

Q & A Conference Call 2/13/08 on BG Rate Increase

Is the intake going to change?

There will not be any rate changes associated with the assessment services (H0001).

This is only for members who are women?

The rate for women's intermediate services H0018 @ \$125.00 per day. There have not been any rate changes to men's H0018 services.

How will the payment be done, i.e. reverse claims etc?

The originally paid claim will be reversed and reprocessed through a batch reversal process. As the claim is reprocessed it will be adjudicated against the updated fee schedule, based on the service date. The batch reversal process allows us to reverse and reprocess a significant number of claims at one time which reduces "wait time" for the provider to receive their additional payments.

Will the claims be kept in a separate PSV?

Claims will be included in your general provider summary voucher. ValueOptions will supply the provider with a spreadsheet that identifies reprocessed claims. This will be emailed to the provider via SIGABA certified email.

What is SIGABA?

SIGABA is the technology used to transfer personal health information securely across the internet. Contact regional representative for more information. *see attachment.

When to start billing at new rate?

New rates are effective 02/14/08 and providers should bill the new rates starting 02/14/08.

What date to go back to?

Rates will be retroactive effective 10/01/07.

What to do with already submitted claims under new rate?

Your claims will be reprocessed and you will not need to submit corrected claims with the new rates. Effective 02/14/08 you will need to submit claims with the new rates.

What will be on the list or report?

Information that will be listed on the report will be: provider number, vendor number, claim number, member number, date of service, service code, modifier code, charged amount, allowed amount, prepaid amount, paid amount, patient account number and if possible, the member's name.

What is Lonnie's e-mail?

Lonnie.Coates@ValueOptions.com

Will these claims be paid to a provider above CAP?

Claims and rates will be applied to caps.

Subject to co-pay?

If a member's claims have coinsurance percentages applied to them the reprocessed claims will have the coinsurance percentage amount recalculated based on the new allowed amount.

TPL?

Third Party Liability

This term is used if an individual has primary (other) insurance. Claims are processed in the following order: Private Insurance, Medicaid, and Block Grant. Block grant is always the payor of last resort.

At what rate are claims paid at for TPL?

Providers will be reimbursed at their contracted rate. Example: A member has Blue Cross Blue Shield and they pay \$30.00 for a service. Your ValueOptions contracted rate is \$60.00, ValueOptions will pay you \$30.00 to meet your contracted rate.

Please let me know if you have any questions

Lonnie Coates

PR Director, ValueOptions Kansas

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