

MALPH Billers Teleconference

Minutes for 2/18/2015

Attendees

Jennifer Allen - Ottawa
Michelle Ashcraft – Monroe
Julie Baker – Midland
Michelle Basquin – Western UP
Ashley Blodgett – Saginaw
Ashley Bowen – Chippewa
Tammy Brown – Jackson
Erin Carlson – Grand Traverse
Bobbie Colpean - Saginaw
Terri Curtis – Jackson
Sarah Dahlem – Barry Eaton
Jodi Dantzer – District Health Dept.
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Julia Diaz – Family Planning of
Allegan Co.
Dian Dubord – Delta/Menominee
Lori Galbreath – Allegan
Amy Glass – Huron
Nancy Gomulinski – Macomb
Brenda Ingersoll – Ionia
Heather Kohn – Sanilac
Kris Middaugh – Tuscola
Jessica Montney – Central MI
District Health Dept.
Tami O’Leary – Genesee
Shirley Polk-Miller – Berrien

Margie Pope – Monroe
Heidi Roper – Benzie-Leelanau
District Health Dept.
Lori Shaulis – LMAS District Health
Dept.
Cecila Simmons – St. Clair
Sandy Summers – Western UP
Melanie Tanner –
Bonnie Waterman – Mid Michigan
District Health Dept.
Mary Williams – Health Dept. of
NW MI

Welcome

- Jennifer Brassow of Washtenaw County and admin forum president welcomed all participants to the call.
- Alicia Baxter from Kalamazoo County will be facilitating the meetings and Katie Hensley from Washtenaw County will be taking the meeting minutes
- Please note that this teleconference is not intended to be used to discuss specific software issues. If your county uses Insight there is a separate teleconference for Insight users. You can contact Heather Law of Monroe County for more information (heather_law@monroemi.org).
- The teleconference will take place on the 3rd Wednesday of every month from 9-10am. Alicia sent out a calendar for 2015 to the group.

Tracking Billed, Paid, and Unpaid Claims

- The majority of the participants on the call used the AR 24 report from Insight. One participant used a program called Crystal Reports.
- Participants discussed running the report monthly and two months behind (ex: would run report to look at December claims in February)
- You can make notes in Insight on a client ledger (the \$ icon) to keep notes on what you have been doing on a claim
- When you rebill a claim it will show up on the AR 24 under current claims column
- Craig Boyce from MDCH mentioned that there is a way to run a query on pending claims in CHAMPS. This would be for FFS claims. Craig will set up a virtual training for the participants of the call on “How to Build a Query in CHAMPS”. This will tentatively take place at the next billing teleconference.

Billing Programs

- When asked what programs they used for billing, participants mentioned the following:
 - E Clinical
 - Mitchell & McCormick
 - Meditrack
 - Netwerkes
 - Allscripts
- Alicia asked if any of those programs contained a collections module. None of these did.

Specific Insurance Company Issues

McLaren Health Plan

- Many participants on the call were having issues with McLaren Health Plan. The following are examples of the issues being had:
 - 85018 as well as some birth control and condom charges are being denied. Billers are being told that it is a “software issue” rather than an actual denial, however those claims still aren’t being paid. The software changeover happened in late summer and LHDs are still getting this response.
 - One participant mentioned adding QW modifier to get 85018 codes paid
 - When using Netwerkes to send claims Netwerkes show that the claims were sent/filed but McLaren states that they did not receive them. LHD staff are having to send claims by fax and/or protected email.
 - One county stated that they were paid incorrectly for claims (overpaid) and McLaren deducted money to make up for it. However they deducted too much and now the LHD is attempting to recoup the money they are owed.
 - Another county stated they have claims from July of 2014 that have a status of “reprocess”. Though they have been told 45-60 days, McLaren still has not settled these issues. Many counties agreed that when they get told 45-60 days to fix an issue the time frame is actually much longer. It was suggested that a meeting be set up with a McLaren contract manager to get to the bottom of the problem.
 - MIChild vaccines are getting rejected
 - Some health plans require a separate MI Child number instead of the 10 digit Medicaid ID. One LHD was told to call each time to get the separate number.
 - Craig stated that they are making gains in getting all health plans to use the MA ID rather than a separate number. However not all health plans are up to date on that yet.

- Katie Hensley will email these McLaren issues to Craig

TPL Issues

- Some participants expressed having an issue with claims being denied because CHAMPS shows they have TPL when they really don't.
- You can fill out an electronic version of form DCH-0078 by going to Michigan/gov/Medicaidproviders and clicking on the red box that says "Update Other Insurance NOW!". Use this form to update, cancel, or add TPL
 - Some participants were not able to get the page to load
 - If you cannot get the page to load, check with your IT department to make sure that you have the most recent version of your web browser
 - Should only be a 10-15 day turnaround
- If you submitted the form and are still getting denials, call or email provider support
- Use reason code 26 or 27 on claim to indicate that the primary insurance has expired

Other Issues

- BCBS and BCN denying TB tests
 - One suggestion was to put medical director's name in box 17a and b (billing in Netwerkes)
 - They also want a place of service of office-11
- Many LHDs are getting birth control rejections due to NDC numbers
 - Craig suggested going to CHAMPS, clicking "external links", and using the Medicaid Code and Rate reference to find the correct NDC number.
 - One participant said that some health plans will pay if you go back to the claim, remove the NDC, and resubmit the claim.
 - Craig asked to have examples of denials due to NDC emailed to him at boycec@michigan.gov you can also cc Micki on the message at smithm1@michigan.gov
- Some Medicaid rates may have changed. They are updated quarterly. You can check the Code and Rate Reference for current rates. While they can pay more, all health plans must pay a minimum of the Medicaid approved rate

Wrap-Up

- Alicia will compile a list of meeting participants' email addresses
- If you have anything you would like to see addressed at the next meeting send Alicia an email at asbaxt@kalcouny.com

- The next meeting is Wednesday 3/18 9-10am.