CLAIMS CLUES

A Publication of the AHCCCS DFSM Claims Department

July 2015

Coding/POS Updates

Effective 01/01/2015 the following CPT codes are set up to allow Place of Service (POS) in the office setting (11): 22510, 22511, 22512, 22513 and 22514.

NEMT Trip Report Issues

The “letterhead” box at the top left of the AHCCCS Trip Report must be completed with the provider’s information before the recipient is asked to sign the trip report. The recipient must be given the opportunity to verify the trip report’s provider information as compared to the vehicle’s signage/logo. Trip reports submitted with blank letterhead field may result in denied claims. If this billing error pattern is identified during a random claim audit, additional claims may be reviewed and denied if the trip report is incomplete.

In addition, the trip report should have only 1 recipient’s transport per page. Trip reports contain the recipient’s Protected Health Information (PHI) that must never be shared with another transported passenger. A trip report with multiple recipients’ transport information on a single page is a violation of HIPAA privacy act and is reported to the Office of Inspector General (OIG).

Reminder: Revised Trip Report & Instructions

April 2015 Claims Clues advised the revision of the AHCCCS NEMT Trip Report and Instructions. The revised trip report must be used – effective 8/1/2015 claims submitted with the outdated trip report may be denied. If this billing error pattern is identified during a random claim audit, additional claims may be reviewed and denied.
Billing FQHC/RHC Claims with a Primary Payer - Correction

When Medicare is primary payer
Crossover claims are received electronically from the Medicare plan with Medicare’s specified coding that will not match to AHCCCS coding requirements which may cause denial or incorrect payment.

The FQHC/RHC provider must submit a void claim (not a “void/replace” as initially advised) and resubmit a corrected 1500 claim with the AHCCCS specified coding and Medicare’s EOMB.

On the corrected 1500 claim Medicare’s deductible/coinsurance/copay total amount must be entered on the T1015 claim line for reimbursement, in the correct Medicare fields. The appropriate EM codes must be billed on successive lines with 0.00 billed amount, leaving the Medicare fields blank (do not enter 0’s).

The void claim must have section 22 completed as follows:

<table>
<thead>
<tr>
<th>CODE</th>
<th>ORIGINAL REF. NO.</th>
</tr>
</thead>
<tbody>
<tr>
<td>V</td>
<td>(crossover claim #)</td>
</tr>
</tbody>
</table>

If the Medicare claim did not crossover to AHCCCS, the FQHC/RHC must submit the 1500 claim with the EOMB. The Medicare deductible/coinsurance/copay total amounts must be entered on the T1015 service line, in the correct Medicare fields, for reimbursement. The appropriate EM codes must be billed on successive lines with 0.00 billed amount, leaving the Medicare deductible/coinsurance/copay fields blank (do not enter 0’s).

When another coverage is the primary payer
The FQHC/RHC must submit the claim with the total amount paid by the other primary payer entered on the T1015 service line only (OT fields). The appropriate EM codes must be billed on successive lines with 0.00 billed amount, leaving the other payer fields blank (do not enter 0’s).

A copy of the primary payer’s EOB must be included with the claim. Since AHCCCS specifies the T1015 coding, the billing and the EOB coding will not match.
Reminder: FREE Online Services for AHCCCS Providers

AHCCCS Online has tools and resources available online 24/7/365 to simplify your business practices and administrative processes. As an active AHCCCS registered provider you are able to:

- verify eligibility and enrollment
- submit Fee for Service (FFS) Prior Authorization (PA) requests
- check status of FFS PA requests
- inquire/verify your own provider information
- submit Fee for Service (FFS) claims online and attach medical documentation to the claim
- check status of your FFS claims

To take full advantage of AHCCCS Online go to:

http://www.azahcccs.gov/commercial/AHCCCSonline.aspx

And see how much time you can save!

Are You Signed Up for Important Provider Notices?

AHCCCS sends out important email notices and updates to providers – are you signed up for this FREE service? Go online to see what is offered and sign up at:

http://www.azahcccs.gov/commercial/ProviderBilling/EmailLists.aspx