DFSM BILLING TIPS
COMMON OCCURRENCES SEEN WITH CLAIM SUBMITTALS

CMS 1500 Billing
Durable Medical Equipment - As a reminder the dates of services billed on the CMS 1500 form must match how the date of services are authorized. Overlapping of service dates from one authorization sequence to another may result in a denial of the claim and possible underpayment.

UB-04 Billing
Facility Services Outpatient surgery – the dates of services on the prior authorization must cover the entire length of stay for the service to include observation or post recovery time that carries over to another date of service.

Paper Remittance Advice
Customer Service does not have the option to reproduce paper remittance notices. If a copy is required, please forward an email request to:

DID YOU KNOW?
Sharing AHCCCS Online Accounts is prohibited?
- Each user must have their own web account.
- Access to the web site can be terminated if the User Acceptance Agreement is violated.

AHCCCSWARRANTINQUIRES@AZAHCCCS.GOV
Include the following:
- Claim number
- Provider NPI
- Invoice number
- EFT
- Total amount of the payment.

PROVIDER EDUCATION DATES
- Transaction Insight (TI) Portal 275 Attachments
  8/3/17 2:30pm-4:00pm
  HRD Training Rm 701-3
- Online Claim Submission
  8/10/17 2:30pm-4:00pm
  Aspen Rm 701-3

UPCOMING HOLIDAY
- 9/4/17 Labor Day

ELECTRONIC PAYMENT SIGN UP
Contact:
ISDCustomerSupport@azahcccs.gov
- OR -
Call 602-417-4451

- Prior Authorization
  Questions FFS PA Line
  (602) 417-4400

- Claims Customer Service
  Billing Questions
  (602) 417-7670

- Provider Registration
  Process Questions
  (602) 417-7670
  Fax Applications
  (602) 256-1474

- Technical Assistance with
  Online Web Portal
  Please email
  ProviderTrainingFFS@azahcccs.gov
Prior Authorization Reminders:

No Authorization for Dialysis Related Services

- Prior authorization (PA) is not required for monthly dialysis supervision or dialysis services provided to AHCCCS Fee-For-Service recipients.

- For Federal Emergency Services Program (FESP) recipients who require dialysis services at least three times per week, providers must follow the Extended Services enrollment process when beginning dialysis services.

Please view the following link to chapter 1100 of the AHCCCS Medical Policy Manual for more information on Extended Services enrollment requirements: https://www.azahcccs.gov/shared/Downloads/MedicalPolicyManual/Chap1100.pdf

NOTE!
Entry of phone authorization requests will be limited by FFS PA staff to services related to facility discharges or inter-facility transfers.

Prior Authorization Line
**Remember**

All other requests,* including NEMT requests, should be entered using the online Web Portal. For additional information regarding Prior Authorization Submission, please refer to:

*PA: How to Request, Obtain and Verify Status*


*Web Portal*

https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f

*Exception*:

Level 1 behavioral health facilities must fax authorization requests to the FFS TRBHA PA Line using the FFS Prior Authorization Request form. The online PA submission process is not available for Tribal Regional Behavioral Health Authority (TRBHA) member inpatient admissions to Level 1 facilities at this time. A completed FFS Form must accompany all Level 1 facility supporting documents as the cover sheet. FFS forms can be found at:

https://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/priorauthorizationforms.html

**Assistance**

FFS PA staff is available to assist providers rendering services to FFS plan members. Note: Prior to calling the FFS PA line for assistance, please verify member eligibility and health plan enrollment via the following link:

https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f

For assistance with authorizations for non-FFS AHCCCS members, please use the following link to view medical and behavioral health plan contact information:

https://azweb.statemedicaid.us/HealthPlanLinksNet/HPLinks.aspx

**Did you know?**

AHCCCS now covers **Transcranial Magnetic Stimulation (TMS)**. TMS requires authorization. Providers rendering this service to AHCCCS FFS plan members should submit their authorization request with documentation establishing medical necessity to the FFS PA area for review and coverage determination.

August 2017
**PLACE OF SERVICE (POS)**

Under Provision 13 from the AHCCCS Covered Behavioral Health Services Guide, a single provider cannot bill for any other covered service while providing transportation to client(s).

It is important that all 15 provisions are used in conjunction when determining if a service is valid for reimbursement.

Please refer to AHCCCS Covered Behavioral Health Services Guide for further information.


Also refer to CMS for a list of acceptable POS codes.

[https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set.html](https://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set.html)

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**NAME THAT POLICY!**

AHCCCS covers health risk assessment and screening tests provided by a physician, primary care provider or other licensed practitioner within the scope of his/her practice under State law for all members. These services include appropriate clinical health risk assessments and screening tests, immunizations, and health education, as appropriate for age, history and current health status.

Physical examinations (as of 10/01/13, includes well visits and well exams), periodic health examinations or assessments, diagnostic work ups or health protection packages designed to: provide early detection of disease; detect the presence of injury or disease; establish a treatment plan; evaluate the results or progress of a treatment plan or the disease; or to establish the presence and characteristics of a physical disability which may be the result of disease or injury.

**AMPM Policy: 310-H Health Risk Assessment and Screening Tests**

For more information on the policy, please click on the link below:

SIGN UP FOR CONSTANT CONTACT

Why sign up for Constant Contact?
To receive notifications about upcoming trainings, forums, and important business updates. Please use the link below to assist in accessing the Constant Contact sign-up.

Web address: https://www.azahcccs.gov/
- At the AHCCCS website select the "Resources" tab
- Then click on "DFSM Training"
- Scroll down to Links and Contacts and click on the word “Subscribe” that is in blue
- Then click on “Division of Fee for Service Management “
- Fill out the form and select the email lists you would like to be added to

Please share this information with those that would like to be added to the Constant Contact Email Lists.

PAPER CLAIM SUBMISSION REQUIREMENT ISSUES

Division of Fee-For-Service Management (DFSM) has experienced an increased volume of paper claims that do not meet the requirements for submission.

✓ Print font should be Lucinda Console
✓ Font Size 10.

The printed information must be aligned correctly within the section/box on the form. Printed information that “bleeds” into other sections on the form will cause the OCR system to read the data incorrectly.

SIGN UP FOR ELECTRONIC PAYMENTS

Benefits of Receiving Payments Electronically
- Immediate availability of funds
- Fully traceable payments
- Elimination of mail, and deposit delays
- Elimination of lost, stolen, or misplaced checks
- Elimination of stale checks to be recovered from Unclaimed Property

Call 602.417.4451 or email: ISDCustomerSupport@azahcccs.gov