

STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin Governor

BUREAU FOR MEDICAL SERVICES 350 Capitol Street, Room 251 Charleston, West Virginia 25301-3707 Telephone: (304) 356-4914 FAX: (304) 558-1776

Michael J. Lewis, MD, Ph.D. Cabinet Secretary

MEMORANDUM

TO:

WV Long Term Care Providers (ICF / MR Facilities)

FROM:

Bureau for Medical Services

DATE:

August 1, 2011

RE:

Resource Mismatch

West Virginia ICF / MR facilities may begin to notice the following additional reason code and remit code reflected on their remittance advices:

Reason Code 125 (Submission / billing error(s)) and Remark Code N58 (Missing / incomplete / invalid patient liability amount)

Reason Code 125 and Remark Code N58 will populate on the remittance advice when the resource amount billed on the claim does not match the resource amount on file for the specific member on that date of service. Effective January 1, 2012, ICF / MR providers will also be required to submit the condition code "M1" on the claim when a partial resource amount is billed. It is the responsibility of the ICF / MR provider to notify their contracted software vendor of the addition of the "M1" condition code requirement when partial resource amounts are being billed. The "M1" requirement should not be reflected on the claim when the local DHHR office prorates a resource upon a member's admission to or discharge from an ICF / MR facility.

At the present time, the above reason / remark codes are associated with a WARN disposition on the remittance advice. This is to allow ICF / MR providers and vendors ample time to assure that their billing software complies with WV specific requirements and specifications. Effective January 1, 2012, the WARN disposition will be changed to DENY. This means that ICF / MR providers will experience denied claims when the resource amount billed does not match the resource amount submitted to WV Medicaid by the local DHHR office.

LTC Billing Instructions can be found on Molina's website at www.wvmmis@molinahealthcare.com. Questions regarding claims submissions or dispositions can be addressed by calling Molina Provider Relations at 304-348-3360 or 888-483-0793. Additional questions regarding the information contained within this memo or vendor specifications can be addressed by calling Kelley Johnson at 304-356-4886 or Emily McCoy at 304-356-4889.