



AHCCCS

CLAIMS CLUES

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AHCCCS FEE for SERVICE NON-EMERGENCY MEDICAL TRANSPORTATION (NEMT) CHANGES

AHCCCS covers medically necessary non-emergency transportation within certain limits for all members based on member age and eligibility, as specified in the Arizona Administrative Code (A.A.C.) R9-22-211.

Non-emergency transportation is not covered for Emergency Services Program recipients

Medically Necessary Non-Emergency Transportation Services are covered under the following conditions:

1. The medical or behavioral health service for which the transportation is needed is a covered AHCCCS service.
2. The member is not able to provide, secure or pay for their own transportation, and free transportation is not available, and
3. The transportation is provided to and from the nearest appropriate AHCCCS registered provider.

Claim Changes:

Beginning with service-dates 7/1/2013 and forward all Fee for Service NEMT claims must be submitted with the new AHCCCS standard Daily Trip Report. The Trip Report should not be altered.

Effective with service dates 8/1/2013 and forward, any non-emergency transport claim that is submitted without the completed standard Daily Trip Report will be denied.

It is the provider's responsibility to correct a claim that has been denied.

If a recipient's transport involves multiple destinations then the daily trip report must document each segment of the transport, including the full address of each location as well as the times and odometer readings.

Trip Report Requirements:

The size of the trip reports should be 8 ½ x 11 and in black and white.

Provider Registration changes:

Non-emergency medical transport providers (provider type 28) completing Provider Participation Agreements on or after 7/1/13 must complete the online training module and submit the training certificate in order for their applications to be processed.

Providers in this category re-enrolling will need to complete the online training module and submit the training certification along with all other required documents

Documents required as part of the registration packet are:

- Copy of registration for each vehicle
- Companies must submit copies of insurance for each vehicle and must submit copies of their employee's driver's licenses upon request. Upon renewal of insurance a copy must be submitted to AHCCCS
- Proof of vehicle insurance for individual's not employed by a company
- For metered vehicles a copy of licensure from the Department of Weights and Measures is required.

Fraud and Abuse:

Fraud is defined by Federal law (42 CFR 455.2) as:

"...an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to himself or some other person. It includes an act that constitutes fraud under applicable Federal or State law."

Abuse is defined by Federal law (42 CFR 455.2) as:

"...provider practices that are inconsistent with sound fiscal, business, or medical practices, and result in an unnecessary cost to the Medicaid program, or in reimbursement for services that are not medically necessary or fail to meet professionally recognized standards for health care. It also includes recipient practices that result in unnecessary cost to the Medicaid program."

The AHCCCS Office of Inspector General audits and investigates providers and members who are suspected of defrauding the AHCCCS program, recovers overpayments, issues administrative sanctions, and refers cases of suspected fraud for criminal prosecution.

Provider incentives offered to recipients:

Provider incentives such as gift cards, free meals, or any other cash in kind “freebies” to recipients for using the transportation services are in violation of the Federal Criminal Penalties Statute 42 USC 1320a-7b (Section 1128 B of the Social Security Act).

Among other impermissible activities, this law prohibits individuals from (knowingly and willfully) offering or paying any remuneration, whether it is cash or in kind, to anyone for the purpose of inducing that individual to order or arrange for any service or item for which payment may be made by a federal health care program, including Medicaid. The offer or payment may be direct or indirect. Such conduct is considered a felony with the possibility of imprisonment up to 5 years as well as a fine not to exceed \$25,000.

**CMS APPROVED SUPPLEMENTAL WAIVER PAYMENTS FOR
OPTION 1 & OPTION 2 ENDS 12/31/13**

Those providers that have selected the option 1 payment methodology submit spreadsheets on the 20th of each month, for previous month’s activities. The final spreadsheet for December would normally be due on January 20th 2014 for dates of service through December 2013; however, AHCCCS has extended the spreadsheet submission deadline until **March 31st of 2014** to allow any remaining services to be submitted.

Dates of service after 12/31/13 should not be submitted as the waiver will no longer be in effect.

If you have any questions please email Rebecca.Fields@azahcccs.gov.

PERM AUDIT-WHERE DO YOU STAND?

PERM reviews will be starting soon. In 2011 the errors caused by providers not providing documentation of provided services to the PERM Contractors was reduced significantly, however we would like to reduce this type of error to zero occurrences this year. You may be receiving your payments from AHCCCS; however, when PERM begins the contractors will again be contacting you by phone and letter to obtain medical documentation to support the sampled claims. It is imperative that we have the correct address for the location of your medical records and documentation. If your address in our system is not correct and the contractor is unable to obtain the documentation for the sampled claim either because the notice doesn't reach you or because you do not provide the documentation to support the claim, the State of Arizona will be cited for an error. We have three addresses in our system: a correspondence address, a payment address and a service address. Please make sure to report any address or phone number changes to AHCCCS now so that we can keep our system up to date & be ready for the PERM audits. REMEMBER, if we are cited with an error on a claim the Federal Government mandates that we recoup the funds for that claim from you. Please help us to help you.