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To: Credible Documentation
Subject: Credible Payer and Billing News: July 2017

CREDIBLE

Behavioral Health Software



Credible Payer and Billing News: July 2017

DEAR CREDIBLE,

Welcome to July's listing of Payer and Billing news!

Based on Partner surveys and user group feedback, Credible is now providing monthly updates on billing and payer, clinical, and industry news to help keep our Partner community up-to-date. You can find all previous updates for these newsletters in Credible Help under General Information > Release Notes and Communications.

CCBHCs

CCBHC's are now actively demonstrating in all 8 selected states!

- **T1040:** Based on Partner and OMAP feedback, Credible's Technical team is revisiting the CCBHC T1040 sproc to allow for the separation of claims by day prior to the reordering of the services within the claim.
- **Pennsylvania:** In preparation for the July 1st Demonstration GoLive, Credible provided a Configuration training on June 29, 2017. This outlined the changes Partners will need to make in their configuration prior to demonstrating. In order to populate Evidenced Based Practice coding into the NTE segment in L2400, specific form configuration is required. You can find additional information regarding the configuration at **Credible Help > State-Specific Information > Pennsylvania**. Payer testing begins in July and August for MCOs and MA FFS, respectively.
- **Support:** Should CCBHC Partners need additional assistance during the Payer testing and Demonstration Phase, please submit a task ticket and a Billing Specialist will be happy to assist you.

Payer Announcements

Arkansas

- By November 1, 2017, providers will be required to enroll in EFT/Automatic Deposits. AR Medicaid is requesting Providers to submit their account information. Please see [this link](#) for the current Provider Enrollment form for EFT.
- MMIS (Arkansas Medicaid Management Information System) is slated for delivery in Q4 of 2017.
- Credible has reviewed the announcement from MMIS regarding vendor enrollment. As Credible does not submit claims directly from the solution on behalf of the Partner (meaning the Partner owns the Trading Agreement with AR Medicaid and in turn has a unique submitter id) a vendor agreement is not required.
- Early HealthCare Provider Portal registration (MMIS) begins September 2017. Partners submitting electronic claims will need to enroll. Please see [this link](#) for additional information.
- With the release of MMIS, AR Medicaid will be editing files based on HIPAA 5010 standards. *Companion Guides and Payer Testing Instructions* for the new MMIS system are available [here](#).
- Credible is currently reviewing the new *Companion Guides* for 837p, 837i, 270, and 835, and will provide additional information/guidance should configuration changes be required.

Arizona

- The application deadline has been extended until August 18, 2018 for AHCCCS Providers to have time to participate in the Targeted Investments (TI) program which is a one-time opportunity to support integrated and coordinated care. TI provides financial incentives to eligible AHCCCS Providers to develop systems for Integrated Care.
- *Planning for Integrated Care:* Credible's Technical team is currently underway in the development of a Primary Care Module for delivery in Q4 of 2017.

Florida

- During the first week of July, Florida Department of Financial Services completed their annual close of the state fiscal year, resulting in an expected delay in payment to Florida's Medicaid Providers.
- On June 22, 2017, the Florida Agency for Health Care Administration posted the latest version of the final adopted rule (FAC) regarding Provider Reimbursement Schedules and Billing Codes. Please see [this link](#) for additional information.

Ohio

- The OH Behavioral Health Redesign was officially delayed. A new tentative GoLive date of 1/1/2018 was announced by OH Medicaid and will be rolled into the Medicaid Carve In initiative also slated for 1/1/2018.
- Credible will continue to attend the OH Medicaid and EDI Workgroup calls and address changes in requirements as additional edits are made by OH Medicaid.

Virginia

- Commonwealth Coordinated Care Plus (CCC Plus) will launch in the Tidewater region on August 1, 2017, and will be phased across the state by January 1, 2018. CCC Plus is a new Medicaid program that provides medical, behavioral substance use disorder, and long-term services and support under one program.
- DMAS is currently conducting weekly Provider Webinars and Town Halls to prepare Providers for the transition. Please see [this link](#) for additional information.
- Credible provided an overview of configuration considerations at VARO to prepare for the transition toward CCC Plus. Impacted configuration involves the addition of newly contracted Payers, Billing Matrix Allowed Payer Information, and Billing Office Claim Configuration. As Partners prepare to begin billing the new MCOs, please enter a task ticket for additional support and Q&A regarding Partner-specific configuration needs, payer testing, etc.

New Functionality

277 Claim Status Reader

Credible is happy to announce the release of the 277 Claim Status Reader. Billing staff are now able to upload 277 files directly into the system. Credible's 277 reader will then validate the second level of file scrubbing completed by a Payer. The 277 reader will return validation as to whether a claim is accepted for further processing or rejected. If rejected, additional information regarding the claim level data and rejection reason is returned to allow staff the ability to quickly resolve the error. Management can quickly determine whether a batch has been fully validated and accepted for further processing by the green check or Red X columns for 999 and 277 on the Batch Lists and Edits Screen.

Should you have any questions, please open a task ticket or contact a Partner Service Coordinator at 301-652-9500 for assistance.

Thank you for reading, and thank you for your Partnership!

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Mission: Improve the quality of care and lives in Behavioral Health
for clients, families, providers and management.

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