

 **First Health**
Services Corporation
A Coventry Health Care Company
 1835 S. Bragaw St., Suite 200
 Anchorage, AK 99508-3469
<https://alaska.fhsc.com>
 1-800-770-5650
 1-907-644-6800

December '05



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.

December Holiday Closures

■ = State Offices Closed
 ■ = State & FHSC Offices Closed

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What if my **First Level Appeal** is Denied?

If First Health Services (FHSC) denies your first level appeal, you have sixty days from the date on the denial letter to submit a second level appeal to the Division of Health Care Services (DHCS).

A second level appeal must be submitted in writing (not on FHSC's appeals form). A copy of **all** paperwork that was sent to FHSC with the first level appeal must be included:

- copy of the first level appeal denial letter
- a copy of the original claim
- any attachments that came with the claim
- the adjudicated page from the Remittance Advice (RA) showing the denial
- FHSC first level appeals form, or original cover letter with the recipient's name and ID number, provider name and ID number, DOS, procedure code, diagnosis codes, contact name and phone number, and their reason for requesting an appeal
- also, include any new documentation which now supports the second level appeal request

Mail Second Level Appeals to:

Division of Health Care Services
Claims Appeal Section
 4501 Business Park Blvd., Suite 24
 Anchorage, AK 99503-7167

Providers will be notified in writing of the final decision made by DHCS.

For more information regarding the Appeals process, see Section III of your Provider manual.

Why do I need to check eligibility?

Alaska Medical Assistance will reimburse you only for services provided to someone who is eligible for Medical Assistance (and for the services provided) on the date the services are provided. Therefore, before providing services, you should check the following information:

- ~ Whether the patient is eligible for Medical Assistance
- ~ Patient's age (and whether the service(s) being provided is(are) covered for someone of that age)
- ~ Whether the patient is eligible under Medical Assistance for the service(s) being provided. Refer to the Eligibility Codes listed on page G-4 of the IHS/Tribal Facility Services billing manual for the recipient eligibility codes that are able to receive services at Tribal locations.
- ~ Whether Medical Assistance covers the service(s) being provided

How do I check if someone is eligible?

To make sure a patient is eligible for Medical Assistance,

- ~ Check the recipient's Medical Assistance identification card or coupon.
- ~ Call the Eligibility Verification System (EVS) at 1-800-884-3223.
- ~ Call First Health Services' Provider Inquiry Unit at (907) 644-6800 or 1-800-770-5650 (toll-free in Alaska) or fax to (907) 644-8126 or (907) 644-8127.

If the recipient has an Alaska Medical Assistance sticker, you should keep one for your records or make a copy.

Note - This information is found on pages G-1 through G-4 in the IHS/Tribal Facility Services Manual, and in Section III of other Provider billing manuals. For more information on this subject, please refer to your billing manual.

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 in the Alaska Medical Assistance Training Schedule and fax to First Health Services at 907-644-9845 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.

COMING SOON!

Watch for the announcement of the
2006 Annual Training Schedule.

meanwhile....

for classes being offered for the remainder of November, and in December 05, training schedules are available on First Health Services' Website at <http://alaska.fhsc.com>. If you would like a paper copy, please contact FHSC's Training Unit at anctraining@fhsc.com, or contact FHSC's Provider Inquiry Unit at 907-644-6800 or 1-800-770-5650 (toll free in Alaska).

DECEMBER

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|-----------------------------------|-----------------------|
| 12/06/05 | Anchorage |
| Appeals II | 10:00 am – 12:00 pm |
| Transportation & Accommodation | 1:00 pm – 4:00 pm |
| 12/09/05 | Teleconference |
| Appeals II | 10:00 am – 12:00 pm |
| Transportation & Accommodation | 1:00 pm – 4:00 pm |
| 12/13/05 | Anchorage |
| Introduction to Alaska Medicaid | 8:30 am – 11:30 am |
| Eligibility | 11:30 am – 12:30 pm |
| Completing Claim Form: UB-92 | 1:30 pm – 2:15 pm |
| Completing Claim Form: CMS-1500 | 2:30 pm – 3:15 pm |
| Medicare Crossovers | 3:30 pm – 4:15 pm |
| 12/14/05 | Anchorage |
| Remittance Advice | 8:30 am – 10:00 am |
| RTDs | 10:15 am – 11:45 am |
| Appeals | 1:00 pm – 1:45 pm |
| Prior Authorizations (PAs) | 2:00 pm – 2:45 pm |
| 12/15/05 | Anchorage |
| Mental Health/Substance Abuse | 1:00 pm – 3:00 pm |

**TRAINING has a new FAX #:
907-644-9845**

TRAINING EMAIL AND FAX NUMBER

Medicaid's training email address (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 (907-644-9845) 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 email, as this is not a securely protected environment.

WEEKEND PA BEGINS 10/29/05

FHSC's Prior Authorization Unit has hired a representative to assist you with your after-hours emergency travel needs. The hours for weekend assistance will be:

Saturday - 8-5PM

Sunday - 12-4PM

REBILLING A CLAIM

When a claim is being rebilled, it is not necessary to mail the claim to the attention of a specific person. This may cause a delay in the processing of the claim and could possibly cause a missed cycle, or timely filing (depending on how close to timely filing the specific claim is being submitted).

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

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.

SMALL RECEIPTS

FHSC is not able to image receipts that are small. Please copy small receipts onto a 8.5 x 11 sheet of paper before mailing in for better imaging. This process will assist FHSC in processing your claims in a more timely manner.

Bits n' Pieces of information to assist you...

Advantages of EDI Transactions:

- 1. Reduced claims processing time.**
- 2. Reduced pended or denied claims.**
- 3. Reduced data entry error.**
- 4. Increased cash flow to the provider.**

AN APPEALING IDEA

A provider may request review of a Medical Assistance claim if payment of an initial claim was denied or reduced, or if payment was reduced due to a recoupment action (recovery of an overpayment) by Medical Assistance. The appeals process is discussed in Section III of your billing manual. In all cases, the provider must adhere to the timely filing requirements.

CLAIMS *RESOLUTION* TIPS

- Locum tenens must be enrolled with Alaska Medicaid if providing services to Alaska Medicaid recipients.
- Physician collaborator services must be billed using the SA modifier. The supervising physician is reimbursed lesser of billed charges or 85% of the RBRVS rate.

The 835 (Electronic RA) registration form and other information can be found on FHSC's Website at <http://alaska.fhsc.com>. Choose HIPAA, then choose Agreements. The form is located near the bottom of the page.

Providers need to obtain a Submitter ID in order to directly receive an 835, otherwise the Billing Agent is able to receive it on the providers' behalf.

If you have further questions regarding the 835, please call the HIPAA support hotline at (907) 644-6800, option 3, or 1-800-770-5650 (toll-free in Alaska), option 4.

ENROLLMENT EXPIRATIONS, RENEW BY DECEMBER 31, 2005

Occupational, business, retail pharmacy or state licenses, certifications, registrations, and permits that are due to expire at the end of the year must be renewed and forwarded to First Health Services Corporation (FHSC) by December 31, 2005 to avoid a lapse in your Alaska Medicaid eligibility.

If any of the above expires on December 31, 2005, and FHSC does not receive your updated information by that date, your claims payment may be delayed. As a result, claims for dates of service on or after January 1, 2006, may not be reimbursed until after FHSC receives your updated information.

In order to ensure continued enrollment in Alaska Medicaid and continued payment of Medicaid claims, please mail or fax a copy of

your updated information to FHSC's Provider Enrollment Unit:

First Health Services Corporation
Provider Enrollment Unit
P.O. Box 240808
Anchorage, AK 99524-0808
Fax: (907) 644-8126

If you have any questions, please contact FHSC's Provider Enrollment unit at 907-644-6800 or 1-800-770-5650 (toll-free in Alaska).

TRAVEL REQUESTS

Medically necessary travel requests for Alaska Medicaid recipients must be made by the referring provider, the receiving provider or a community health aide. Once the provider has contacted the First Health Services Prior Authorization department and been given an authorization number indicating travel approval, the provider should contact the recipient and instruct them to call the State Travel Office at 1-800-514-7123 to receive confirmation of travel availability and times. If any ancillary services are required, such

as lodging and meals, the recipient will be required to find a hotel provider that currently accepts and is actively enrolled in AK Medicaid. Any extensions in travel must also be done by the referring provider, receiving provider or the community health aide. Recipients may contact the Recipient Services Helpline at 1-800-780-9972 for lists of enrolled hotel and taxi providers.