Newborn and Other Recipients Incorrectly Enrolled in a Managed Care Plan (March – September 2011)

From **March 2011 through September 2011,** incorrect recipient enrollment information appeared in the Electronic Verification System (EVS).

Because of the incorrect information, both of the State's managed care organizations (MCOs) **correctly** denied or recouped claims payment for affected recipients, largely newborns. During this time period, the Nevada Medicaid Fee For Service (FFS) claims for these recipients submitted to Magellan Medicaid Administration or HP Enterprise Services (HPES) **incorrectly** denied. The Division of Health Care Financing and Policy (DHCFP) assures providers that the incorrect enrollment information in EVS has been corrected, and as of February 17, 2012, the affected claims have been reprocessed and adjudicated. It is important to note that not all managed care enrollment information during this time period was incorrect.

Please follow these billing instructions for outstanding affected claims:

- If providers have been denied MCO payment for these claims and they have submitted the claim to Magellan Medicaid Administration or HPES, but have **not** received payment, after verifying FFS eligibility, please send special batch paper claim forms along with a cover sheet to **HPES**.

- If providers have not yet submitted the claim to HPES and the claim is less than six months old, after verifying FFS eligibility, they should submit the claim to HPES before the claim stale dates. If a claim has been rejected by HPES for stale dating, then resubmit claims special batch to HPES.

Because the MCOs offer certain "value added" benefits not available through FFS, and because the DHCFP stresses that EVS is the official source of eligibility and enrollment information, DHCFP will extend those MCO value added benefits to any mis-identified FFS recipients affected by this particular EVS issue. This includes, but is not necessarily limited to, CPT codes 54150 and 54160. Please submit any claims for these codes directly to HPES.

HPES will only override stale dated claims after verification of eligibility for the above time frame and criteria listed above.