

List of MHP Encounter Issues Related to FQHCs/RHCs/THCs
January 11, 2019

Attention: MDHHS will no longer be providing an updated monthly List of MHP Encounter Issues Related to FQHCs/RHCs/THCs starting in June 2019. We will continue to monitor any open issues and provide updates as they become available. If there is an issue that is not listed below but you believe requires our attention, please let us know as soon as possible.

<u>Number</u>	<u>Situation</u>	<u>Status</u>	<u>Resolution If Resolved</u>	<u>Notes</u>
1	Facility Settlement in CHAMPS	Resolved	Clinics can now access their claims summary reports in CHAMPS. Weekly reports go back to 1/1/18. Annual reports based on clinic fiscal year became available in CHAMPS on 7/18/18.	
26	Visit counts invalid on claims summary reports	Under Review		Identified Issues: 1) # of units = # of visits (leading to some large numbers) 2) Procedure codes 99211 and 99406 showing as visits but should not be Expected fix is April 2019 Clinics can/should still use claims summary reports to review encounters

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January 11, 2019

2	Was a May 21st deadline issued to MHPs to fix clinic issues?	Resolved	Deadline extended. The need for a new deadline will be reassessed in three months as the settlements were continued as-is for another quarter. MHPs were asked to waive timely filing edits to fix issues that would result in the PPS rate not being paid. Clinics and MHPs should continue to work together.	
4	Prenatal OB Packages (59425/59426)	Resolved	On 7/25/18, MDHHS advised MHPs to pay the code as intended--as multiple encounters.	
5	Some MIHealthLink encounters pre-8/1/17 were billed on Institutional	Resolved	Pending no other issues, these encounters should show on the claims summary reports and are eligible for PPS.	
7	Publishing of all Cost Settlement specifications	Resolved	As of 7/2/18, specifications were sent to MPCA, the clinics, and the Medicaid Health Plans.	

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January 11, 2019

8	Some Dental Encounters have Rendering NPI in Billing NPI Field	Under Review		<p>Clinics: If possible, please avoid submitting paper claims to Delta. Delta is working on a fix. If your organization utilizes Delta's online Toolbox to submit claims for which you would like to be considered for the PPS rate , please ensure that you entering the Billing Provider NPI.</p> <p>Aside from paper claims, Delta believes that it has resubmitted all encounters with missing/incorrect information.</p> <p>Please review the Claim Summary reports sent by MDHHS on 1/7/19 and provide feedback by 2/7/19 to Nancy Kuhlman (KuhlmanN@michigan.gov) with any issues.</p>
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9	PIHP Encounters-No Institutional encounters post 8/1/17	Under Review		<p>As PIHPs were not notified of the original policy, edit 5212 was turned to Accept on 7/2/18 for PIHP encounters going back to DOS 8/1/17. Many encounters have been resubmitted by PIHPs.</p> <p>Proposed policy was issued on 10/25 that will require PIHPs to begin submitting on the Institutional format for dates of service on or after 2/1/19. As MDHHS is still responding to the comments that it received, we project that the 2/1/19 start date may be pushed back.</p>
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13	Clinic Billing Issues: Wrong POS (P/D), Rendering Provider not registered (P/D), Attending Provider missing/not enrolled/not active (I)	Under Review		<p>Rendering Provider issue: New claims summary reports in CHAMPS will include all encounters to be cost settled. Clinics should check their claims summary reports in CHAMPS, and then resolve remaining issues with health plans.</p> <p>Please ensure that your clinic is associated to contracted health plans in CHAMPS; it is a two-step process. You must first add the association under Step 11: Associate MCO Plan and then support that association by uploading a copy of the contract under Step 14: Upload Documents. This lack of association would cause encounters not to show on your claims summary reports.</p>
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14	Inconsistent Payments from MCOs	Under Review		<p>MHPs should pay the contracted rate for network providers and the suggested rate for non-network providers.</p> <p>MDHHS is reviewing whether non-network providers should receive PPS rate from MDHHS.</p>
16	Attending left facility and did not enroll in CHAMPS	Resolved	<p>Encounter edits 5153--Attending Provider Not Enrolled and 5155--Attending Provider Not Active on DOS--were changed to Accept for DOS 8/1/17 to 12/31/18 on 10/22/18. MHPs will turn to Reject for DOS on or after 1/1/19; all other programs will remain as Accept. Clinic encounters submitted without an Attending NPI will continue to Reject.</p> <p>MHPs were asked to resubmit any previously rejected encounters.</p>	
18	Clinics missing incentive payments due to Institutional billing	Resolved	Clinics should work directly with the MHPs to resolve this issue.	
19	MHPs reporting TPL incorrectly, resulting in overpayments by MDHHS	Under Review		

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 January 11, 2019

20	VSP asking centers to bill on Professional invoices	Resolved	MHPs were advised on 8/7 to alert contractors that all FQHC/RHC/THC claims must be billed on an Institutional invoice post-8/1/17 (excluding Dental).	
24	Who should pay for H0001--FFS or MHPs?	Resolved	Per MSA 13-13, H0001 billed with specific diagnosis codes with Mild-to-Moderate severity is the responsibility of FFS Medicaid, not the MHPs. PIHPs would cover severe cases.	