

FQHC Billing Updates

OHCA PRN 2007-01

February 8, 2007

FQHC Providers

Thank you for your responses to the survey we sent out January 4, 2007. A recap of the survey responses is summarized as follows:

- *Exclude* all inpatient services from the PPS rates and reconciliation process.
- *Include* all dental and pharmacy services within the PPS rates and reconciliation process.
- *Do not* develop an alternative payment methodology.
- Pay the PPS rate upfront for the traditional SoonerCare members.

We are reviewing changes to our current policy and payment process to accommodate your responses as well as OHCA's need for data collection to ensure proper payment and measure quality. We may soon be contacting individual health centers to obtain additional cost and utilization information to carry out these objectives.

Claim Denials

We were also advised by a health center that the T1015 code was denying on a number of claims. After further investigation we discovered 3 different situations:

- 1. T1015 being billed for members enrolled in the Family Planning Waiver (FPW). Because these members are not eligible for the full scope of Medicaid services included in the State Plan, it is not appropriate for OHCA to pay the T1015 since it is an "all-inclusive" payment. The denial is appropriate in this situation; however these services should not have been included in the PPS reconciliation. If you provided services to a FPW member, we have added an adjustment to your January reconciliation to account for the inappropriate inclusion of these services in your previous reconciliations.
- 2. T1015 being billed for members classified by OKDHS as Aliens. Because these members are eligible for emergency services (including obstetrical deliveries) it is appropriate for OHCA to pay the inpatient encounter and include the encounter in the PPS reconciliation. The denial is *not* appropriate in this situation. We have corrected our system. Please re-file all inpatient encounters that have denied due to the member being classified as an Alien.

3. T1015 being denied for miscellaneous reasons. We reviewed numerous claims where the T1015 denied for a variety of valid reasons ~ exact duplicate, incorrect claim dates, member ineligible. These denials will continue to need to be worked on an individual claim by claim basis.

Crossovers (Medicare / Medicaid claims)

In the December 2006 reconciliation OHCA inadvertently included crossover claims and their payments. We have recomputed the correct payment for December excluding these claims and this adjustment will also be included in your January reconciliation.

If you have any questions or require additional information please phone Kelly Taylor in the Provider Reimbursement Unit at (405) 522-7108 or email at Kelly.Taylor@okhca.org

We appreciate the services you continue to provide for Oklahomans who are insured by SoonerCare.