

MMIS Insider

Focus on EDI ■ October 2007

Oregon's Medicaid Management Information System:
A system for today *and* tomorrow

Now that DHS is less than a year away from implementation of the replacement MMIS, more details are available about the changes that will affect EDI trading partners.

Transaction changes coming with the replacement MMIS

More detailed information about the changes to these transactions will be available in the revised *DHS Companion Guides* that DHS will publish in November 2007.

For all EDI Trading Partners:

- **Eligibility Benefits Inquiry (270/271)** – The current system processes the 270 batch files overnight. The replacement MMIS will process them as they come in, giving more timely information. The replacement system will also process incoming 270 transactions submitted through value-added networks (VANs) in addition to the current SFTP process.
- **Access to the Provider Web Portal** – For client eligibility inquiries as well as claims inquiries, submissions, and adjustments.
- **Claims Status Inquiry (276/277)** – No significant changes. The current system processes the 276 batch files overnight. The replacement MMIS will process them as they come in, giving more timely information. The replacement system will also process real-time inquiries submitted through both VANs and SFTP.
- **Electronic Remittance Advice (835)** – Some of the values currently used in this transaction will change. Watch the MMIS Provider Resources Web site for more details.
- **Dental/Professional/Institutional Claims Process (837)** – Some changes will occur with these transactions. Watch the MMIS Provider Resources Web site for more details.

In addition, the replacement MMIS will support the **Prior Authorization Request and Response (278)** transaction for Oregon DHS trading partners for the first time.

For managed care organizations:

- **Capitation Payments (820)** – No significant changes.
- **Enrollment File (834)** – The frequency will change. Watch the MMIS Web site for details.
- **Claims Process (837)** – Some changes will occur, including where to put the DHS-assigned MCO number.
- **Claims Process (NCPDP)** – Some changes will occur, including how to use processor control numbers on NCPDP transactions.



DMAP PA 07-196 10/07

Dates to remember for the replacement MMIS

November 2007

DHS will publish updated companion guides on the DHS HIPAA Companion Guides and Manuals Web page at www.oregon.gov/DHS/admin/hipaa/guides_man.shtml.

These guides will provide you with information about the technical changes to each transaction that you will need to implement to successfully continue EDI transactions with DHS in the replacement system.

January 2008

EDI re-testing begins to make sure trading partners can submit and receive the updated transactions. DHS will require re-testing for all DHS trading partners. DHS EDI Support Services will facilitate re-testing, using tools from the replacement MMIS.

April, May and June 2008

Statewide provider implementation training begins for the replacement MMIS. This training will provide an overview of MMIS enhancements, changes to paper billing, and features of the new Provider Web Portal.

June 30, 2008

The replacement MMIS goes live

Keep informed and keep in touch!

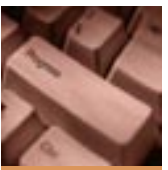
In order to keep you informed about how the replacement MMIS will affect you, DHS has created a new Web site specifically for providers and trading partners at www.oregon.gov/DHS/mmis. It includes:

- Frequently Asked Questions (FAQs), information about changes to expect, how to prepare for the replacement system, and much more.
- A link to get DHS eSubscribe updates whenever we post new information.

Questions?

If you have questions about the replacement MMIS, e-mail mmis.questions@state.or.us. We will respond to your questions on the new MMIS Provider Resources FAQ page, or refer them to your appropriate DHS contact for follow-up.

- **If you have questions about EDI** – contact DHS EDI Support Services at 888-690-9888 or e-mail DHS.EDIsupport@state.or.us.



MMIS/MCO Issues Log

Open Issues

Date Added	Issue #	Originator	Issue	Response
11/4/2005	05-2	R. Ganzon-Clackamas	Submission time frames and response times	
6/1/06	06-02	A. LaBansky	Medical ID cards. How will new cards work?	Presentation by EDS – Paul Combs 6/14/06. Additional presentation by Tanya Allen on 9/19/07. More information to come as process is developed.
8/17/06	06-04	K. Ottelle - PHTech	Will DHS capture all modifiers and place of service codes to ensure mental health claims for same day of service will not receive suspect dupes?	
9/20/06	06-05	EDWG	Will the 835 RA contain a full copy of the original claim as well as the adjusted claim?	
10/19/06	06-07	Ron Preston/DCIPA	Providers would like to see a demonstration of the web portal.	
12/5/06	06-10	P. Krewson	No zeros allowed in CAS segment of 835 Electronic RA	Compliance issue.
7/2/07	06-11	P. Krewson	The MCOs are requesting one Provider File of all enrolled providers that includes the NPI number.	
10/17/07		C. Norman	With the change to a daily 834, there are many questions as to the timing of the file, the contents and the ramifications for the MCOs.	

10/17/07	J. Fray	Will the Fee Schedule created in the new system be more modern? I.e. will it contain modifiers rather than Type of Service codes to differentiate between different allowables for the same code?
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Previous Issues

11/4/2005	05-1a	R. Ganzon - Clackamas	Duplicate claim error - Limitations on modifiers?	New MMIS will read all modifiers supplied within the HIPAA standard.
11/4/2005	05-1a	R. Ganzon-Clackamas	Duplicate claim error - Limitation on diagnosis codes?	New MMIS will read all diagnosis codes supplied within the HIPAA standard.
11/4/2005	05-1a	R. Ganzon-Clackamas	Duplicate claim error – MC provider types versus NPI	The new MMIS has two levels of provider types to identify a provider that allows more delineation to NPIs and taxonomy codes.
11/4/2005	05-3	K. Ottelle – PHTech	Modifier limitation	See 1a above.
11/4/2005	05-4	K. Ottelle – PHTech	Medicare Prime	Plans must include the appropriate claim adjustment reason code to identify Medicare coverage.
11/4/2005	05-5	K. Ottelle – PHTech	Can an encounter transaction be deleted regardless of its adjudication status?	This has been requested in the new system.
11/4/2005	05-7	Unknown	Are encounter claims edited against date of death rather than enrollment dates only?	Yes, an edit has been requested.
11/4/2005	05-8	Care Oregon	Will the new MMIS contain future eligibility dates?	This is a Business Decision not a system limitation. At this time the decision has not changed.
11/4/2005	05-6	C. Anderson	Will an encounter claim process through all encounter edits so all errors are known after adjudication?	8/16/06 – yes all edits will post to the claim and be reported on the 835-claim remittance advice.
3/21/06	06-01	P. Krewson	Provider Sanction Report	MCO 'majority rules' decided on 6/14/06.
8/7/06	06-03	A. LaBansky	Will DHS require FCHPs and PCOs to go to full NCPDP pharmacy format.	Yes, letter sent August 2006

Division of Medical Assistance Programs (DMAP)**Last updated 10/18/07**

10/16/06	06-06	M. Trousout OHMS	Will the FCHPs/PCO be going to the 5.2 NCPDP format?	Yes the full NCPDP standard will be utilized. Letter sent August 2006.
10/19/06	06-08	Ron Preston/ DCIPA	Who is financially responsible for the interface to be compatible between the providers and the new MMIS?	Providers will need a computer with internet access. Initially, the system will offer Web access via Microsoft's Internet Explorer 6. Support of additional browsers is under consideration.
