## 11.03.21 - NE Tribal/Medicaid Monthly Call Agenda

## Conference Access Number (888) 820-1398

#### Attendee Code- 7300221

**Present:** Jacob Kawamoto, Danielle Trejo, Chris Morton, Jessie Edwards, Cathy Kearney, Aaron Reece, RickyAnn Fletcher (MCNA), Tracy Nelson (MCNA), LeAnn Ortmeier (UHC), Jenn Nelson (UHC), Gelisha Jeffers (HB), Mariana Johnson (NTC), Jenna Free (Omaha), Audrey Parker (Omaha), Tashina Provost (Omaha), Nancy Mackey (Santee), Michelle Hallowell (Ponca), Sylvia Allen-Lopez (Ponca), Robin, Becky

# **SPA/Waiver Updates**

- SPA
  - No Updates
- Waiver Authority
- No Updates

#### Additional Items

- WellChild Visit claims issues
  - For Healthy Blue and United Health Care, the "NU" indicator is not being received on the MCO end. However the tribes are processing the WellChild claims with the correct NU ID, but the ID is not appearing on the MCO's systems which is causing rejections for all of these claims.
    - Gelisha with Healthy Blue has been working on this. Y or N value comes in and directs to NU AB2 or SP indicator on the claim. There is just a Y being received in the EDI loop, but Healthy Blue also needs the extra two digits that support it being an NU. Somewhere in between electronic submission from the Tribes and receipt by Health Blue, the NU is being dropped off. Gelisha is also meeting with the claims team to address how best to handle paper mail-ins. But when claims are being sent/received electronically, information is being lost somewhere after being submitted to the clearing house, but before being received by Healthy Blue.
  - o (Audrey) Will timely filing requirements be waived for these claims?
    - As long as they have been received timely, Healthy Blue will make sure timely filing is not an issue for the Tribes. For claims billed online, HB knows they are working through EDI issues currently.
  - At this time, paper claims are still able to be processed. Health Blue suggests that claims continue to be filled out properly and submitted as paper claims until the issue can be resolved.
    - Tribes need to work with their clearing house if the indicators are on there when it leaves the Tribe's office, why is it not getting to Healthy Blue with those indicators?

- Jenna Omaha Tribe has a ticket going with Ability (their clearing house)
- LeAnn with UHC agrees with issues identified
  - UHC's understanding is it is an issue from the clearing house dropping modifiers. Tech
    from UHC reached out and this is a known issue with them. Not sure what the clearing
    house will do to resolve this
- Question: Is Santee, or anyone else from the Tribes having WellChild issues?
  - o No
- Question: Who do they use?
  - Santee: Change Healthcare, never have changed.
  - Omaha –had Wellchild claims issues with Change Healthcare too. Now they have issues with two of the MCOs
  - Override from taxonomy from 2008 Healthy Blue is not paying the all-inclusive rate.
     Comparing paper claims to electronic claims, Omaha Tribes noticed the taxonomy code is not crossing over. Is that why AIR is not being paid by Healthy Blue? Is there any way to override that?
    - Gelisha: Worked together with the Omaha Tribe on this. Claims for Healthy Blue taxonomy code with 32B is empty (this is the issue). Healthy Blue claim selection logic is trying to match to the proper record when adjudicating, but since that field is blank, it picks the individual practitioner, not the group. But AIR is paid to the group, and this is why G18 denial is coming up. There is not a way to override that in the system, Healthy Blue needs that field for selection logic to work appropriately. This has been submitted to the clearing house to figure out why this field is being stripped. Gelisha is doing a manual workaround in the meantime in order to get the encounter rate. This is tough, and from the date it is requested to the date it happens, there is a lag. Taxonomy code needs to get on the claims for them to process correctly.
    - Paper claims are not preferable, but if that would be more accurate until the clearing house can fix this issue, that would be a good way to go.
    - From time a G18 batch is submitted, and then reimbursed, there is lag, and there are new claims coming in. For past claims, Heathy Blue will process these and bill them in batches. But for new claims, is Omaha able to bill with paper claims and will they be filled out correctly?
      - Yes, they can do that.
    - Gelisha will set up a meeting and look at outstanding claims that need to be rebilled or is covered in the projects/batches Healthy Blue is running. Next meeting is next Monday, and Gelisha can have things organized by then.
- Crossover Claims Update
  - o Finance team is asking for the original outstanding fee for service crossover claims so they can understand how those claims are coming in along with the clearing house process. This will help the teams on how to process and back pay those claims. Any claims where it is fee for services and the crossover claims have not been billed correctly, it would be helpful if examples could be sent. They can be old or more recent, any outstanding Fee-For-Service crossover claims the Tribes have.

- From the Tribes: There is no original claim. The Tribes would have to pull Medicare EOBs, which would be difficult.
  - Gelisha mentioned conversations with Omaha Tribe about using correct payer ID number on secondary claims so they will stop going to Wellcare. Has this issue been addressed across the board with all of the Tribes to use the Healthy Blue payer ID?
    - Santee: correct on Santee's end.
      - Within clearing house, when sending claim to Medicare, payer ID for Healthy Blue needs to be there for the secondary payer.
         Healthy Blue then needs to get a hold of Medicare and ask for those EOBs to be sent with the correct payer ID.
    - Gelisha, will have to check with others to find out how to do this. Her
      understanding is that it is up to the provider to add the secondary. Is
      there a Medicare contact?
    - LeAnn, and Mariana Nancy is correct. This is a behind the scenes sort
      of thing where MCOs need to work with corporate partners and
      Medicare to update these issues in their systems.
- Mariana will follow up with the Tribes as she follows up on some items for Jenn Newcombe who was out the week of this call.
- MLTC Tribal Health Website
  - o The Tribal Health webpage has been republished on the DHHS website
    - https://dhhs.ne.gov/Pages/Tribal-Health.aspx
  - Webpages were sent out for review on 10/20/21