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NURSING HOME BULLETIN

Provider Bulletin News: Due to budget constraints, paper copies of bulletins will no longer be distributed by DMS. Bulletins are now available only at the DMS Website. http://www.dss.mo.gov/dms/pages/bulletins.htm Please note new website address.

Bulletins will remain on this site only until incorporated into the provider manuals as appropriate, then deleted.

Missouri Medicaid News: Missouri Medicaid providers may sign-up to receive automatic notifications of all bulletins and other official Missouri Medicaid communications via e-mail. Providers and other interested parties are urged to go to the DMS website to subscribe to the e-mail list.

Table of Contents

Page

MC+ MANAGED CARE 1
HIPAA 1
ELECTRONIC NURSING HOME CLAIM SUBMISSION..... 2
REQUIRED CODE SET 2
DIRECT DATA ENTRY CHANGES..... 2

MC+ MANAGED CARE

The information contained in this bulletin applies to coverage by the MC+ fee-for-service and Medicaid fee-for-service programs. The MC+ fee-for-service and Medicaid fee-for-service programs also provide coverage for those services carved out of the MC+ Managed Care benefit for MC+ Managed Care enrollees. Questions regarding services included in the MC+ Managed Care benefit should be directed to the enrollee's MC+ Managed Care health plan. Please check the patient's eligibility status prior to delivering a service.

HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) national standards for electronic transactions and code sets were effective October 16, 2003. The following information is being furnished as guidance for billing providers wishing to exchange electronic transactions with Missouri Medicaid. In order to comply with these national standards, significant changes for claims submission requirements must occur. HIPAA does not require

providers to conduct all of the national standard transactions electronically. Providers may process some transactions electronically and others may be submitted on paper. However, the HIPAA national standard transactions providers choose to submit electronically must comply with the HIPAA format and content requirements.

ELECTRONIC NURSING HOME CLAIM SUBMISSION

For Nursing Home providers currently using the FENIX media to submit claims to Missouri Medicaid, a HIPAA-compliant direct data entry option very similar to FENIX is available through the Internet. Providers are required to contact the Verizon Help Desk at (573) 635-3559 to obtain authorization for Internet submissions by completing the Application for Missouri Medicaid Internet Access Account. The website address for submitting claims using the direct data entry option is <http://www.emomed.com/>. Providers are unable to access the site without proper authorization. If a Nursing Home provider plans to use an outside vendor to send batch files, a Missouri Medicaid Trading Partner Agreement must be completed and submitted to Verizon. Both forms can be found at <http://www.medicaid.state.mo.us/>

REQUIRED CODE SET

As required in the 837 Institutional Implementation Guide, Missouri Medicaid utilizes National Uniform Billing Data Element Specifications as developed by the National Uniform Billing Committee (NUBC) in formatting the required fields/information for institutional (nursing home) claim submission. The NUBC controls all external code sets for UB-92/837 Institutional billing. Prior to implementation of the Internet direct data entry option, Missouri Medicaid discovered the "80" state-assigned Occurrence Span Code, which was to be used in reporting Nursing Home Reserve Days, was discontinued on October 16, 2003, by the NUBC. Missouri Medicaid determined it was not practical to include this code for billing from 10/06/2003 – 10/16/2003 only. Therefore, the decision was made to apply the necessary changes to code set usage prior to implementation of the HIPAA-compliant direct data entry option on the Internet.

DIRECT DATA ENTRY CHANGES

Nursing Home providers will notice a change in the Internet claim format from the material previously distributed at nursing home training seminars sponsored by the associations. The Occurrence Span Date, Occurrence Thru Date, and the Occurrence Span Code fields have been removed from the Nursing Home Claim. Nursing Home providers are instructed to use Revenue Codes to report the Reserve Days for a patient rather than the Occurrence Span Codes. Revenue Codes must also be reported for Skill Indicator information. Listed below are all valid Revenue Codes for the direct data entry option on the Internet and an explanation of its usage by Missouri Medicaid within the claims processing system. This information is also available through the online Internet Nursing Home Claim Form Help Instructions.

1. Select revenue code to indicate reserve type periods:
 - 0180 equals leave of absence (non-covered leave of absence)
 - 0182 equals patient convenience (home leave)
 - 0183 equals therapeutic leave (home leave)

- 0184 equals ICF/MR – any reason (inpatient hospital leave)
- 0185 equals nursing home; for hospitalization (inpatient hospital leave)
- 0189 equals other leave of absence (Medicare qualifying stay days)

2. Select revenue code to indicate skilled nursing services:

- 0550 equals skilled nursing general classification *
- 0559 equals skilled nursing other *
- 0190 equals subacute care general classification
- 0191 equals subacute care – level I
- 0192 equals subacute care– level II
- 0193 equals subacute care– level III
- 0194 equals subacute care– level IV
- 0199 equals subacute care other

Indicating any of the above revenue codes will not alter the amount of your per diem payment. Use these codes when you previously would have indicated a skilled nursing indicator of 'Y'.

*Effective 12/01/2003, these ancillary revenue codes should not be used to report nursing home accommodation services.

3. Select revenue code to indicate non-skilled nursing services:

- 0110 equals room-board/private
- 0119 equals other/private
- 0120 equals room-board/semi
- 0129 equals other/2 bed

Indicating any of these will not alter the amount of your per diem payment. Use these codes when you previously would have indicated a skilled nursing indicator of 'N' or blank.

Provider Communications

(800) 392-0938

or

(573) 751-2896