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February 18, 2011

ATTENTION: All Home and Community Based Waiver Providers

CLAIMS WITH SPAN-DATES CANNOT CROSS SERVICE RATES

Effective **March 1, 2011**, Medicaid waiver providers **will not** be allowed to submit a claim line with dates of service that cross February 28th and March 1st, 2011. To ensure proper payment, any services rendered on or after March 1, 2011 should be billed separately from services rendered prior to this date. Claim lines that span February and March 2011 service dates will be denied. This billing change is due to new regulations regarding Medicaid payment rates for Personal Care Services and Home and Community Based Waiver Services.

For example, if the services were rendered from February 25, 2011 through March 4, 2011, then two (2) claims must be submitted.

One claim will encompass services rendered from February 25, 2011 through February 28, 2011.

24. A.	DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES		E. DIAGNOSIS POINTER	F. \$ CHARGES
	From	To							(Explain Unusual Circumstances)			
	MM	DD	YY	MM	DD	YY		CPT/HCPCS	MODIFIER			
1	02	25	11	02	28	11						

The second claim will cover the dates of service from March 1, 2011 through March 4, 2011.

24. A.	DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES		E. DIAGNOSIS POINTER	F. \$ CHARGES
	From	To							(Explain Unusual Circumstances)			
	MM	DD	YY	MM	DD	YY		CPT/HCPCS	MODIFIER			
1	03	01	11	03	04	11						

Please make sure to use the appropriate prior authorization number that corresponds with the dates of service submitted on your claim.

If you have questions, please call the ACS Provider Inquiry Unit at 907.644.6800, option 1 or 800.770.5650, option 1, 1 (toll-free in Alaska).