

PROVIDER INQUIRER

November 1st, 2007

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Other Insurance Rejections

When the Eligibility Verification System (EVW) shows that a beneficiary has other insurance, and the beneficiary states that they no longer have the coverage, the other insurance must be reported on your claim in order to avoid receiving a rejection. The provider may contact the Third Party Liability Unit (TPL) to have the information regarding the other insurance updated in our files. Once the information is updated the provider may submit claims without the other insurance information reported. TPL can be contacted by fax or Email. The fax number is 517-346-9817. The Email address is TPL_Health@michigan.gov. The subject line of your email should read OI Info.

New Policy Bulletins

The bulletins below were published during the previous month. It is very important that all providers are aware of new Policy Bulletins that are published. All applicable Policy Bulletins will be incorporated into the new quarter of the on-line updated Medicaid Manual. To view the

new policy bulletins online you can visit www.michigan.gov/medicaidproviders >> Medicaid Policy Bulletins. If you have any questions on the Policy Bulletins above, please contact Provider Inquiry at 1-800-292-2550 or ProviderSupport@michigan.gov.

Issue Date	Bulletin Number	Subject
October 1, 2007	MSA 07-57	Revised Dental Prior Authorization Form (MSA-1680-B)
October 1, 2007	MSA 07-56	Delayed Implementation and Clarification of Tamper Resistant Prescription Pad Requirement; NPI Pharmacy Compliance Plan
October 1, 2007	MSA 07-55	Refill Restriction for Narcotic Analgesics
October 1, 2007	MSA 07-54	Beneficiary ID Numbers
October 1, 2007	MSA 07-53	Revision of Ambulance Base Rate Billing Policy

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THE CORNER

Community Health Automated Medicaid Processing System

Provider Revalidation Updates

Implementation of the on-line CHAMPS Provider Enrollment Revalidation system is only 3 months away. As Provider Revalidation training winds down common questions arise at the training sessions. Some of the questions are listed below however to view the complete list of questions and answers visit: www.michigan.gov/medicaidproviders >> CHAMPS.

Question: How many levels of "Ownership Interest in Other Medicare/Medicaid Entities" will be required to be completed?

Answer: If the employed provider has greater than 5% interest in another Medicare or Medicaid Entity, this will need to be reported.

Question: Does Medicaid Health Plan Provider information get updated from CHAMPS?

Answer: No, Medicaid Health Plans will continue to maintain their own Provider Enrollment, Benefits Administration, Prior Authorization, and Claims Processing Systems. Only Fee-For-Service Medicaid information should be submitted to CHAMPS.

Question: Will MDCH provide a training manual for CHAMPS Provider Enrollment?

Answer: Yes, a training guide will be available in the future on our CHAMPS website for providers to access.

There are **limited spaces** available at the following Provider Revalidation trainings for those interested in attending a session: 11/07/07 - Ingham County, 11/07/07 - Oakland County, 11/08/07 - Wayne County, 11/20/07 - Kent County, 11/26/07 - Marquette County.

Registration is **required** for all sessions, visit www.michigan.gov/medicaidproviders >> Medicaid Provider Training Sessions, and fill out the on-line registration form. These sessions apply only to Provider Revalidation, billing sessions will resume in 2008.

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Proposed Medicaid Changes

Below are the proposed Policy Bulletins that are posted online. Please review them online at www.michigan.gov/medicaidproviders >> Proposed Medicaid Changes. Make sure all comments have been submitted by the Comment Due Date below.

Comment Due Date	Notice Number	Subject
November 30, 2007	0738-DRG	Update the DRG Grouper from Version 24.0 to Version 25.0 and Rebase Hospital DRG Weights and Rates for 2008
November 23, 2007	0735-MIHP	Revised Maternal Infant Health Program (MIHP) Prenatal Risk Factor Eligibility Screening Form (MSA-1200); Required Use of Electronic Prenatal Screener
November 16, 2007	0736-QAAP	Quality Assurance Assessment Program (QAAP) Collection

The FINAL NPI Countdown Column

As you all know, MDCH implemented the NPI on October 1, 2007. Some technical issues did occur in the change over. For the most part these technical issues have been resolved. Please refer to www.michigan.gov/medicaidproviders >> Provider Updates for all updates to the NPI issues and resolutions to those problems that have been solved.

One of the issues that still are outstanding is with the 835 Electronic Remittance Advices. Currently the 835 is not reporting back the correct NPI. This problem is documented and currently being worked on diligently. MDCH will have this issue resolved by the November 15, 2007 pay cycle.

Signing Off

This will be the last NPI Countdown article that will be included within the Provider Inquirer. For future updates on NPI or references for NPI questions you can always go to the MDCH NPI website at www.michigan.gov/mdch >> Providers, and then click on the NPI link at the top of the page. Thank you to all of the Providers who helped MDCH with implementing the NPI.