

3-2011

MaineCare Matters, March 2011

Office of MaineCare Services

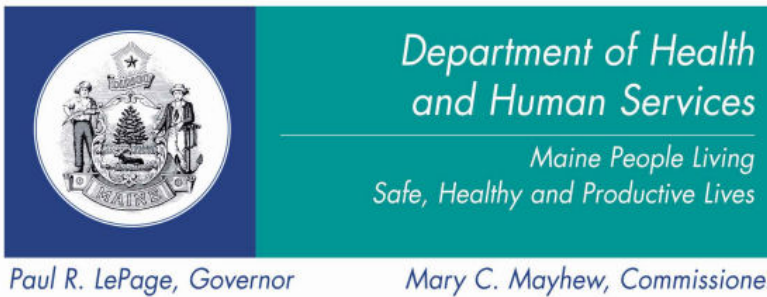
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MaineCare Matters March 2011

Managed Care Project Update: Timeline Changed

The MaineCare Managed Care Project team will be re-evaluating the proposed model design along with other potential model options that may leverage current Department initiatives and expand on operations that are already in place.

To allow time for this evaluation, the project will no longer have May 1st as the target date for releasing a Request for Proposals. Stakeholder meetings will resume once the options have been evaluated and narrowed.

In a message to stakeholders, the Department stated “The Department and MaineCare remain committed to the goals that we have developed through the managed care planning efforts over the last months, including the goals of measuring and rewarding quality outcomes, encouraging a health focus for the population, and aligning the incentives of the state, providers and members.”

Provider Focus Group Sessions

MaineCare will host meetings statewide for providers to air concerns and to see a system demonstration. Meetings will be held in Machias, Caribou, Bangor, Lewiston, Augusta, and Portland.

The morning sessions will include:

- Overview of Known Issues and progress report on resolving these
- Small-group discussion on how MIHMS is working, and what can be improved

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Upcoming Meetings

MaineCare Managed Care Project meetings have been suspended until evaluation of current and alternative models is completed.

Dental Advisory Committee 5:00 p.m. – 7:00 p.m., Wednesday, March 9, 2011

Physician Advisory Committee 3:00 p.m. – 5:00 p.m. Thursday, April 14, 2011

All meetings are held at 442 Civic Center Drive, Augusta, Maine.

For more information, please visit [MaineCare's website](#).

Who to call

As of February 1, 2011, MaineCare has only one call center for provider inquiries: 1-866-690-5585. If you are calling about a claim with a date of service 8/31/2010 and earlier, contact the [Provider Relations Specialist](#) assigned to your county. Your Provider Relations Specialist can also answer questions about MaineCare policy.

Billing Tips of the Month

Services that are designated as "exempt" from payment from Medicare or other insurers should be billed on a separate claim from services that are payable through other insurances. MIHMS will deny claims at the claim level, not an individual line level, when looking for supplemental payer information.

When a claim has been denied, it should be resubmitted, not adjusted. Submitting an adjustment on a denied claim can cause payment errors.

Checking Member Coverage and Benefits

Trading Partners can check a member's coverage and benefits online. To use this function,

- Step #1 [Sign in as a Trading Partner](#)
- Step #2: Choose Form Entry/Eligibility or Patient Roster/Primary Care Roster
- Step #3: Search for the member.

The [Member Eligibility User Manual](#) has recently been updated. It gives you tips on how to find the member's address, other insurance coverage, eligibility type, and more.

Got questions about how to use the online tools? Contact Provider Services at 1-866-690-5585.

Send Money (back to MaineCare)

CMS Streamlines Incentive Program for Electronic Health Records (EHR)

CMS announced it has simplified and streamlined a portion of the Medicaid EHR Incentive Program. This change makes it easier for Eligible Professionals (EP) to participate in the program.

The CMS Final Rule, effective July 2010, required EPs to document the costs of the certified EHR system. In addition, EPs had to “contribute” 15 percent of the costs. This requirement no longer applies as CMS updated this rule in December 2010.

The CMS rule now states:

1. EPs are no longer required to submit documentation such as receipts, cost data, or proof of purchase proving they have met the 15% contribution. EPs **will** have to attest to adopting, implementing, or upgrading EHR technology.
2. EPs may receive the maximum incentive payment of **\$63,750** if all program requirements are met.
3. The Federal government and states will not audit the costs of EHRs or whether or not the provider made a contribution toward the cost. Instead, the maximum amount allowable under the rule will be used as a proxy and accepted as meeting the requirements of the law.

For questions and to keep up with the latest news, please visit the [MaineCare HIT website](#).

To receive automatic updates about the program, you can also [subscribe to MaineCare’s HIT list serve](#).

MaineCare Policy Changes

To stay up to date with MaineCare rulemaking, please visit the [Policy & Rules page](#) on MaineCare’s website. You can also subscribe to an RSS Feed for MaineCare Policy Updates. To subscribe, visit the [MaineCare Headline News Page](#).

New Tools for News Hounds

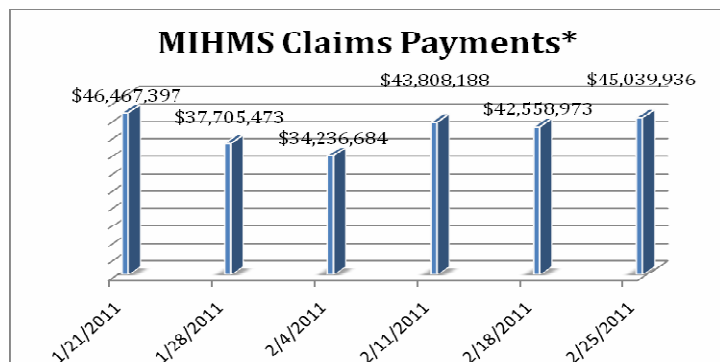
MaineCare now offers RSS feeds – a simple way for you to get the news you need at your convenience. Our Headline News service lets you pick the topics you want to track, and to search by keyword in any topic – even the ones you don’t subscribe to.

Topics are:

- Claims Processing
- Pharmacy
- Policy-Related News
- Provider Enrollment & Maintenance, and
- Health Information Technology.

To subscribe, visit [MaineCare Headline News](#).

MIHMS Snapshots



* Excluding pharmacy claims

For the week ending March 4, 2011, six major system issues were resolved:

- FQHC reimbursement method
- Classification Report implemented
- Vaccine administration fee for hospitals
- Nursing facility reimbursement for physical, occupational, and speech therapy
- LCSW, LMSW, and LCPCs working for hospitals
- Interpreter services.

Five more issues are expected to be resolved by March 11:

- Correct the rate paid to Advance Practice Registered Nurses, psychiatric care
- Improve Prior Authorization turnaround time
- Reduce Medicare claims that are pended
- Expand eligibility data on the HIPAA 270 and 271 transactions
- Ensure that all payments from third parties

Contact Us

Call:

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Write:

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