

Rhode Island Executive Office of Health and Human Services Medicaid Program



New Provider Introduction to The Rhode Island Medicaid Program

January, 2016

PR0028 V2.5

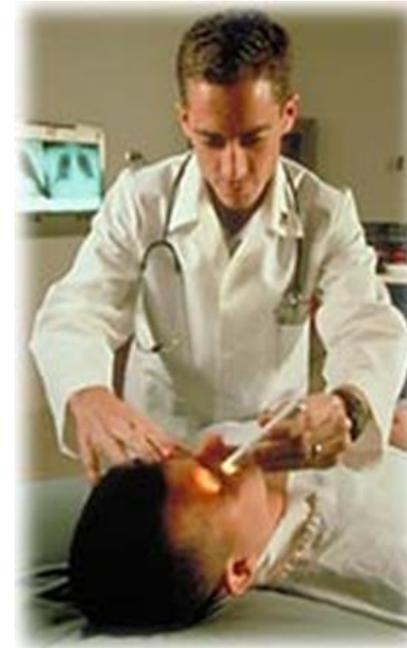
Agenda

Contents:

- *Welcome to Medicaid*
- *Common Terms and Abbreviations*
- *EOHHS Website*
- *Healthcare Portal*
- *Provider Reference Guides*
- *Recipient Information and Identification*
- *Billing Rhode Island Medicaid*
- *Timely Filing*
- *Claim Submission and Payment*
- *Provider Representatives*

Welcome To The Rhode Island Medicaid Program

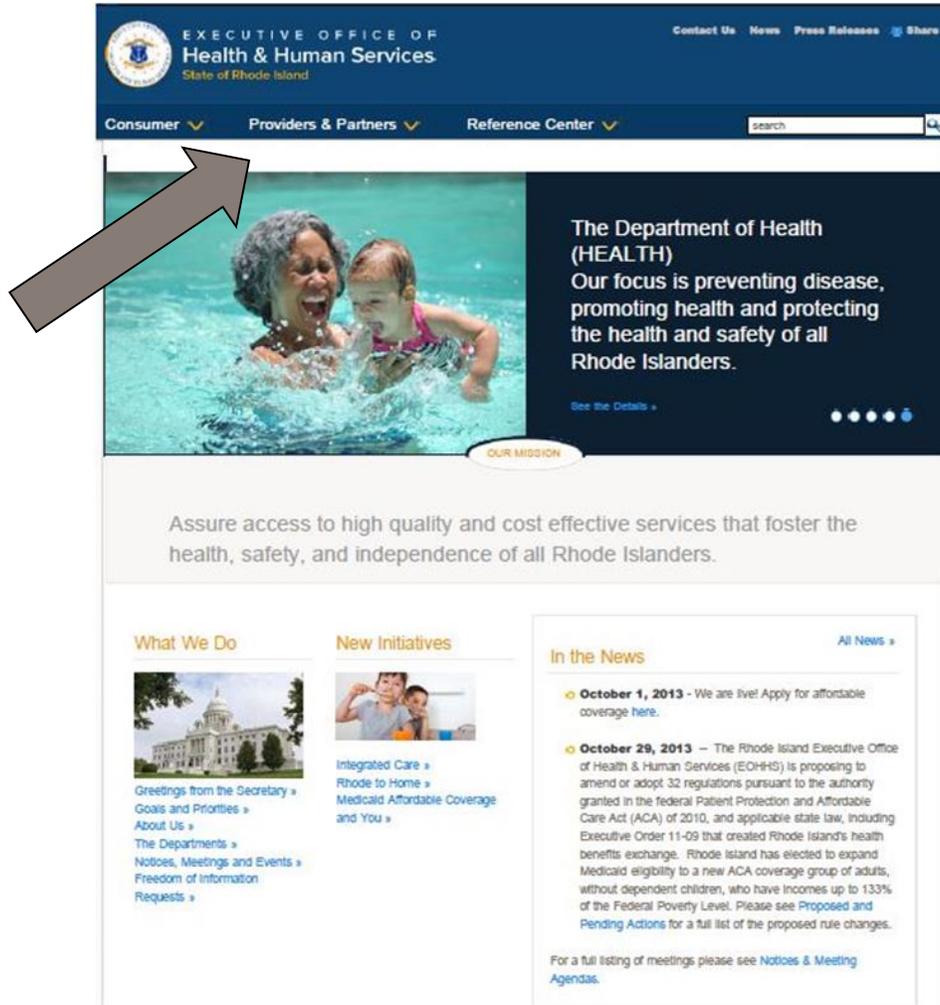
- We appreciate your participation and support. We are committed to helping you every step of the way.
- As a dedicated medical professional, you are an integral part in our quest to ensure all Rhode Islanders have access to quality, affordable health care.



Commonly Used Terms And Abbreviations

- ADA –American Dental Association
- AMA –American Medical Association
- CMS –Centers for Medicare and Medicaid Services Formerly HCFA
- CPT –Physician’s Current Procedural Terminology
- DCYF –Department for Children, Youth and Families
- DHS –Department of Human Services
- DME –Durable Medical Equipment
- DOB –Date of Birth
- DOS –Date of Service
- EDI – Electronic Data Interchange
- EFT –Electronic Funds Transfer
- EOB –Explanation of Benefits
- EOHHS – Executive Office of Health and Human Services
- EOMB –Explanation of Medicare Benefits
- EPSDT –Early and Periodic Screening, Diagnosis and Treatment
- FA –Fiscal Agent
- FFS –Fee–for–Service
- HCP – Healthcare Portal
- HCPCS –Common Procedure Coding System
- HPE –Hewlett Packard Enterprise
- ICD-9-CM –International Classification of Disease–9th Edition
- ICD – 10 International Classification of Disease, new code set effective October 1, 2015
- ICN –Internal Control Number
- ID –Identification
- MA – Medicaid
- MC –Medicare
- MID – Recipient Medicaid Identification
- NDC –National Drug Code
- NPI – National Provider Identifier
- PA –Prior Authorization
- POS –Place of Service
- QMB –Qualified Medicare Beneficiary
- RA –Remittance Advice
- SLMB –Specified Low–Income Medicare Beneficiary
- TPA – Trading Partner Agreement
- TPL –Third Party Liability
- UCR –Usual and Customary Rate
- YTD –Year to Date

EOHHS Website...Your Information Gateway

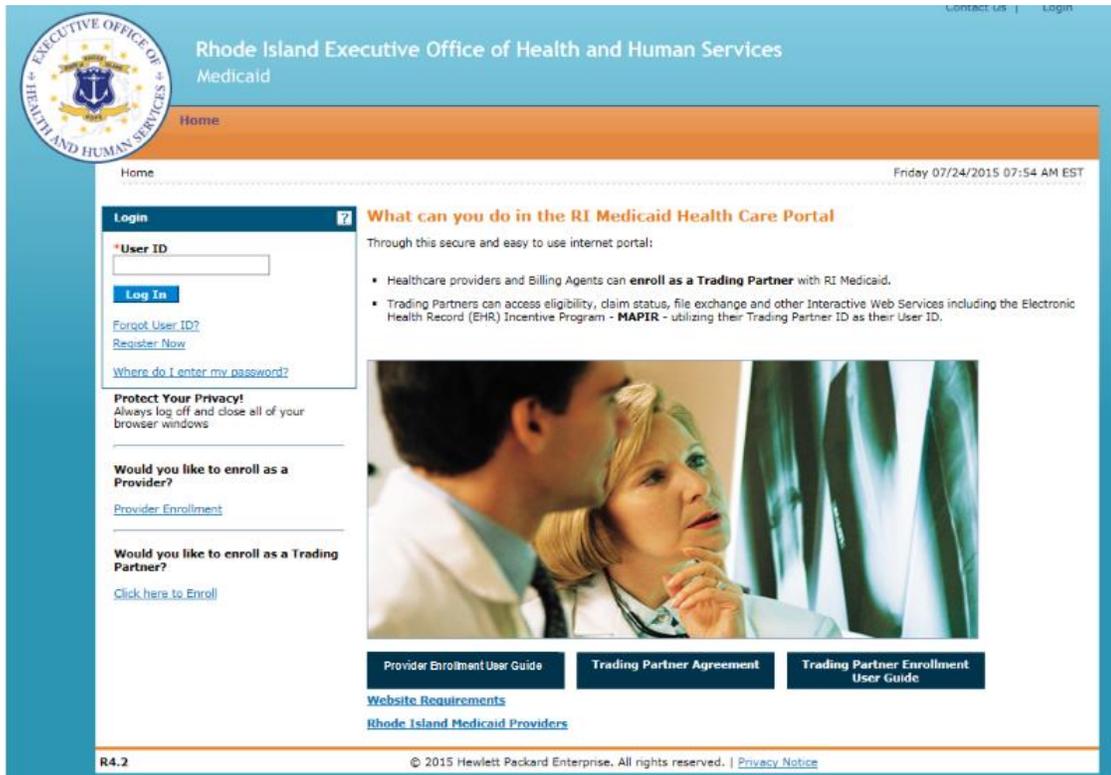


www.eohhs.ri.gov

Most provider resources are available on the Providers and Partners tab. Click on the tab to see a drop down list of available resources.

For more detailed information on using the website, see the E-Learning training titled *Navigating the EOHHS Website*.

RI Medicaid - Healthcare Portal



The screenshot shows the homepage of the Rhode Island Medicaid Healthcare Portal. The header includes the Rhode Island Executive Office of Health and Human Services logo and the text "Rhode Island Executive Office of Health and Human Services Medicaid". The main content area features a "Login" section with a "User ID" input field and a "Log In" button. Below the login section, there are links for "Forgot User ID?", "Register Now", and "Where do I enter my password?". A "Protect Your Privacy!" section advises users to log off and close browser windows. There are also sections for "Would you like to enroll as a Provider?" and "Would you like to enroll as a Trading Partner?". A central image shows a man and a woman in a professional setting. Below the image are buttons for "Provider Enrollment User Guide", "Trading Partner Agreement", and "Trading Partner Enrollment User Guide". At the bottom, there are links for "Website Requirements" and "Rhode Island Medicaid Providers". The footer includes the version number "R4.2" and copyright information "© 2015 Hewlett Packard Enterprise. All rights reserved. | Privacy Notice".

The Healthcare Portal provides access to information needed to conduct business with RI Medicaid, including:

- Eligibility verification
- Claim searches
- Remittance Advice
- Prior Authorization
- and many other business functions

You may log in to the Healthcare Portal to access information 24 hours per day, 7 days per week.

Enrolling as a Trading Partner

Providers and billing agents must enroll as a Trading Partner to conduct business electronically with RI Medicaid.

Note: Providers must first enroll as a Medicaid provider

Rhode Island Executive Office of Health and Human Services
Medicaid

Home

Home Friday 07/24/2015 07:54 AM EDT

Login

User ID

Log In

[Forgot User ID?](#)

[Register Now](#)

[Where do I enter my password?](#)

Protect Your Privacy!
Always log off and close all of your browser windows

Would you like to enroll as a Provider?
[Provider Enrollment](#)

Would you like to enroll as a Trading Partner?
[Click here to Enroll](#)

What can you do in the RI Medicaid Health Care Portal

Through this secure and easy to use internet portal:

- Healthcare providers and Billing Agents can **enroll as a Trading Partner** with RI Medicaid.
- Trading Partners can access eligibility, claim status, file exchange and other Interactive Web Services including the Electronic Health Record (EHR) Incentive Program - **MAPIR** - utilizing their Trading Partner ID as their User ID.

[Provider Enrollment User Guide](#) [Trading Partner Agreement](#) [Trading Partner Enrollment User Guide](#)

[Website Requirements](#)
[Rhode Island Medicaid Providers](#)

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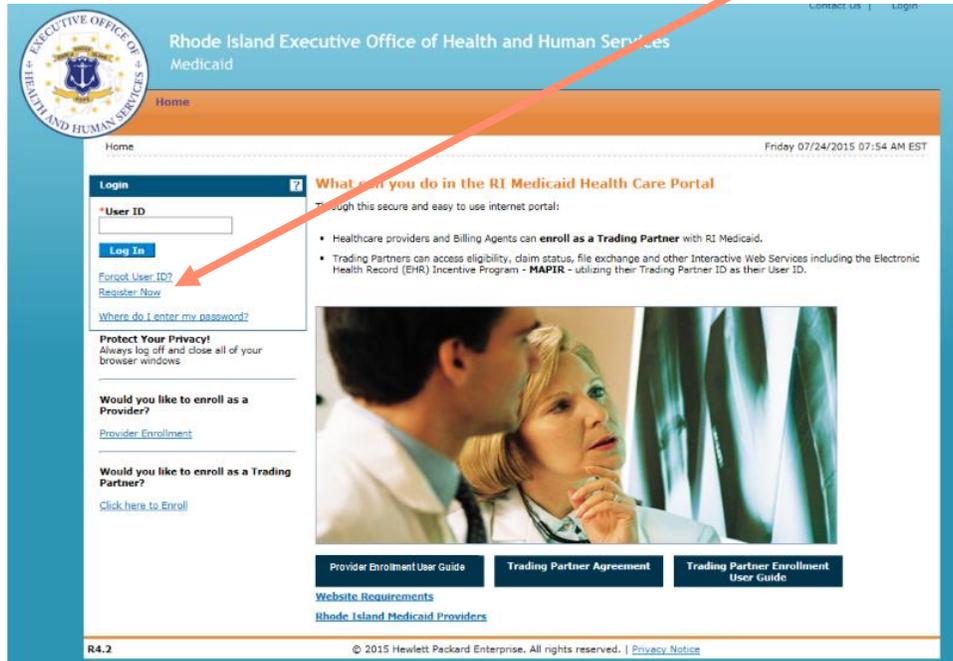
- Enrollment is done electronically within the Healthcare Portal.
- To access the **Healthcare Portal**, go to www.riproviderportal.org
- A step by step user guide for Trading Partner enrollment can be printed from this page (see green arrow).
- To complete the on-line Trading Partner application, click the enrollment link, shown with the orange arrow.

Registering to Use the Healthcare Portal

Once a Trading Partner ID is obtained, you must register in the Healthcare Portal before you can access information.

- Return to the home page of the Healthcare Portal.
- Select the “Register Now” link and follow the instructions.
- On the bottom of the Healthcare Portal Resource page, you will find a user guide to help you through the registration process. Print this guide to help you enroll.

http://www.eohhs.ri.gov/Portals/0/Uploads/Documents/HCP_Registering_to_use.pdf



Rhode Island Executive Office of Health and Human Services
Medicaid

Home

Home

Friday 07/24/2015 07:54 AM EST

What can you do in the RI Medicaid Health Care Portal

Through this secure and easy to use internet portal:

- Healthcare providers and Billing Agents can **enroll as a Trading Partner** with RI Medicaid.
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Log In

User ID

Log In

Forgot User ID?

Register Now

Where do I enter my password?

Protect Your Privacy!
Always log off and close all of your browser windows

Would you like to enroll as a Provider?
Provider Enrollment

Would you like to enroll as a Trading Partner?
Click here to Enroll

Provider Enrollment User Guide

Trading Partner Agreement

Trading Partner Enrollment User Guide

Website Requirements

Rhode Island Medicaid Providers

R4.2

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Log In to the Healthcare Portal.....

Rhode Island Executive Office of Health and Human Services
Medicaid

My Home | Eligibility | Claims | Files Exchange

My Home Tuesday 10/07/2014 03:15 PM EST

Welcome Health Care Professional!

User Details
Welcome [Redacted]
My Profile
Manage Accounts

Trading Partner
Name [Redacted]
Trading Partner ID [Redacted]
Trading Partner Profile

Interactive Web Services
Check Debit Authorization
Check Dental/Vision Limits
Check Prior Authorization
EHR Incentive Program - MIPS
Message Center
NOC Lookup
View Remittance Advice
View Remittance Advice Payment Arr.

We are committed to make it easier for physicians and other providers to perform their business. Our secure site provides the ability to verify member eligibility, search for claims, and conduct electronic file exchanges (upload/download).

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After registering, you will be able to log in to the portal and select the function you need from a list of Business Actions.

Some actions are across the orange tool bar, and some are in a list on the right.

Eligibility Search

Eligibility Thursday 08/14/2014 10:36 AM EST

Eligibility Verification Request ?

* Indicates a required field.

Please select or enter valid Provider information. Either a Billing Provider or Rendering Provider can be specified. Status indicated for the Billing Provider is based upon the current state.

NPI **Provider Type** **Taxonomy**

Billing Provider

Rendering Provider

The Provider ID will only be used for atypical providers who do not qualify for an NPI and Taxonomy.

Provider ID

Please enter in Recipient ID. For CNOM Providers only: If the Recipient ID is not known, please enter the Recipient's Last Name, First Name, Middle Initial (if known), Birth Date, Effective From Date, and Payer.

Recipient ID

Last Name First Name MI Birth Date

Payer

Date range may be 12 months prior to today through the end of the current date, with a maximum 3-month date span.

*Effective From Date Effective To Date

Service Type Code

Service Type Code #1 <input type="text" value=""/>	Service Type Code #2 <input type="text" value=""/>
Service Type Code #3 <input type="text" value=""/>	Service Type Code #4 <input type="text" value=""/>
Service Type Code #5 <input type="text" value=""/>	Service Type Code #6 <input type="text" value=""/>

[Show More Service Type Codes](#)

For an eligibility search, select the NPI, provider type, and taxonomy. Then select the billing provider.

Enter the recipient's ID number and from/to dates of service and click search.

Eligibility Response

The eligibility response will show the benefits for the recipient.

Selecting the plus sign in each section will expand that section to display more information.

My Home | Eligibility | Claims | File Exchange

Eligibility > Eligibility Verification Response Friday 06/07/2013 04:18AM EST

Eligibility Verification Response [Back to Eligibility Verification Request](#) ?

[Expand All](#) | [Collapse All](#)

Verification Number : 2013099012345

Recipient Information -

Recipient ID 0132546789 Recipient Name John Doe
Birth Date 08/21/1986 Gender Male
Date of Death -

Benefit Plan Details -

Plan Name	Effective From Date	Effective To Date	Base Deductible	Message
Categorical and Fee for Service	08/15/2012	08/15/2012	\$0.00	Message Text

Service Type Code Details - Covered +

Service Type Code Details - Not Covered +

Managed Care Details +

Managed Care Service Type Code Details - Covered +

Lock-In Details +

Medicare Details +

TPL Details +

Premium Payment Details +

Long Term Care Details +



Claim Status Search

Search Claims

All Claims

Covered Provider Information

Please select or enter valid Provider information. Status indicated for the Billing Provider is based upon the current state.

NPI Provider Type Taxonomy
Billing Provider

The Provider ID will only be used for atypical providers who do not qualify for an NPI and Taxonomy.
Provider ID

Claim Information

ICN will override other search parameters.
ICN

Recipient and Service Information

Recipient ID and Service From and To dates are required fields for the search when ICN information is not entered.

Recipient ID
Service From To
Original Billed Amount RX Number

Search Results

To see the Claim Detail and Claim Line Item Details, click on the '+' next to the ICN.

Total Records: 1

	ICN	HIPAA Status Category	HIPAA Status Code	HIPAA Entity Code	Service Date	Total Charges	Paid Amount
+	4	F1-Finalized Payment			11/03/2013 - 11/09/2013	\$70.00	\$70.00

To search for the status of a claim, select the NPI, provider type, taxonomy, and billing provider.

Then enter the ICN OR the recipient ID and the service from/to dates and select search.

Prior Authorization Status Inquiry

PRIOR AUTHORIZATION STATUS INQUIRY

If you are a covered entity with an NPI and taxonomy this information and provider type must be entered below. Provider ID will only be used for atypical providers who do not qualify for an NPI and taxonomy.

Please enter a valid NPI, Provider Type, and Taxonomy combination.

NPI: Provider Type: Taxonomy:

Please select the appropriate combination to inquiry by.

Billing Name	Rendering Name	Status
<input checked="" type="radio"/> <input type="text" value="ASSOCIATES, INC."/>	N/A	Active

To search for the status of a Prior Authorization, complete the top section and search for provider name.

Be sure to select if you are the requesting or supplying provider.

Then complete as many fields as possible to narrow the search, but the minimum information is Provider information and Recipient ID number.

Please select one of the following provider types.

Requesting Provider Supplying Provider

Please enter the recipient's identification number

Recipient's ID Number:

You may further tailor your request by entering any of the following

PA Number:

Begin Date (MM/DD/YYYY): End Date (MM/DD/YYYY):

Locating Remittance Advice

REMITTANCE ADVICE

If you are a covered entity with an NPI and taxonomy this information and provider type must be entered below. Provider ID will only be used for atypical providers who do not qualify for an NPI and taxonomy.

Please enter a valid NPI, Provider Type, and Taxonomy combination.

NPI: Provider Type: Taxonomy:

Please select the appropriate combination to inquiry by.

Billing Name	Rendering Name	Status
<input checked="" type="radio"/> C <input type="text"/>	N/A	Active

Please select a provider number.

Provider ID:

Retrieve the last four Remittance Advice Reports by selecting the appropriate NPI, Provider Type and Taxonomy code.

After clicking search, click the circular button next to the correct billing name. In this example, there is only one choice.

Locating Remittance Advice

REMITTANCE ADVICE

If you are a covered entity with an NPI and taxonomy this information and provider type must be entered below. Provider ID will only be used for atypical providers who do not qualify for an NPI and taxonomy.

Please enter a valid NPI, Provider Type, and Taxonomy combination. 

NPI: 19: Provider Type: Taxonomy: 1223G0001X

Please select the appropriate combination to inquiry by:

Billing Name	Rendering Name	Status
<input checked="" type="radio"/> WIL <input type="text"/>	N/A	Inactive

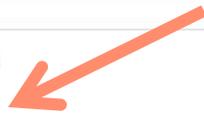
Please select a provider number.

Provider ID:

Only the four most recent will be accessible - download promptly.

REMITTANCE ADVICE FILES AVAILABLE VIA THE WEB

Remittance Date
20091211
20120211
20130614
20140801



Remittance Advice (RA)

- It is the provider's responsibility to retrieve the RA from the EOHHS website after every financial cycle.
- The RA will provide the status of all claims you submitted to RI Medicaid. It will display information on paid, denied, and suspended claims.
- You must save or print for your records.
- There are only 4 historical RA's available at a time.
- As new RA's are generated, the oldest is deleted.
- Once the RA is deleted, it is not retrievable and will not be printed.

Remittance Advice Payment Account Inquiry

REMITTANCE ADVICE PAYMENT AMOUNT INQUIRY

If you are a covered entity with an NPI and taxonomy this information and provider type must be entered below. Provider ID will only be used for atypical providers who do not qualify for an NPI and taxonomy.

Please enter a valid NPI, Provider Type, and Taxonomy combination.

NPI: Provider Type: Taxonomy:

Please select the appropriate combination to inquiry by.

Billing Name: Rendering Name: Status:

Please select a provider number.

Provider ID:

Please enter a valid date range.

Start Date: End Date:

REMITTANCE ADVICE PAYMENT AMOUNT RESULTS

Payment Date	RA Number	Payment Amount	Payment Type
04/11/2014	0001	\$9,996.04	EFT
03/28/2014	0001	\$1,347.68	EFT
03/14/2014	0001	\$5,916.68	EFT
02/28/2014	0001	\$6,599.28	EFT

For a Remittance Advice Payment Account Inquiry, select the NPI, Provider Type and Taxonomy and hit search.

Then enter the start and end dates of your search.

Information is blocked for privacy.

Messages



[Home](#) * [Profile](#) * [Help](#) * [Logoff](#) *

WARNING - This is the acceptance environment

[INBOX](#) [OUTBOX](#) [COMPOSE](#) [SEARCH](#)

Tue Jul 29 11:50:52 EDT 2014

There are no Messages in your Inbox.

Inbox

Subject	Category	Date Sent
---------	----------	-----------

Messages more than six months old will automatically be deleted.

Messages pertaining to website maintenance will be posted in the message section.

Provider Reference Guides

- Reference guides are available for general Medicaid information as well as provider specific information. Please refer to the Provider Guides when looking for information on:

- Provider Participation
- Covered and Non-Covered Services
- Medical Necessity
- Limitations and Special Requirements
- Reimbursement Guidelines
- Other Important Topics

Please note coverage guidelines are subject to change. Please refer to your **Provider Updates regularly for any changes regarding your provider type.*



Provider Guides On The Web

Medicaid Provider Manual

The Rhode Island Medicaid Program structures benefits available to Medicaid clients in a manner that promotes access to medically necessary and cost-effective care.

The General Guidelines manual contains basic information for all providers on enrollment, EDI enrollment, and claims processing. Click below to view the manual:

 [RI Medicaid General Guidelines Manual](#) - for all Providers

To view provider information specific to your provider program or service type, select the appropriate manual from the alphabetical listing below.

- 
- [Ambulance](#)
 - [Clinical Laboratory](#)
 - [Dental](#)
 - [Durable Medical Equipment](#)
 - [Early Intervention](#)
 - [Home Health](#)
 - [Hospice](#)
 - [Hospital](#)
 - [Local Education Agency](#)
 - [Long Term Care](#)
 - [Pharmacy](#)
 - [Physician](#)
 - [Podiatry](#)
 - [Rehabilitative Service](#)
 - [Vision](#)
 - [Waiver Services](#)

Provider Guides can be found on the EOHHS website.

Click on the Providers and Partners tab, then Provider Manuals, then Medicaid Provider Manual.

Click on your provider type to access the guide or view the RI Medicaid General Guidelines.

Recipient Information

Recipient Eligibility Information – Recipient should present all active ID cards at all appointments.

Medicaid

- Each recipient is issued a Medicaid ID card, also known as the "Anchor Card".

RlteCare

- Recipients will also have a "Plan" ID card, issued by United Healthcare or Neighborhood Health.

RlteShare

- Recipients will also have a primary insurer commercial carrier ID card.

Connect Care Choice

- Each recipient is issued a Medicaid ID card, also known as the "Anchor Card".

RlteSmiles

- Recipients will also have an ID card issued by United Healthcare.

Rhody Health Partners

- Recipients will also have an ID card issued by United Healthcare or Neighborhood Health.

Rhody Health Options

- Recipients will also have an ID card issued by Neighborhood Health.

Connect Care Choice Community Partners

- Each recipient is issued a Medicaid ID card, also known as the "Anchor Card".

Identification Cards

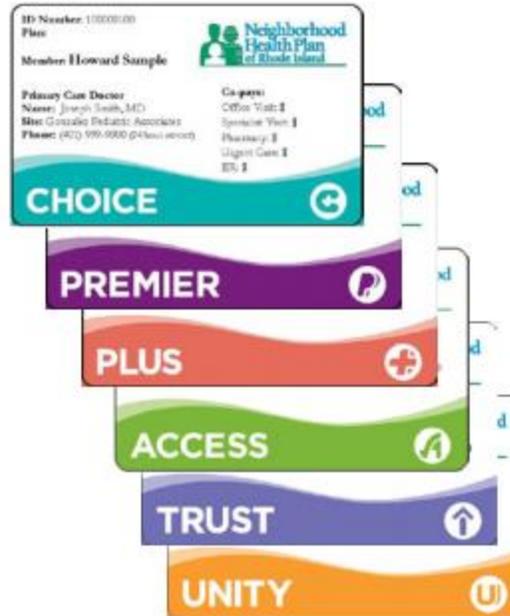
RHODE ISLAND DEPARTMENT OF HUMAN SERVICES
MEDICAL ASSISTANCE IDENTIFICATION CARD

RECIPIENT NAME: **JANE A DOE** VER: **301**

MID: **555-55-5555** CARR: **MAB** SEX: **F** DOB: **02/12/38**



RI 02882-0000
WARRICK, R.I. 02687



ID Number: 100000100
Plan: 

Member: **Howard Sample**

Primary Care Doctor
Name: Joseph Smith, MD
Site: Gonzalez Pediatric Associates
Phone: (401) 999-9000 (24 hour service)

Co-pays:
Office Visit: \$
Specialist Visit: \$
Pharmacy: \$
Urgent Care: \$
ER: \$

VALUE 

Members: Medical or pharmacy questions, call Neighborhood Member Services
Providers: to verify eligibility/benefits go to <https://connect.navinet.net> or call Neighborhood Member Services

Mental Health & Substance Abuse: 1-800-215-0058 (Beacon)
Pharmacy:
• Rx BIN #: 600428 / PCN #: 05600000 Rx Group: NHPRI
• For non-clinical inquiries, call PerformRx 1-866-910-7654
• For prior authorizations, call Neighborhood Member Services

DME (Medical equipment & supplies): 1-866-205-2122 (DMEvision)

This card is for identification only and does not certify coverage.

Neighborhood Member Service: 1-855-321-9244
TTY/TDD (for people who are deaf): 1-401-459-6690
www.nhpi.org

Identification Cards

UnitedHealthcare
A UnitedHealth Group Company

Health Plan (80840) 911-87726-XX
Member ID: XXXXX-999999876-00
Member:
SUBSCRIBER BROWN

PCP Name:
DR PROVIDER BROWN
PCP Phone: (800) 123-4567

Payer ID: 87726

PrescriptionSolutions
Rx Bin 610494
Rx Grp ACURI
Rx PCN 9999

RiteCare

0501 Administered by UnitedHealthcare of New England, Inc.

In an emergency go to nearest emergency room or call 911. (Printed 00/00/00)

This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website [www.uhcmedicaid.com] or call.
For Members: 800-587-5187 Hard of Hearing 711
Mental Health: 800-435-7486 TDD/TTY 800-486-7914

For Providers: www.unitedhealthcareonline.com 877-842-3210
Medical Claims: PO Box 31361, Salt Lake City, UT 84131

Pharmacy Claims: Prescription Solutions, PO Box 29044, Hot Springs, AR 71903
For Pharmacist: 888-306-3243

UnitedHealthcare
A UnitedHealth Group Company

Health Plan (80840) 911-87726-XX
Member ID: XXXXX-999999876-00
Member:
SUBSCRIBER BROWN

PCP Name:
DR PROVIDER BROWN
PCP Phone: (800) 123-4567

Payer ID: 87726

PrescriptionSolutions
Rx Bin 610494
Rx Grp ACURI
Rx PCN 9999

Children w/Special Needs

0501 Administered by UnitedHealthcare of New England, Inc.

In an emergency go to nearest emergency room or call 911. (Printed 00/00/00)

This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.uhcmedicaid.com or call.
For Members: 800-587-5187 Hard of Hearing 711
Mental Health: 800-435-7486 TDD/TTY 800-486-7914

For Providers: www.unitedhealthcareonline.com 877-842-3210
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For Pharmacist: 888-306-3243

UnitedHealthcare
A UnitedHealth Group Company

Health Plan (80840) 911-87726-XX
Member ID: XXXXX-999999876-00
Member:
SUBSCRIBER BROWN

PCP Name:
DR PROVIDER BROWN
PCP Phone: (800) 123-4567

Payer ID: 87726

PrescriptionSolutions
Rx Bin 610494
Rx Grp ACURI
Rx PCN 9999

Rhody Health Partners

0501 Administered by UnitedHealthcare of New England, Inc.

In an emergency go to nearest emergency room or call 911. (Printed 00/00/00)

This card does not guarantee coverage. For coordination of care call your PCP. To verify benefits or to find a provider, visit the website www.uhcmedicaid.com or call.
For Members: 800-587-5187 Hard of Hearing 711
Mental Health: 800-435-7486 TDD/TTY 800-486-7914

For Providers: www.unitedhealthcareonline.com 877-842-3210
Medical Claims: PO Box 31361, Salt Lake City, UT 84131

Pharmacy Claims: Prescription Solutions, PO Box 29044, Hot Springs, AR 71903
For Pharmacist: 888-306-3243

Provider Responsibility

Your Role as a Rhode Island Medicaid Provider is to check eligibility for every date of service prior to delivery.

- Recipient Eligibility: Medicaid, Medicaid Long Term Care, RItCare, RItShare, RItSmiles, Rhody Health Partners, Connect Care Choice, Rhody Health Options, Connect Care Choice Community Partners.
- Third Party Liability (TPL)
- Determine Prior Authorization (PA) service requirements.

All information is available when checking Eligibility in the Healthcare Portal.

If you still have questions after verifying eligibility, you may contact our Customer Service Help Desk by calling 401-784-8100 for local and long distance calls, or

1-800-964-6211 for in-state toll calls.

Billing Rhode Island Medicaid Program

Electronic billing is always the preferred method of claim submission. When necessary, RI Medicaid does accept UB-04, CMS-1500, and the ADA 2012 standardized claim forms. Medicaid also utilizes its proprietary Waiver/Rehab claim form.

If circumstance requires the need for paper claim submission, please mail your claims to:

Hewlett Packard Enterprise

PO Box 2010

Warwick, RI 02887-2010

Access the EOHHS website “Forms and Applications” section to print the Waiver/Rehab claim form and for claim instructions for all claim types.

Paper Claims vs. Electronic Claims

Electronic Claims

- Cost savings
- Faster turnaround time
- Free software
- No original signature required
- Quicker connections
- Quicker reimbursement (usually next scheduled financial cycle).

Paper Claims

- Higher costs (postage, forms)
- Longer reimbursement wait time
- Requires original signature
- Slower turnaround time due to manual data entry

For additional information about electronic claim submission and our free software, please visit the EOHHS website, click on the Providers and Partners tab, then Billing and Claims. On the right side of the page, select the Provider Electronic Solutions (PES) Software Link. You may also contact the Electronic Data Interchange Coordinator via email at mary-jane.nardone@hpe.com.

Timely Filing

Important Timely Filing Information

In order for a claim to be processed for adjudication, the Medicaid claim must:

- Be received within 12 months of the date of service (DOS) for services, or
- If the claim is over a year old, then within 90 days of the date of denial.

Any claim that does not meet these criteria will be denied for timely filing.



Adjustments to a paid claim, with a DOS over a year old, will be accepted up to 90 days from the remittance advice date for the original claim payment.

Timely Filing – Third Party Payer

Claims over a year old, that involve a third party payer must be submitted:

- Within 90 days from the Explanation of Benefits (EOB) date from the other payer. The other insurance actual Explanation of Benefits must be attached to the claim.



Any claim with a DOS over 1 year old, received with a third party payer EOB date greater than the 90 days will be denied for timely filing.

Timely Filing – Exception

The criteria for overriding the 12 month timely filing limit are:

- Retroactive recipient or provider eligibility (within 90 days of claim submission),
- Previous denial (other than timely filing, within 90 days of claim submission)

Provider computer printouts are not considered acceptable proof of timely filing.



Claims submitted for the DOS over 1 year must be submitted on paper to the appropriate Provider Representative and must include the necessary documentation.

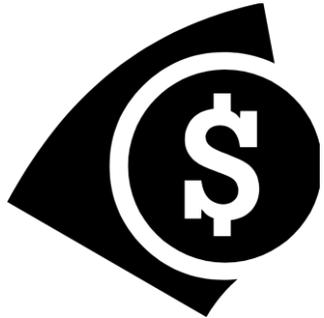
Claim Submission

Checking eligibility helps navigate where your claim should be sent for processing.

Medicaid, Medicaid Long Term Care, Connect Care Choice, Connect Care Choice Community Partners	Submit claims to Hewlett Packard Enterprise
RlteCare	Submit claims to insurer: either Neighborhood Health or United Healthcare
RlteShare	After primary payer, submit claims for co-insurance and deductible to Hewlett Packard Enterprise
RlteSmiles	Submit claims to United Healthcare
Rhody Health Partners	Submit claims to insurer: either Neighborhood Health or United Healthcare
Rhody Health Options	Submit claims to Neighborhood Health
Out of plan benefits such as non-surgical dental procedures.	Submit claims to Hewlett Packard Enterprise

Claim Payment

- All providers are required to accept payment via Electronic Funds Transfer (EFT). Paper checks will not be issued.
- Each financial cycle is approximately 2 weeks. However, due to fiscal necessity, some cycles may be longer or shorter. For the claims processing and payment schedule visit the EOHHS website, click on the Providers and Partners tab, and then click on Billing and Claims.



Individual claim status is reported at the end of each financial cycle on the provider's Remittance Advice (RA).

Provider Representatives

Each provider type has been assigned a Provider Representative to assist with any extraordinary claim issues, unique policy questions, general provider education or to navigate the Medicaid Program.

A listing of Provider Representative is found on the EOHHS website by clicking Providers and Partners. From the General Information page, click on Provider Representatives on the right.



Provider Representative	Contact Information	Focus Area
Sandra Bates	sandra.bates@hpe.com 401-784-8022	Ambulance, Dental Services, Dialysis Center, Federally Qualified Health Centers, Free Standing Ambulatory Surgical Centers, Independent Labs, Indian Health Services, Lifespan Hospitals and Physician Groups, Vision, Podiatry, Chiropractor, Certified Nurse Anesthetists
Marlene Lamoureux	marlene.lamoureux@hpe.com 401-784-3805	Durable Medical Equipment, Eleanor Slater Hospital, Home Health, Hospice, ICF-MR, Personal Care Aide/Assistant, Nursing Homes, Out of State Hospitals and Physician Groups, Independent Hospitals and Physician Groups, Audiologist, Nutrition
Karen Murphy	karen.murphy3@hpe.com 401-784-8004	Adult Day Care, Assisted Living, Care New England Hospitals and Physician Groups, Physicians, Physician's Assistant, Case Manager/Social Worker, CEDARR, Children's Services, Community Mental Health Centers, DCYF, Early Intervention, Free Standing Psychiatric Hospital, Lead Center, LEA, Licensed Therapist, MH Rehab, MR/DD, Other Therapies, Psychologist, Substance Abuse Rehab, Waiver Group Homes
Ann Bennett	Ann.bennett2@hpe.com 401-784-3840	Pharmacy
Mary-Jane Nardone	mary-jane.nardone@hpe.com 401-784-8014	EDI Coordinator
Deborah Meiklejohn	deborah.meiklejohn@hpe.com 401-784-3859	Training and Documentation Specialist

Kelly Leighton	kelly.leighton@hpe.com 401-784-8013	Provider Service Manager
Dorothy Pizzarelli	dorothy.pizzarelli@hpe.com 401-784-8012	Customer Service Supervisor
Customer Service Help Desk	401-784-8100 or Toll Free 1-800-964-6211	Monday through Friday 8:00 AM-5:00 PM

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