

Mississippi Medicaid

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Bulletin

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Electronic Claims Record Layout Upgrades

Electronic Claims Record Layout Upgrade scheduled for December 4, 1998.

Mississippi's Division of Medicaid has announced that the electronic claims record layouts (NECS formats) will be upgraded for the following **batch** claim form types: UB92, HCFA-1500, Pharmacy, and Dental. A detailed description of changes was sent to you on June 30, 1998. It is your responsibility to inform your billing agency/software vendor of the changes to the format and the new effective date of the changes. Point-of-Service upgrades for electronic claims will be released in early 1999; this is not part of the current NECS upgrade.



Please note:

- **Claims received in the new format before December 4, 1998 will not be processed.**
- **Claims received in the old format after the December 3, 1998 claims input cut-off time will not be processed.**

Effective January 8, 1999, the last character of each claim header record must contain an "N".

- **UB-92** – 2.5.2 Record Type 10 - Provider Data (found on page 15 of your ESC UB-92 Biller)
- **HCFA** – 2.5.1 H Record - Header Record (found in your June 30th mailer of NECS upgrade)
- **Pharmacy** - 2.5.1 H Record - Header Record (found on page 11 of your ESC Pharmacy Biller)
- **Dental** – 2.5.1 H Record - Header Record (found on page 11 of your ESC Dental Biller) - 2.5.3 D Record - Detail Record (found on page 13 of your ESC for DENTAL Billers)

If you currently use the free Mississippi Medicaid NECS software, and have not received the upgraded version (on diskettes), or have questions, please call EDI Services at 1-800-884-3222, or 960-2901 in the Jackson area.



Provider Audits and Desk Reviews

The responsibility for audits and desk reviews has been transferred from EDS to the Division of Medicaid.

The responsibility for audits and desk reviews of hospitals, nursing facilities, ICF-MRs, psychiatric residential treatment facilities, home health agencies, rural health clinics, and federally qualified health centers has



been transferred from EDS to the Division of Medicaid effective October 1, 1998. The Reimbursement Division will be responsible for the desk reviews of cost reports, the Program Integrity Division will be responsible for performing the financial audits and resident fund audits and the Programs Review Division will be responsible for the third party liability audits.

Allowable Board of Directors Fees for Nursing Facilities, ICF-MR's and PRTF's 1998 Cost Reports

The allowable Board of Directors fees that will be used in the desk reviews and audits of 1998 cost reports have been computed.

The allowable Board of Directors fees that will be used in the desk reviews and audits of 1998 cost reports filed by nursing facilities (NFs), intermediate care facilities for the mentally retarded (ICF-MRs) and psychiatric residential treatment facilities (PRTFs) have been computed. The computations were made in accordance

<u>Category</u>	<u>Maximum Allowable Cost for 1998</u>
0 - 99 Beds	\$2,742
100 - 199 Beds	\$4,113
200 - 299 Beds	\$5,484
300 - 499 Beds	\$6,856
500 Beds or More	\$8,227

with the Medicaid State Plan by indexing the amounts in the plan using the Consumer Price Index for All Urban Consumers - All Items. The amounts listed below are the per meeting maximum with a limit of four (4)

meetings per year. The maximum allowable, per meeting, Board of Directors fees for 1998 cost reports are displayed in the chart.

1998 Owners' Salary Limits for Long-Term Care Facilities

The maximum amounts that can be claimed as owner's salaries are based on 150% of the average salaries paid to non-owner administrators in 1997 in accordance with the Medicaid State Plan. These limits apply to all owners and owner/administrators that receive payment for services related to patient care. The limits apply to salaries paid directly by the facility or by a related management company or home office. Adjustments should be made to the cost report to limit any excess salaries paid to owners. In addition, Form 15 should be filed as part of the Medicaid cost report for each owner.

The maximum allowable salaries for 1998 are as follows:

- Intermediate Care Facilities for the Mentally Retarded (ICF-MR) \$71,372
- Small Nursing Facilities (1-60 Beds) \$63,961
- Large Nursing Facilities (61 + Beds) \$85,097
- Psychiatric Residential Treatment Facilities (PRTF) \$59,898



Last Call for Outstanding Claims for Apex Healthcare Medicaid Members

The Medicaid HMO contract with Apex Healthcare expired on June 30, 1998. Since that time, Apex has continued to process outstanding claims for Medicaid members. In order to bring the business to a close, claims with dates of service December 1, 1995 through June 30, 1998 for services provided to Medicaid members who were enrolled with Apex Healthcare must be filed with EDS **no later than**



March 31, 1999. Claims for Apex Medicaid members filed after March 31, 1999 will not be transmitted to Apex for payment, and Medicaid will not be responsible for payment of these claims.

Providers who have filed claims for Apex Medicaid members that have not yet been processed may follow up with Apex Healthcare by calling 1-888-288-2885.

Claims with dates of service December 1, 1995 through June 30, 1998 for services provided to Medicaid members enrolled with Apex Healthcare must be filed with EDS **no later than March 31, 1999.**

Norplant Kits

Effective October 28, 1998, the Medicaid allowance for Procedure Code W9014, Subdermal Implant without Professional Fees, was increased to \$427.50.

➤ October 28, 1998, Procedure Code W9014, was increased to \$427.50.

Prior Approval Required for Arthrotec

Starting December 1, 1998, prior approval will be required for Arthrotec 50 mg. and 75 mg. tablets.

➤ December 1, 1998 prior approval will be required for Arthrotec 50 mg. and 75 mg. tablets.

**Questions or Comments?
Call the EDS Correspondence Unit at
1-800-884-3222 or 601-960-2800.**



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If you have any questions related to the topics in this bulletin, please contact the EDS Correspondence Unit at 1-800-884-3222 or 601-960-2800.

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Fax EDS Publications at 601-960-2807, or e-mail publications@msix.hcg.eds.com.



December 1998

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1 Prior approval is required for Arthrotec 50 mg. and 75mg. tablets.	2	3 ESC Cut-Off 5 pm	4 Load New NECS software.	5
6	7 Checkwrite	8	9	10 ESC Cut-Off 5 pm	11	12
13	14  Checkwrite	15	16	17 ESC Cut-Off 5 pm	18	19
20	21 Checkwrite	22	23	24 DOM and EDS closed ESC Cut-Off 5 pm	25 	26 
27	28 Checkwrite	29	30	31 ESC Cut-Off 5 pm		

Checkwrites and Remittance Advices are dated every Monday. However, funds are not transferred until the following Thursday and Remittance Advices usually arrive the following Friday.