



Mississippi Medicaid Bulletin

Special Issue

November 2010

Volume 16, Issue 5

The Division of Medicaid (DOM) Announces the Provider Incentive Payment Program (PIP)

The nation's healthcare system is undergoing a transformation in an effort to improve quality, safety and efficiency of care for everyone. New programs from the upgrade to ICD-10 to information exchanges to electronic health records (EHR) technology are being implemented to help our providers make the transformation. To help facilitate this vision, DOM is participating in CMS' Medicaid Provider Incentive Payment (MPIP) Program to provide incentive payments to eligible hospitals and providers to offset the cost of implementing certified EHR technology. The MPIP will provide incentive payments to eligible professionals and eligible hospitals as they adopt, implement, upgrade or demonstrate meaningful use of certified EHR technology. The program will begin in the first quarter of 2011 and DOM plans to begin accepting applications from eligible providers and eligible hospitals at that time. Eligible professionals (EP) can receive up to \$63,750 over the 6 years that they choose to participate in the program.

A Medicaid EP is defined as a physician, nurse practitioner, certified nurse-midwife, dentist, or physician assistant. Physician assistants must practice in a Federally Qualified Health Center (FQHC) or Rural Health Clinic (RHC) that is led by a physician. To qualify for an EHR incentive payment, a Medicaid EP must not be hospital-based and must meet one of the following criteria:

- Have a minimum 30% Medicaid patient volume*
- Have a minimum 20% Medicaid patient volume, and is a pediatrician*
- Practice predominantly in a Federally Qualified Health Center or Rural Health Center and have a minimum 30% patient volume attributable to needy individuals

NOTE: A Medicaid EP is considered hospital-based if 90% or more of the EP's services are performed in a hospital inpatient or emergency room setting.

* Children's Health Insurance Program (CHIP) patients do not count towards the Medicaid patient volume criteria.

Medicaid excludes podiatrists and chiropractors.

Watch for the Late Breaking News announcements on the Mississippi Envision website. Additional resource information may also be found at the following web sites:

- The DOM website at www.medicaid.ms.gov and
- The CMS EHR website at <http://www.cms.gov/EHRIncentivePrograms/>.

Providers may email specific questions to ehr-pip@medicaid.ms.gov.

Policy Manual Additions/ Revisions

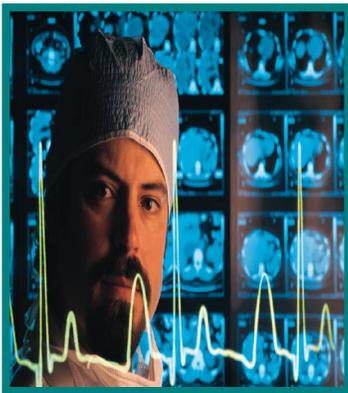
The following policies and policy sections have been added and/or revised in the DOM Provider Policy Manual. Providers of these services may view these changes by accessing the DOM website at www.medicaid.ms.gov and clicking on "Provider Policy Manuals" under "Publications".

Manual Section	Policy Section	New	Revised	Effective Date
2.0 Benefits	* 2.05 Medicaid Cost Sharing for Medicare/Medicaid Dually Eligibles		X	01/01/10
14.0 Hospice	* 14.07 Dual Eligibles		X	01/01/10
25.0 Hospital Inpatient	* 25.22 Dual Eligibles		X	01/01/10
36.0 Nursing Facility	* 36.05 Dual Eligibles		X	01/01/10
2.0 Benefits	2.03 Exclusions		X	12/01/10
3.0 Beneficiary Information	3.02 Newborn Child Eligibility 3.04 Eligibility for Medicare and Medicaid 3.08 Beneficiary Cost Sharing		X X X	12/01/10
4.0 Provider Enrollment	4.12 Audiologist/Hearing Aid Dealer		X	12/01//10
8.0 Ambulance	8.08 Mileage 8.09 Codes/Description		X X	12/01/10
11.0 Dental	11.05 Oral Evaluations 11.07 Preventive Services and Sealants		X X	12/01/10
25.0 Hospital Inpatient	25.08 Newborn Child Eligibility 25.25 Prior Authorization of Inpatient Hospital Services		X X	12/01/10
26.0 Hospital Outpatient	26.17 Outpatient Hospital Services 26.23 Outpatient Rates		X X	12/01/10
28.0 Transplants	28.15 Reimbursement		X	12/01/10
47.0 Outpatient Physical Therapy	47.03 Exclusions 47.04 General Coverage Criteria 47.05 Definitions 47.06 Therapist Assistants, Aides, and Students 47.11 Evaluation/ Re-Evaluation 47.12 Plan of Care		X X X X X X	12/01/10
52.0 Surgery	52.13 Modifier -54,-55, and Modifier -56		X	12/01/10
53.0 General Medical Policy	53.26 Hyaluronate Joint Injection		X	12/01/10
55.0 Physician	55.04 Oral Health Assessment and Application of Fluoride Varnish by Medical Providers	X		12/01/10
70.0 Family Planning (Non-Waiver)	70.04 Covered Services 70.05 Program Exclusions		X X	12/01/10
76.0 EPSDT School Health Related Services	76.07 Audiological Services		X	12/01/10
40.0 Home Health	40.02 Criteria for Coverage		X	01/01/11

Policy Manual Reminder

This bulletin is a document for the Mississippi Medicaid Provider Policy Manual and must be placed in Section 88 of the manual. All providers are held accountable for all policies in the quarterly Mississippi Medicaid Bulletins.

DOM & ACS Present 2010 Physician Workshops



ATTENTION: MEDICAL PROVIDERS

REGISTRATION 8:30 AM - 9:00 AM
WORKSHOP 9:00 AM - 12:00 PM
LUNCH 12:00 PM - 1:30 PM
WORKSHOP 1:30 PM - 5:00 PM

NO REGISTRATION FEE

DATES & LOCATIONS

OCTOBER 28, 2010 SOUTHAVEN, MS
DESOTO CIVIC CENTER
4560 VENTURE DRIVE

NOVEMBER 4, 2010 BILOXI, MS
HARD ROCK CASINO
777 BEACH BLVD.

NOVEMBER 9, 2010 MERIDIAN, MS
MSU RILEY CENTER
2200 5TH STREET

NOVEMBER 18, 2010 RAYMOND, MS
EAGLE RIDGE CONFERENCE CENTER
1500 RAYMOND LAKE ROAD

PLEASE RSVP TO:

ACS PROVIDER/BENEFICIARY
SERVICES

WITH DATE, LOCATION, NUMBER OF
ATTENDEES, AND CONTACT
INFORMATION

FAX: 601-206-3119
PHONE: 1-800-884-3222
EMAIL: TAMARA.CRY@ACS-INC.COM



www.medicaid.ms.gov

WORKSHOP SESSIONS



NEW HOT TOPICS

- Payment Error Rate Measurement (PERM)
- Mississippi CAN Program
- National Correct Coding Initiative (NCCI)
- ICD10/5010
- Smart PA for Drug Prior Authorization
- Oral Health Assessment & Fluoride Varnish
- 5% Physician Assessment
- Electronic Health Records Incentive Payment
- Shared Health Electronic Health Records System

BILLING TOPICS

- Medicaid Basics - Eligibility/Service Limits, Provider File/NPI, Co-pays, Crossover Claims, Duplicate Billing, Claim Check/Claim Reconsiderations
- Envision Web Portal
- Specialty Topics
- Surgery and Transplants
- Physician Administered Drugs and National Drug Codes (NDC)
- Wellness Policy/Annual Physical Exams
- Lab & Venipuncture
- Family Planning Waiver

Claims Resolution Interactive Session- bringing claims examples with beneficiary numbers and dates of service or specific TCNs for one-on-one assistance or to discuss billing issues with a provider field representative



<https://msmedicaid.acs-inc.com>

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If you have any questions related to the topics in this bulletin, please contact ACS at 1-800-884-3222

Mississippi Medicaid Manuals are on the Web www.medicaid.ms.gov And Medicaid Bulletins are on the Web Portal <http://msmedicaid.acs-inc.com>

November

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Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	1 CHECKWRITE ^E	2	3	4 EDI Cut Off 5:00 p.m.	5	6
7	8 CHECKWRITE	9	10	11 EDI Cut Off 5:00 p.m.	12	13
14	15 CHECKWRITE	16	17	18 EDI Cut Off 5:00 p.m.	19	20
21	22 CHECKWRITE	23	24	25 EDI Cut Off 5:00 p.m.	26	27
28	29 CHECKWRITE	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.

