

# Update

## MassHealth

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## Important Announcements and Updates

The items below highlight recent announcements, changes to policies and procedures, and descriptions of system, processing, and billing updates that may affect your daily business with MassHealth. These items summarize official agency issuances that govern provider participation. Please refer to the official agency issuances for complete details. In the event of a conflict between this update and any official agency issuance, the official agency issuance governs.

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### Coverage of H1N1 Influenza Vaccinations

MassHealth will pay eligible providers for administration of the H1N1 flu vaccine available at no cost from the Massachusetts Department of Public Health. Please refer to All Provider Bulletin 197, dated October 2009, for details including eligible providers and members, and billing information. To download a copy of the bulletin from the online Provider Library, go to [www.mass.gov/masshealthpubs](http://www.mass.gov/masshealthpubs).

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### Program Changes

**Permedion Inc.**, a subsidiary of HMS, has assumed operations as the **MassHealth Acute Utilization Management Program (UMP) subcontractor**, effective November 2, 2009. Effective November 2, all preadmission-screening requests must be submitted to Permedion via the Provider Online Service Center (POSC), or via the phone or fax number below. Permedion began conducting prepayment reviews the week of November 2, 2009. Permedion postpayment reviews will begin in January 2010, and Permedion will provide peer reviewer representation at hearings.

1-877-735-7416 (Permedion Phone)

1-877-735-7415 (Permedion Fax)

Permedion HMS Government Services  
 510 Rutherford Ave.  
 Charlestown, MA 02129

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## Processing, Billing, and System Notices

Check out the **new online FAQ resource** posted to the MassHealth Web site for information about the Primary Care Clinician (PCC) Plan's Prospective Interim Payment (PIP) program, MassHealth's monthly cash-advance option for physicians, nurse practitioners, group practices, and community health centers. This posting contains information about how to enroll in the program and calculate your PIP amount. It also explains payment schedules and variations, discusses account management and reconciliations, and addresses tax-related questions.

When using **EVSpC to check eligibility**, please remember to use only lower-case letters to enter your ID.

When performing functions in the POSC, please remember to **use the tab key**, rather than the backspace button, to maneuver between fields, or you may risk losing your work.

Please be advised that all claims submissions for continuous skilled nursing services (Service Codes T1002 and T1003) must include a **prior authorization (PA) number** on your claims.

Beginning on November 10, 2009, Medicare crossover claims for physician-administered drugs with Healthcare Common Procedure Coding System (HCPCS) Service Codes Q4081 and J0895 will be suspended for review for compliance with standards posted in **Renal Dialysis Clinic Bulletin 4** (August 2008). Claims that do not include the national drug code (NDC) units with the appropriate unit descriptor (for example, milliliters, grams, etc.) will be denied. When submitting Medicare crossover claims billed on the UB-04, please include this information, using the Revenue Description Field (Form Locator 43) as noted in the bulletin. When submitting electronic Medicare crossover claims, please complete segments in Loop 2410 as outlined in the 837I Implementation Guide Addendum. For more information, please refer to Renal Dialysis Clinic Bulletin 4 in the online Provider Library at [www.mass.gov/masshealthpubs](http://www.mass.gov/masshealthpubs).

MassHealth has adopted the HIPAA Standard Codes. When submitting claims for professional services, providers must remember to **include appropriate place-of-service (POS) codes**: 01 (Pharmacy), and HIPAA Standard Office Code (11). For a complete listing of the HIPAA POS codes, refer to the Centers for Medicare & Medicaid Services (CMS) Web site by clicking on the Place of Service Codes for Professional Claims link, at [www.cms.hhs.gov/medhcpcsgeninfo](http://www.cms.hhs.gov/medhcpcsgeninfo).

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## 835 Electronic Remittance Advice Transactions

Currently all providers have the ability to get a remittance advice (RA) via a PDF file that they can download shortly after claims are adjudicated. If you have the technical capability to process the remittance advice using the HIPAA compliant X12 transaction format known as the 835, and can process the file electronically either through your practice management software or through a billing intermediary, you will need to submit certain information to the MassHealth Electronic Data Interchange (EDI) department to initiate this process. The 835 transaction allows you to download your RAs through the Web-based transaction site on [www.mass.gov/masshealth](http://www.mass.gov/masshealth) for at least 90 days after it was originally posted. The 835 reports the status of paid and denied claims. Please note that an 835 is a data file and will require software so that it can be interpreted into a report (as it is not a readable format).

835 transactions can be easily arranged by faxing a letter with your request to the MassHealth EDI department at 617-988-8971. Your letter should be composed on facility letterhead and include the following information:

- provider name and ID;
- name and signature of the individual making the request;
- contact name and phone number; and
- billing intermediary's MassHealth provider ID (if applicable). Please note that MassHealth is unable to issue an 835 statement to both the provider and the billing intermediary.

For more information about the 835 process and how to request the service, please refer to the 835 Companion Guides in the online Provider Library on the MassHealth Web site.

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## Publications Updates

MassHealth has posted the following publications, bulletins, and transmittal letters (TLs) on the MassHealth Web site. To download these publications from the Provider Library, go to [www.mass.gov/masshealthpubs](http://www.mass.gov/masshealthpubs).

- **October Feature of the Month** details enrollment guidelines and requirements, encouraging providers to use the Provider Online Service Center (POSC) to complete their MassHealth enrollment application. The article also communicates paper-application processing requirements for non-Internet users.
- **September/October Update** covers pertinent MassHealth announcements and timely information to include service-authorization tips and updates, third-party liability (TPL), crossover and coordination-of-benefits (COB) tips and reminders, claims and billing tips and updates, recent publication releases, Virtual Gateway updates, and nursing facility updates.
- **All Provider Bulletin 197** describes payment, coverage policies, and billing instructions for the administration of H1N1 and seasonal influenza vaccines.
- **All Provider Bulletin 196** advises providers to screen employees and contractors for exclusion from participation in federal health care programs, citing Office of Inspector General (OIG) recommended actions, penalties, and online resources.
- **TL ALL-173** informs providers about changes related to the transition from Masspro to Permedion Inc., a subsidiary of Health Management Systems, which assumed operations as MassHealth's acute Utilization Management Program (UMP) subcontractor on November 2, 2009.
- **TL-ADH 23** communicates amendments to program requirements and level-of-care payment; changes to attendance, staffing, provider, administrative, and documentation requirements; and expanded eligibility to include personal hygiene coverage.
- **TL ALL-172** communicates revisions for the eligibility responses for the enrollment initiative extended to certain legal special-status immigrants who are Commonwealth Care members for participation in the Commonwealth Care Bridge program.

- **TL ALL-171** communicates revised terminology, clarifies EPSDT provisions and procedures for requesting prior authorization, updates well-child visit screening requirements, and revises the menu of standardized behavioral health screening tools for children under age 21.
- **TL PHY-127** describes HCPCS changes to the *Physician Manual* effective July 1, 2009, and communicates related CPT limitations, requirements, and special reimbursement rules.
- **TL POD-63** communicates HCPCS revisions to the *Podiatrist Manual* that are effective from July 1, 2009, and describes relevant CPT code changes to limitations, reimbursement methodology, and other special requirements.
- **School-Based Medicaid Bulletin 18** provides additional requirements for participation in the Direct Service Claiming (DSC) or the Administrative Activity Claiming (AAC) components of the program required school-based Medicaid providers to complete a trading partner agreement (TPA) with the Office of Medicaid in addition to an executed school-based Medicaid program provider contract. The bulletin also refers providers to Municipally Based Health Services Bulletin 9 and School-Based Medicaid Bulletin 17 for general requirements, written requests for service agreement policy changes, updates on per-unit service claim-submission codes, personal care services stipulations, and supervision requirements. You can download a copy of any of the bulletins referenced from the online Provider Library at [www.mass.gov/masshealthpubs](http://www.mass.gov/masshealthpubs).

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## And for Your Members...

*This new column communicates information about MassHealth offerings that your members might enjoy. MassHealth encourages you to share this information with enrolled members in hopes that knowledge of these resources will enhance their overall MassHealth experience.*

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## Opportunities for Seniors

MassHealth offers many resources to individuals aged 65 and older. A lot of services, information, and assistance can be accessed by visiting the MassHealth Web site at [www.mass.gov/masshealth](http://www.mass.gov/masshealth), under the Programs and Services header on the left side of the screen, in the Seniors link.

If you have questions about your eligibility, you can access detailed assessment charts, eligibility rules, appeals policy, and the entire Senior Care Options network of providers that cover all of the services reimbursable under Medicare and MassHealth at this link.

MassHealth pays for health care for certain low- and medium-income Massachusetts residents aged 65 and older. To determine eligibility, MassHealth considers a number of indicators, including income, assets, citizenship/national status and identity, and immigration status.

Information from the Web site and links provide access to the continuum of long-term-care services and facilities available for the aging. Some of these online resources include information on housing, caregiver support, health care, service organizations and advocates, home care, regulations and statistics, meals and nutrition, doctors' visits and hospital stays, prescriptions, Medicare and emergency information and resources, and discussion groups.

Long-term-care services can take many forms: nursing facilities and rest homes, assisted living residences, home health care, and continuing-care retirement communities. The [MassLongTermCare.org](http://MassLongTermCare.org) site can assist in making informed decisions about suitable care options.

In addition, some ancillary offerings promote mental health, assistance in bill paying, counseling, job resources, community-based organizations, interpreter services, tips on government agencies, referrals, marketing resources, information for the hearing impaired, volunteer opportunities, neighborhood groups, and social service organizations.

The Massachusetts Commission on End of Life Care provides an online End of Life Services Resource Guide with advice, guidance, and educational opportunities covering resources on such delicate topics as critical conversations regarding home care, palliative care, specialists, hospice care, pain management, and symptom control. Reports, surveys, links, conference schedules, legislation, and inspirational keynote speeches give accessibility and tangibility to fully prepare for this inevitable last phase of life.

To access the above information, refer to any of the related links below.

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### **Related Online Services Available from the MassHealth Information for Seniors Link**

- [Nursing Facilities and Other Long-Term-Care Facilities](#)
- [Search Nursing Home Performance Survey](#)
- [Find Walking Clubs in Your Neighborhood](#)
- [Search 800AgeInfo for Services for the Elderly](#)
- [Search for Documents in the 800AgeInfo Library](#)
- [Online Access to Emergency Information and Resources](#)

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### **Resourceful Related Links from the MassHealth Web Site**

- [Healthy Aging, Health, and Disability Activities](#)
- [Elder Meals Program](#)
- [Federal Government Benefits](#)
- [Tax Tips for Seniors and Retirees](#)
- [Area Agency on Aging](#)
- [Aging Services Access Points](#)
- [Overview of Councils on Aging](#)
- [Prescription Advantage](#)
- [A Citizen's Guide to State Services](#)

The goal of these resources is to encourage community connectedness, alleviate confusion about what is available, foster self-sufficiency, and encourage preventive care to facilitate a smooth transition that makes the pathway to aging a more informed, enjoyable, and less stressful journey.

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### **Some Information for Your Members**

The following announcements contain timely information about programs and initiatives that you may want to pass along to your members.

The **MassHealth Child Disability Supplement**, a form for children who are applying for MassHealth based on their disability, is changing. A child with a disability must be enrolled in MassHealth and meet the terms of the Supplement to be eligible for MassHealth disability benefits. Once completed, the Supplement and other required documentation is evaluated by the UMass Disability Evaluation Services (DES). To steer members to a downloadable copy of the updated form, have them visit the MassHealth Web site at [www.mass.gov/masshealth](http://www.mass.gov/masshealth) and click on the Applications and Member Forms link under the Publications header on the right side of the screen.

Active-duty or retired military personnel and their family members may be eligible for **health insurance coverage through TRICARE**. For more information about program requirements, refer to DHCFP regulations 114.6 CMR 13.00 .You can also contact TRICARE directly at [www.tricare.osd.mil](http://www.tricare.osd.mil) or by phone at 1-877-874-2273 about enrollment eligibility requirements and restrictions, depending on access to Health Safety Net secondary services and other health insurance programs.

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