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Billing Ambulance Multiple Transports

When billing for Multiple Transports per Beneficiary on the same date of service the following documentation must be provided:

- Number of transports,
- Originating and termination locations,
- Ambulance requester(s) name,
- Reason for multiple transports on the same date,
- Number of times each transport was provided, and
- If the transport is for anything other than further treatment, the reason for transport must be provided.

An easy to use document will be available soon to provide the above information at our website under Provider Tips/Ambulance Providers/Multiple Transports per Beneficiary. This form may be sent in with the claim or through the Documentation EZ Link which is available to providers in Livingston, Macomb, Monroe, Oakland, St. Clair, Washtenaw and Wayne Counties.

Return trips are considered Multiple Transports if a break in service has occurred. An example is when the ambulance provider is available to respond to other requests for service between transports.

Continuous or Round Trip Transportation is when the transport is considered one run. An example is when a physician decides that the ambulance provider should wait at the hospital while a beneficiary is being stabilized in order to transport the beneficiary to a more appropriate hospital for care. In this scenario the provider would bill for one run, mileage and waiting time only.

For additional questions on billing ambulance charges with multiple transports, please contact Provider Inquiry at 1-800-292-2550 or ProviderSupport@michigan.gov.

PROVIDER INQUIRER

June 1st, 2007

www.michigan.gov/mdch



NPI Countdown Column



Good News from CMS!

Centers for Medicare & Medicaid Services (CMS) will be publishing the NPPES Data Dissemination Notice in the Federal Register. The Notice is now on display at the Office of the Federal Register. The Notice describes the policy by which CMS will make certain NPPES health care provider data available to covered entities under the Health Insurance Portability and Accountability Act (HIPAA) and to others.

* NPPES health care provider data that are required to be disclosed under the Freedom of Information Act (FOIA) will be made publicly available on June 28, 2007, 30 days after the publication date of the Notice.

* The FOIA-disclosable data will be made available in an initial file, available for download from the Internet, with monthly update files also available for download from the Internet, and in a query-only database whereby users can query by NPI or provider name.

* The Notice encourages health care providers who have been assigned NPIs to review their NPPES data at this time and make any necessary updates or corrections prior to the end of the 30-day period to ensure that their information is accurate when disclosed by CMS. (Health care

providers who are covered entities under HIPAA are required by regulation to update their NPPES data within 30 days of any change.)

* The Notice states that health care providers who wish to delete any NPPES data that was not required to be furnished in order to obtain an NPI may do so prior to the end of the 30-day period if they prefer that those data not be disclosed by CMS.

An advance copy of the Notice is available at <http://www.cms.hhs.gov/NationalProviderStand/Downloads/DataDisseminationNPI.pdf> on the CMS NPI website.

MDCH NPI Contingency Plan

On April 2, 2007 CMS announced the option for covered entities not fully able to comply with the NPI regulations by May 23, 2007 to develop a contingency plan to allow continued acceptance of legacy provider identifiers on claim forms for a certain period of time after the compliance date of May 23, 2007.

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PROVIDER INQUIRER

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On April 25, 2007, MSA issued bulletin **MSA 07-22** with the contingency plan for MDCH. In this bulletin, MDCH has extended the NPI-only deadline from **May 23, 2007 to October 1, 2007**. On May 23, 2007, MDCH will be requiring the NPI and the legacy ID in a dual strategy format on all claim forms (professional, institutional, and dental). MDCH is currently accepting the ADA 2006 paper claim form, and began accepting the UB 04 claim form on May 23. Because MDCH acceptance of the new CMS 1500 (08/05) was delayed until June 1, paper claims for professional services submitted prior to June 1 should have only reported the Medicaid legacy ID number. After June 1, the CMS 1500 (08/05) must have both the NPI number and the legacy ID number.

Key Points of the Bulletin:

May 23, 2007 to October 1, 2007, MDCH will require the NPI and the legacy ID on all claim forms. New informational edits will be implemented.

October 1, 2007- NPI will be mandatory and accepted as the only form of identification on claim forms. The informational edits will become rejection edits. If the NPI is not on a claim form, the claim will be rejected.

For a detailed description of the MDCH contingency plan, please log on to www.michigan.gov/medicaidproviders >>Medicaid Policy Bulletins >> MSA 07-22.

If you have not reported your NPI to Medicaid yet, do it today!

If you have not already applied for an NPI number, please do so soon. It is important that you report your NPI numbers to Medicaid as soon as possible. Without your NPI numbers on file, Medicaid may not be able to crosswalk your claims back to your Medicaid Provider ID number, which could cause a potential lapse in payment.

You can apply for your NPI with NPPES online at <https://nppes.cms.hhs.gov/> or call toll free at 1-800-465-3203. You may also contact NPPES for NPI questions regarding the status of an application, forgotten or lost NPI numbers, lost NPI notification letters, trouble accessing NPPES, forgotten NPPES password/user ID or if you need to request a NPI paper application.

Please continue to watch our website for frequent updates with NPI information. Any questions may be directed to the Provider Inquiry Unit at 1-800-292-2550 or you can email your NPI questions to npi@michigan.gov.

PROVIDER INQUIRER

May 1st, 2007

www.michigan.gov/mdch

THE CORNER

Community Health Automated Medicaid Processing System

CHAMPS Training Begins

The Provider Outreach and Education teams will be on the road from June through November at various locations throughout Michigan. The purpose of these trainings will be to provide information to all providers about the Provider Enrollment revalidation which will occur in **CHAMPS**. The Provider Enrollment subsystem will be the first piece of **CHAMPS** that will be evident to most providers.

To ensure that all providers are prepared for the revalidation, the Provider Outreach and Education teams will be providing Regional Trainings, which are posted at the website, as well as visiting large Group providers. During the training, we will be briefly presenting information on what the new system will look like and how to navigate through the new system. We will be focusing on the information providers need to revalidate (the mandatory fields) and helping providers understand the new **CHAMPS** Provider Enrollment subsystem.

If you would like to attend a Regional Training session, please visit the website for a list of the trainings at www.michigan.gov/medicaidproviders >> Medicaid Provider Training Sessions. All sessions posted are for the **CHAMPS** Provider Enrollment subsystem. Registration is mandatory, so please go online and register today.

Is there something about **CHAMPS** you want to know about but we haven't mentioned? Please let us know. MDCH is always looking for input from the provider community, so please submit any suggestions or comments to CHAMPS@michigan.gov.