



Vermont Health Access

Advisory

The NPI Deadline Approaches!

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May 23, 2007 is the deadline to have obtained and begin billing with the National Provider Identification number. Providers are asked to help expedite this data collection process by submitting their NPI and taxonomy information electronically using the Excel form posted at: www.vtmedicaid.com

Please return your completed Excel file as an email attachment to:

VTNPIcommunications@EDS.com

If you do not have Excel you may submit the following information directly to the same email address:

- Provider Name
- Institution/Group name

- VTMedicaid Provider ID#
- NPI#
- Taxonomy Code
- Provider **Mail To** street address: city, state, zip code

Please direct your NPI questions to EDS at:

VTNPIcommunications@EDS.com

or call:

Provider Services: 1-800-925-1706 (In VT)

Provider Services: 1-802-878-7871 (Out of State)

VTMedicaid encourages all providers to submit their NPI numbers now to avoid possible last minute complications.

Taxonomy Codes

Providers are required to submit their taxonomy code(s) when ap-

plying for an NPI number. The Taxonomy code allows a single provider (individual, group or institution) to identify their specialty category. The combined NPI number and taxonomy code(s) are linked to your VTMedicaid ID number.

Providers should be aware that it is possible, and possibly advantageous, to have more than one taxonomy code depending on the services provided.

You can determine your taxonomy code(s) by visiting the taxonomy code list on the Washington Publishing website: <http://www.wpc-edi.com/codes/taxonomy>

Webpage Updates

- NPI Excel Submission form
- 2007 Dental Fee Schedule & updated supplement
- CMS 1500 form updated for NPI
- The provider look-up with mapping capabilities
- Fee Schedules
- Active Provider List
- Enrollment Forms



Dental Updates

Rates

Effective January 1, 2007, the Adult Program annual maximum benefit was increased to \$495 per calendar year. In addition, the Adult Program 6% fee reduction was eliminated for services provided on or after January 1, 2007.

New ADA Form

A new Dental billing form has been issued by the ADA to accommodate the National Provider Identification

number. Instructions for completing this new form were included with the 2007 Dental Fee schedule that was mailed in early January. The instructions can also be found in the updated Dental Supplement posted at: www.vtmedicaid.com

VTMedicaid began accepting this new claim form on 1/1/07 but providers must not use NPI and Taxonomy codes before the NPI deadline 5/23/2007. Prior to 5/23/07, the VTMedicaid billing and attending provider numbers must be used.

After 5/23/2007, Dental Form 2006 will replace all dental claim forms previously used. Claims received on older forms will be returned.

ECS

VTMedicaid encourages all dental providers to consider electronic billing. If you currently submit claims on paper and would like to take advantage of electronic billing please contact the EDS EDI Coordinator at: 802-879-4450, option 3, or email: vtedicoordinator@eds.com

ECS: Upgrade PES for NPI

PES Upgrades

Providers who use PES software to bill electronically are reminded to stay current with the latest version of PES in order to smoothly upgrade to accommodate NPI. The current version is PES 2.18. It is available at no charge at: www.VTMedicaid.com under Downloads, Software. Upgrade instructions are also available on the same web page.

PES upgrades must be completed incrementally. For example, if you are running PES version 2.14, you must upgrade to 2.15, then 2.16, etc. You cannot skip versions without risking database corruption. To see which version of PES you are running, after you log on to PES, click on Help, About.

Even if you use other software to *bill* your claims, you can use PES to process electronic adjustments and secondary claims, re-submit claims, check claim status or verify eligibility.

For more information on PES please contact the EDS EDI Coordinator at: 802-879-4450, option 3, or email:

vtedicoordinator@eds.com

To read the Douglas Administration's plan for Vermont Medicaid visit the OVHA website at:

<http://www.ovha.state.vt.us/medicaidhome.cfm>

EDS would like to thank the providers who participated in the recent EDS Provider Satisfaction Survey.

Congratulations to Grace Cottage Hospital business office for winning the free pizza party!

Updates and Reminders

Ladies First Billing

Please follow these updated billing instructions that are required to accommodate NPI:

On the 837 Institutional transaction and the UB-92 claim form please populate a condition code field (boxes 24-30) with a value of 'A3' to indicate a Ladies First claim.

On the 837 Professional transaction please populate the special program code with a value of '03' to indicate a Ladies First claim.

On the HCFA 1500 claim form please populate the ESPDT/Family Planning box [24.H] with a value of '5' to indicate a Ladies First claim.

PATH Form 287

The OVHA has discontinued the use of PATH form 287 "Provider Notification". Providers are encouraged to create their own form with the following information:

- Provider's name and VTMedicaid Provider ID or NPI
- Beneficiary name and signature (or signature of a parent if the beneficiary is a minor).

- Description of service (s) sought

- A clear statement that the provider is unwilling to accept Medicaid payment for the specific service(s) sought and if the beneficiary wants to get this service from this provider, the beneficiary or responsible adult must accept full financial responsibility.

- Date of signing

If a provider does not intend to bill Medicaid for specific services, the patient must be fully informed of the decision and its consequences prior to rendering the service. Patients must understand that they will be financially responsible for payment for the service(s). The OVHA strongly encourages providers to document (using your own form) this agreement/understanding between beneficiary and provider.

The provider should give a copy to the beneficiary or responsible adult and retain a copy of any such documentation.

E & M Codes Update

In the last legislative session, the OVHA was appropriated over \$2 million to increase pricing for E&M

codes to Medicare 2006 fee levels subject to the availability of funds. 54 E&M codes will be converted to the Resource Based Relative Value System payment method. Seven of the codes will be reduced from current pricing to the 2006 Medicare level (using a coefficient of \$37.8975) and the remaining codes will be increased to the 2006 Medicare level.

EPSDT, PCPlus, and Psychiatric fee enhancements will no longer be paid on the codes that move to RVRBS.

The new codes and rates can be found at: www.vtmedicaid.com in the download section.

Per Diem Updates

A 2006 legislative appropriation increased Vermont Medicaid's payment to hospitals. As a result, inpatient per diem rates will be increased effective date of service 1/1/07. Providers should have already received a notification letter from the OVHA listing the per diem rate increases.

Contact Us

To request notifications via email:

Vtmedicaidbanners@eds.com

For EDI assistance:

vtedicoordinator@eds.com
or 802-879-4450, #3

For EDS Provider

Representatives:

802-879-4450 or

vtprovserv@eds.com

For claims assistance:

In State: 800-925-7871

or: 802-878-7871

or Fax: 802-878-3440

OVHA

312 Hurricane Lane,
Ste. 201

Williston, VT 05495

Phone: 802-879-5900

Fax: 802-879-5919

Hours of operation:

Monday through Friday,

7:45 — 4:30, excluding

holidays.

NPI Dates to Know

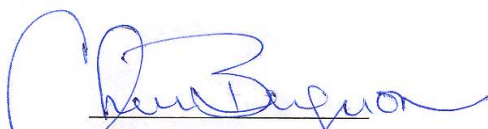
April 16, 2007: Tentative date for Vermont Medicaid to begin user acceptance testing with the current version of PES software. Please be sure to update your PES software to the most current version before April 16, 2007.

May 7, 2007: Tentative date for EDS to begin accepting NPI numbers on claims. EDS will continue to accept Vermont Medicaid numbers at that time.


If providers wish to perform a production test of their updated billing software they are encouraged to submit a small number of claims with NPI numbers and the rest with Vermont Medicaid numbers during this testing period.

May 23, 2007: The federally mandated deadline for many health plans, including Medicare, Medicaid, and private health

insurance issuers, and all health care clearinghouses to accept and use NPIs in standard transactions. After May 23, 2007, health care providers may use only their NPIs to identify themselves in standard transactions requiring the NPI including: 837 professional, 837 institutional, 837 dental, 276/277 claim status request and response, and 270/271 eligibility request and response.



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