Section: Introduction



Introduction to Mississippi Medicaid Provider Billing Handbook

The Mississippi Medicaid Provider Billing Handbook is designed to provide guidance and assistance to providers in submitting beneficiary claims to the Mississippi Division of Medicaid (DOM). The handbook will provide step-by-step instructions on completing the claims forms so that DOM can reimburse, you, the provider, more quickly. It is available as a hard copy document or electronically. You may obtain a hard copy of the handbook, at a minimal cost, by contacting the fiscal agent's Provider and Beneficiary Services Unit toll-free at 1-800-884-3222, or you may download the electronic version at http://www.medicaid.ms.gov. This handbook must be used in conjunction with the Mississippi Administrative Code, Title 23. Key Medicaid reimbursement issues are addressed in the Administrative Code, and fee schedules are also found on the http://www.medicaid.ms.gov website.

The Billing Handbook is divided into nine sections, as described below:

Section I. General Billing Information contains all of the contact information that a provider should need in billing a Medicaid claim. This section provides a point of contact for almost any question that requires a response, and should be used as a quick reference for essential billing information.

Section II. CMS-1500 Claim Form Instructions includes provider instructions for the specific claim form – CMS-1500 Version (02/12). If you need information pertaining to a particular field of a claim form, you should consult this section. If you have questions, contact the Provider and Beneficiary Services Unit toll-free at 1-800-884-3222.

Section III. **UB-04 Claim Form Instructions** includes provider instructions for the specific claim form – UB-04. If you need information pertaining to a particular field of a claim form, you should consult this section. If you have questions, contact the Provider and Beneficiary Services Unit toll-free at 1-800-884-3222.

Section IV. American Dental Association (ADA) Dental Claim Form Instructions includes provider instructions for the specific claim form – ADA Dental Claim. If you need information pertaining to a particular field of a claim form, you should consult this section. If you have questions, contact the Provider and Beneficiary Services Unit toll-free at 1-800-884-3222.

Section V. Pharmacy Billing Instructions includes provider instructions for billing claims in the Envision Point of Sale (POS) System (including NCPDP Payor Sheet), the MS Envision Web Portal, and on the specific claim form – Mississippi Title XIX Pharmacy Invoice. If you need information pertaining to a particular field of a claim form, you should consult this section. If you have questions, contact the Pharmacy Help Desk toll-free at 1-800-884-3222.

Section VI. Third Party Liability includes procedures for recovery of third party liability (TPL) which refers to the legal obligation of third parties, i.e., certain individuals, entities (private insurance), or programs (Medicare), to pay all or part of the expenditures for medical assistance furnished under a State plan in covered in this section. By federal law, the Medicaid program is intended to be the payer of last resort.

Section VII. The Remittance Advice (RA) is a computer-generated document that displays the status of all claims submitted to the fiscal agent along with a detailed explanation of adjudicated claims. The RA is available weekly.

Section VIII. Adjustment/Void Request and Claim Inquiry Forms contain the forms used to submit inquiries and make corrections to Medicaid claims. Detailed instructions are included for completing and filing these forms.

Section IX. Appendix includes a collection of forms to be used by the providers for interaction with the fiscal agent and the DOM. The forms can be copied by the Medicaid provider.