

Mississippi Medicaid

Volume 7, Issue 10

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Bulletin

Inside this Issue

<i>2001 CPT Codes</i>	2
<i>Vaccines for Children (VFC) Program Update</i>	2
<i>Perinatal High Risk Management/Infant Services System</i>	2
<i>HIPAA Update</i>	3
<i>Checkwrite and ESC Cut-Off Schedule</i>	4






Hospice Rate Increase

In accordance with the Federal Health Care Financing Administration, there will be an increase in Hospice rates effective April 1, 2001. Below are the new rates by revenue and group rate codes.

Group	Revenue Code 651	Revenue Code 652	Revenue Code 655	Revenue Code 656
1	\$92.24	\$22.43	\$98.64	\$414.79
2	\$95.05	\$23.12	\$100.94	\$426.45
3	\$99.11	\$24.10	\$104.25	\$443.29
4	\$93.22	\$22.67	\$99.45	\$418.87
5	\$0.00	\$0.00	\$0.00	\$0.00
6	\$98.00	\$23.83	\$103.34	\$438.66

If you have any questions regarding information in this bulletin, please call the EDS Correspondence Unit at **1-800-884-3222** or **601-960-2800**.

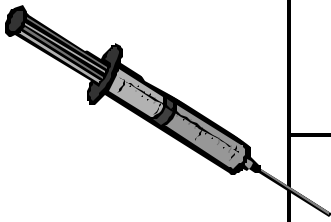
To expedite your call you can use the AVRS system by choosing one of the following menu options:

-  Eligibility, Check Amount, Drug Coverage, or Managed Care Information
-  Drug Prior Authorization
-  Recipients
-  Point of Service Help Desk
-  EDS Representative



2001 CPT Codes

The additions, changes and deletions to the 2001 CPT codes were loaded into the Medicaid Management Information System (MMIS) on March 5, 2001. The new codes are effective for dates of service beginning January 1, 2001. The discontinued CPT codes will not be accepted after March 31, 2001.



Vaccines for Children (VFC) Program Update

Beginning February 26, 2001, Prevnar will be available through the Mississippi Department of Health for all VFC eligible children six weeks of age through 59 months. The Division of Medicaid (DOM) has opened CPT procedure code 90669 for all EV providers for billing. If there are any questions, you may contact Stephanie Parrish, RN, at (601) 359-5125 or Shirley Hamilton at (601) 359- 5565.

Perinatal High Risk Management/Infant Services System

The Perinatal High Risk Management/Infant Services System (PHRM/ISS) program is a multidisciplinary enhanced services case management program for certain Medicaid-eligible pregnant/postpartum women and infants.

The Perinatal High Risk Management/Infant Services System (PHRM/ISS) program is a multidisciplinary enhanced services case management program for certain Medicaid-eligible pregnant/postpartum women and infants. The enhanced services for this target population include risk assessment, case management, psychosocial and nutritional assessments, home visits and health education. All physician or nurse practitioner/midwife providers are encouraged to complete a Risk Screening Assessment on this target population, to refer Medicaid beneficiaries with a positive risk screen to an appropriate PHRM/ISS case management agency provider and to submit a claim for reimbursement. Both the maternal (W9350) and infant (W9353) risk screening assessment generate a fee-for-service reimbursement for private providers for both positive and negative screens.

Currently, private providers are risk screening only 28% of pregnant/postpartum women and 49% of infants. DOM's goal is for all Medicaid-eligible pregnant/postpartum women and infants to have a Risk Screening Assessment and be referred appropriately.

For the name of a PHRM/ISS case management agency provider in your area, please call the MCH Bureau at the Division of Medicaid.

Janie P. Hobbs, RN, BSN
PHRM/ISS Coordinator
1- 800-421-2408 or 601-359-5535



HIPAA UPDATE

New privacy regulations have been released which give consumers the right to see a copy of, and request corrections to, their medical records. In addition, the regulations give patients the right to obtain documents on how their health information has been disclosed to others and lays out rules for how health information should be released to protect public health, conduct medical research, improve the quality of care and deter health care fraud and abuse. Later this year, the Department of Health and Human Services is expected to issue the final data security standards that will require health care organizations to establish safeguards to ensure the integrity and confidentiality of this information.

Who is subject to these regulations?

- All health care providers
- All health plans
- All health care clearinghouses

Covered entities would be allowed to disclose health information to persons or organizations they hire to perform functions on their behalf. These “business partners” under contractual obligation with the covered entity would not be permitted to use or disclose protected health information in ways that would not be permitted of the covered entity itself.

What health information is covered by these regulations?

- Health information that identifies an individual
- Health information that is transmitted or maintained by a covered entity, regardless of form

If the health information has any components that could be used to identify a person, it will be covered. The protection will stay with the information as long as the information is in the hands of the covered entity or a business partner.

Administrative Requirements for Covered Entities

Under the regulations, providers and payers are required to implement basic administrative procedures to protect health information. Among them:

- Develop a Notice of Information Practice
- Allow individuals to inspect and copy their protected health information
- Develop a mechanism for accounting for all disclosures made for purposes other than treatment, payment and health care operations
- Allow individuals to request amendments or corrections to their protected health information
- Designate a privacy official

For additional information on HIPAA, please visit the Health Care Financing Administration (HCFA) web site at www.hcfa.gov or the Department of Health and Human Services web site at <http://aspe.os.dhhs.gov>.

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Update

Mississippi Medicaid Bulletin

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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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are on the Web!**
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April 2001

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5 ESC Cut-Off 5 pm	6	7
8	9	10	11	12 ESC Cut-Off 5 pm	13	14
15	16	17	18	19 ESC Cut-Off 5 pm	20	21
22	23 DOM, EDS & HSM closed	24	25	26 ESC Cut-Off 5 pm	27	28
29	30					

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.