

Invega Sustenna Billing Webinar

Attendees

- CBHC – Brian Turner
- ACS – John Padilla, Claims Operations Supervisor
- CMHCs
 - Axis Health Systems (Southwest)
 - Mental Health Center of Denver
 - Community Reach Center
 - Aurora Mental Health Center
 - North Range Behavioral Health
 - Spanish Peaks Mental Health Center
 - Mental Health Center Serving Boulder and Broomfield Counties

Webinar Content and Questions Answered by John Padilla , ACS

1. Training on what exactly to put on a claim from a CMHC for Invega Sustenna reimbursement and documentation needed
 - a. There is no space for NDC on CO Medicaid CMS 1500 form. Put NDC information in “Remarks Section”
 - b. All claims must be submitted on paper
 - c. Highlight or underline specific Invega Sustenna information on each invoice
2. Correction of past and current coding errors
 - a. John stated that errors have been corrected. Biggest issue now is pricing.
 - b. CMHCs should not receive denials if the CMHC adds 10% to their invoice and submits the total cost (invoice cost + 10%) on the CO Medicaid CMS 150 Billing Form. CMHC will only receive the Invoice Cost + 10% for each Invega Sustenna Claim
3. Confirmation of price to bill on form and the price paid for Invega Sustenna
 - a. CMHC should include Unit price, that should match up with invoice cost
 - b. Pharmacies submitting claims should utilize AWP price
4. Process to appeal if reimbursement is not correct (i.e. 10% not added)
 - a. John Padilla will be the point person for CMHCs to contact (CBHC will send out e-mail and phone number contact to CBHC members)
 - i. Ensure CMHCs include Provider #, Client ID, Date Service Provided, Transaction Control Numbers (TCN) when appealing claims

5. Process to send and receive claims at ACS (due to issues of not receiving mailed claims)?
 - a. Send claims manually directly to ACS @ P.O. Box 30, Denver, CO 80201
 - b. If having issues, send claims directly to John Padilla.

6. Confirmation of average time for approval, timeframe for resubmission and appeals
 - a. Paper claims have to be keyed in to system once received @ ACS within 5-days
 - b. Once posted, then agents required to price and turn around within 2-weeks
 - c. If beyond 2-weeks, CMHCs can contact John Padilla directly @ ACS

7. Point person to email and/or call for questions, corrections, problems with claims for follow up
 - a. John Padilla @ ACS

8. Discussion on what type of Medicaid/ACS training internal processors have had and will receive so there is consistency with approvals/denials in the state.
 - a. Person in ACS has been briefed and is well versed on Invega Sustenna pricing and reimbursement process

9. Risperdal Consta confirmation of rate change and current rate being paid by Medicaid
 - a. Risperdal Consta claims will need to include NDC codes when submitting electronically
 - b. Consta J2794 – John Padilla will check on a possible recent rate change and follow-up with Stephanie Cannon @ MHCD.
 - c. John Padilla will search for bulletin or correspondence listing rate changes and send information to Brian Turner & Doyle Forrestal at CBHC for distribution to CMHC CFOs.

10. Time frame for claims for Invega Sustenna to be submitted electronically
 - a. Invega Sustenna should receive their permanent J Code by January 2011 and claims should be able to be submitted electronically at that time

11. CBHC has recorded this training conference call and its notes and recorded audio for CMHCs available online
 - a. Will be available on the CBHC website at www.cbhc.org (click on Library Section, then click on CBHC Webinars)