of INS documentation: Form I-94, Arrival-Departure Record; Form I-185, Canadian Border Crossing Card; Form I-186, Mexican Border Crossing Card; Form SW-434, Mexican Border Visitor's Permit; or Form I-95A, Crewman's Landing Permit. These aliens are not eligible for Medicaid because of the temporary nature of their admission status. The following categories of individuals are ineligible aliens:

- Foreign government representatives on official business, their families, and their servants
- Visitors for business or pleasure, including exchange visitors
- Aliens in travel status while traveling directly through the U.S.
- Crewmen on shore leave
- Treaty traders and investors and their families
- Foreign students
- International organization representatives, their families, and their servants
- Temporary workers, including agricultural contract workers
- Members of foreign press, radio, film, or other information media and their families.

3211.11 Definition of Treatment of Emergency Medical Condition. Aliens meeting the requirements of 3211.9, qualified aliens described in 3211.5 or 3211.6 whom the State has not elected to cover, and ineligible aliens described in 3211.10 who meet the residence and other Medicaid eligibility criteria will be eligible for Medicaid only for treatment of medical conditions meeting the following definition:

A. To be eligible for emergency services, an alien must meet all eligibility requirements for Medicaid, except for a declaration of satisfactory immigration status and verification of that status.

B. Such care and services are necessary for the treatment of an emergency medical condition of the alien, as defined in subsection C, provided such care and services are not related to either an organ transplant procedure or routine prenatal or post-partum care.

C. The alien has, after sudden onset, a medical condition (including emergency labor and delivery) manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably result in:

- Placing the patient's health in serious jeopardy
- Serious impairment to bodily functions
- Serious dysfunction of any bodily organ or part

D. For purposes of this section, all labor and delivery is considered emergency labor and delivery.

These and other references are taken from the CMS Website. For more information go to [http://www.cms.hhs.gov/manuals/45\\_smm/sm\\_03\\_3\\_3210\\_to\\_3256.asp](http://www.cms.hhs.gov/manuals/45_smm/sm_03_3_3210_to_3256.asp) or call FHSC Provider Inquiry Unit at (907) 644-6800 or (800) 770-5650 (toll free in Alaska)

## Other Tidbits...

### IN QUEUE TIME

Please listen carefully to FHSC's Prior Authorization and Provider Inquiry Unit telephone message. The system has recently been updated. Information has been provided that will assist you in expediting your call.

### ADJUSTMENTS

Please remember to sign your adjustments upon returning them to FHSC. Any unsigned documents will be returned for final completion and slow the payment process. Complete paperwork allows for timely payment. If you need assistance in completing any claim forms or adjustments, please call FHSC at (907) 644-6800 or 1-800-770-5650 (toll-free in Alaska).

### EXPLANATION OF BENEFITS (EOB)

Be sure to send in the relevant EOB(s) for the single recipient billed on an individual claim. Information pertaining to all other recipients should be marked out so it is unreadable.



**ERASE PERSONAL HEALTH INFORMATION (PHI) BEFORE DISCARDING THE OLD HARD DRIVES**

**REMEMBER, WHEN THROWING AWAY OLD COMPUTERS, ALWAYS ERASE THE HARD DRIVES. PHI CAN BE OBTAINED BY ANYONE SEARCHING THE HARD DRIVE UNLESS IT HAS BEEN PROPERLY ERASED. PROTECT BOTH YOUR ORGANIZATION'S REPUTATION AND YOUR PATIENTS' PHI BY DOUBLE CHECKING THAT ALL DATA STORED ON YOUR COMPUTER IS DESTROYED - - BEFORE YOU SEND YOUR HARD DRIVES TO THE TRASH PILE.**

### ATTACHMENTS

Each claim should be able to stand alone. For example, if you receive an EOB from an insurance company with multiple Alaska Medical Assistance recipients on it, make a copy of the EOB and attach a separate copy of the EOB to each individual claim submitted to Alaska Medical Assistance. Each claim should include attachments associated with that claim only. Any additional recipients indicated on the EOB should be marked out so that it is not readable. The only recipient information that should be readable on the EOB is the one for which you are seeking reimbursement from Alaska Medical Assistance.

### *NATIONAL PROVIDER IDENTIFIER*

The National Plan and Provider Enumeration System (NPPES) collects identifying information on health care providers and assigns each a unique National Provider Identifier (NPI). If you need an NPI, you can apply online by going to <https://nppes.cms.hhs.gov/NPPES/StaticForward.do?forward=static.instructions>. The estimated time to complete the NPI application form is approximately 20 minutes. If you would like a paper application, please call 1-800-465-3203.

Health care providers are required by law to apply for a National Provider Identifier (NPI). For the latest NPI information, visit [www.cms.hhs.gov/hipaa/hipaa2](http://www.cms.hhs.gov/hipaa/hipaa2).



P.O. Box 240808  
Anchorage, AK 99524-0808