

CDNY Provider Webinar

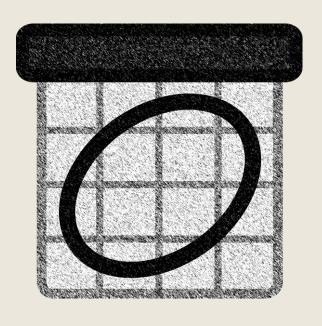
April 25, 2019 1:00 - 2:00pm

Agenda

Topic	Facilitator	Time
Welcome	Courtney Skivington-Wolf	5 mins
LOC Timing for Updates	Danielle Mazza/Ernie McNutt	10 min
Billing Considerations	Kristina Cunningham	15 min
Questions and Answers	Group	30 min
Wrap-Up & Next Steps	Courtney Skivington-Wolf	5 min



LOC (Level of Care)



Timing for Updates:

CDNY will be completing all LOCs in April/May

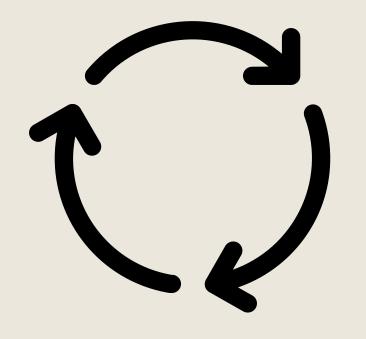
- April for last names A-L
- May for last names M-Z



The LOC update timing... ensures compliance for all members.





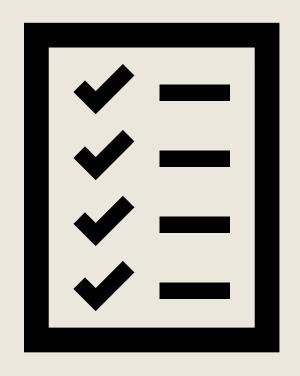


The LOC update timing...

allows for a consistent 11 month cycle for review to ensure compliance moving forward.

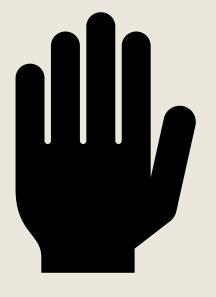


The LOC update timing...
ensures all LOCs will be
available in CHOICES to
providers.





Billing Considerations: Claims Denials



Limitations on claims prior to 7/1/2018

- PHI/HIPAA
- Access to information
- Timeliness

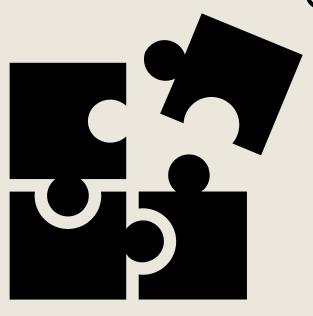


Responsibilities

- Certified residences
- Non-certified settings







Challenges

- Clarifying/agreeing on responsibilities
- Access to information
- Internal processes
- Communication/coordination



Solutions

- Collaboration/communication
- Develop internal resources
- Implement tracking method
- Access to critical systems (ePaces - CHOICES)







Solutions: Use existing resources

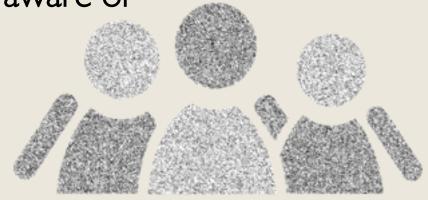
- OPWDD training (SLMS) on benefits and entitlements
- HRA training for boroughs
- Benefit Development Resource Guide
- Revenue Support Field Offices



Billing Considerations: Lapses in Coverage / Billing Issues

Notify CM of any issues with Medicaid coverage as soon as you are aware of

- Eligibility check
- Denied claim
- Notice(s) received
- Recertifications due



Provide CM with any information you have that can assist with resolving.



Billing Considerations: Lapses in Coverage / Billing Issues



When you get a denial, check ePaces first and check your billing file to ensure correctly submitted claim

- Denial reason codes are provided with all denials please check the reason code
- If claim and Medicaid record look good and problem cannot be identified, contact eMedNY directly for assistance at www.emedny.org/contacts/telephone%20quick%20reference.pdf

Note: CDNY cannot see your agency's claims in ePaces



Billing Considerations: Lapses in Coverage / Billing Issues

When you get a denial, check ePaces first and check your billing file to ensure correctly submitted claim. If denial reason is related to Medicaid eligibility or R/E codes, ask CM to assist to resolve.



Complicated issues, contact Kristina Cunningham at

kcunningham@caredesignny.org

518-235-1888, ext. 101400



Billing Considerations: Liability for Services Regulations

Noticing and Billing

- Medicaid lapses
- Billing guidelines/limitations
- Preexisting services
 - February 15, 2009
 - March 15, 2010
 - Other than Preexisting services

For official guidance: stephanie.r.belisle@opwdd.ny.gov



QUESTIONS

THANK YOU