



# ValueAdded







This is the 95th issue of our VBH-PA information update. These updates will be faxed, emailed or sent by mail to all network providers monthly. Please feel free to share our newsletter with others, and be sure your appropriate clinical and financial staffs receive copies.

Volume 9, Issue 3

March 2007

**An information update from Value Behavioral Health of PA, Inc.**

### *In this Issue:*

-  Deficit Reduction Act
-  ProviderConnect
-  Customer Service Corner
-  Helpful NPI Info from DPW
-  Claims Corner
-  OMR Name Change

Suggestions or ideas for articles that you would like to see published in *ValueAdded* can be faxed to Kim Tzoulis, *ValueAdded* editor, at (724) 744-6363 or emailed to [Kimberly.Tzoulis@ValueOptions.com](mailto:Kimberly.Tzoulis@ValueOptions.com)

Articles of general importance to the provider network will be considered for publication.

## Deficit Reduction Act

The Deficit Reduction Act of 2005 (PL109-171) became effective on January 1, 2007, and requires health care organizations, such as ValueOptions, receiving five million dollars or more in annual Medicaid reimbursement to educate employees, contractors, and agents about fraud and abuse, false claims, and whistleblower protection laws and regulations.

ValueOptions had developed information regarding the Deficit Reduction Act and has posted this information on the VBH-PA website ([www.vbh-pa.com](http://www.vbh-pa.com)) on the provider information page as follows:

### **Provider Relations**

#### [Deficit Reduction Act](#)

Please visit the following links to learn more about how the Deficit Reduction Act may affect your business:

[Agent and Vendor Compliance Program Notification](#)

[Deficit Reduction Act](#)

[False Claims](#)

[Fraud and Abuse Training](#)

Web sites:

<http://www.cms.hhs.gov/FraudAbuseforProfs/>

<http://www.cms.hhs.gov/MCAIDFraudAbuseGenInfo/>

---

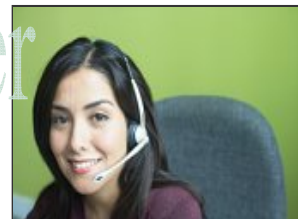
## ProviderConnect, Are You Connected?

Within the next few weeks, ValueOptions' national provider relations office will be sending correspondence to all providers regarding the implementation of **ProviderConnect** for requesting services. VBH-PA providers will not have the ability to use this enhancement to **ProviderConnect** until the middle to end of May. Please continue to request services in the current format as you do now. More information will be coming in future editions of *ValueAdded* that will outline our implementation of this **ProviderConnect** system enhancement.

Please contact Jim Kuemmerle at [jim.kuemmerle@valueoptions.com](mailto:jim.kuemmerle@valueoptions.com) with any questions or concerns.

# Customer Service Corner

## Customer Service Corner



### ProviderConnect Tabs

The customer service department would like to thank those providers using ProviderConnect. Over the past few months, we have noticed that some providers are not using this application to its full potential. Here are a few hints to keep in mind when navigating ProviderConnect.

#### Claim Summary and Service Line Detail – 2 Tabs

- The **CLAIM SUMMARY TAB** will show a SERVICE LINE which includes the procedure code, date of service and charge amount.
- The **SERVICE LINE DETAIL TAB** will show the date(s) of service, procedure code, units, charge amount, diagnosis code, paid amount, status, allowed amount, paid date, check number, and explanation of payment code. If the claim is denied, it explains the denial.

#### Authorization Search Results – 3 Tabs

This screen provides a hyperlink for viewing an authorization. The authorization number is underscored and in blue. Clicking on this will take you to a screen that has three tabs.

- The **AUTH SUMMARY TAB** lists the member ID, authorization number, and status.
- The **AUTH DETAILS TAB** lists the service class description, dates of service, visits requested or approved, visits actually used (as of today), and status.
- The **ASSOCIATED CLAIMS TAB** will show all of the claims PAID from this authorization. This will not show any claims that denied.

If you are not currently enrolled, please sign up today. Please visit our website at [www.valueoptions.com](http://www.valueoptions.com) under the provider tab for **ProviderConnect Registration**. Registration is immediate using the website. You will have access to view our system information immediately. Using this application will save you and your organization time in resolving eligibility, authorization, and claims issues.

## VBH-PA's New Phone System



VBH-PA is happy to announce the implementation of our new telephone system, AVAYA, which went live November 11, 2006. Your calls can now be handled more efficiently by choosing the correct menu option. Please listen carefully to the options presented when dialing our provider telephone line (**1-877-615-8503**). Choosing the correct option will direct your call to the appropriate department that can quickly answer your questions.

**Option #1 - Extension numbers.** Choose this if you have the extension number of the person you wish to speak with. Please note that all existing extension numbers now must have a 34 preceding them. For example: to reach extension 1234, you must now dial **341234**.

**Option #2 - Claims.** This option is only for questions regarding claims such as statuses, requesting an adjustment, understanding a denial reason, or reviewing a claim with a Member & Provider Services Representative. This information can also be accessed on **ProviderConnect** at [www.vbh-pa.com](http://www.vbh-pa.com).

**Option #3 – Outpatient Authorizations.** This is for questions regarding authorizations or verifying if an authorization is entered with a Member & Provider Services Representative. This information can also be accessed on **ProviderConnect** at [www.vbh-pa.com](http://www.vbh-pa.com).

**Option #4 – Inpatient Authorizations.** This is for pre-certifying inpatient admissions through our clinical department.

If none of the above applies to your call, please stay on the line and the next available Member & Provider Services Representative will assist you with your call.

---

## Helpful NPI Information from DPW



As a result of the Health Insurance Portability and Accountability Act (HIPAA) of 1996, the federal Department of Health and Human Services mandated the use of the National Provider Identifier (NPI), which is a standard unique identifier for health care providers. The website link below will take you to a page that provides information and tools to keep providers informed throughout the Pennsylvania Department of Public Welfare's implementation of NPI. You can also look for updates and additional resources on this page, in Provider Quick Tips, Medical Assistance Bulletins and Remittance Advice Banner Pages.

<http://www.dpw.state.pa.us/Business/NPIinfo/>

# Claims Corner Claims Corner



## Are you looking for payment from a claim?

Since April of 2002, VBH-PA has used following addresses for claims submissions:

Initial paper claim submissions must be mailed to:

**VBH-PA HealthChoices Program  
516 Pleasant Valley Road  
Trafford, PA 15085**

Corrected claims, claim adjustment requests, and all other claims inquiries must be mailed to:

**VBH-PA HealthChoices Program  
520 Pleasant Valley Road  
Trafford, PA 15085**

All corrected claims and adjustment requests must include a notation describing what is changed from the original claim submission. Corrected claims and adjustment requests must be received within 90 days of the voucher date regardless of the error.

Initial claims must be received within 90 days of the date of service, date of discharge, or date of the explanation of benefits.

VBH-PA has routinely received claims being submitted to the incorrect address. This is causing a delay with payment or resulting in a denial for a duplicate claim previously submitted. Please allow 30 days for processing an initial claim submission and 30 – 45 business days for adjustment requests.

---

## OMR Name Change Reflects New Capacity

There is a strong indication that the **Office Of Mental Retardation (OMR)** will be reorganized and renamed to reflect the change in philosophy to serving additional persons with developmental disabilities. With the 2006 creation of the Autism Affairs program in the Department of Public Welfare, it has become the goal of Secretary Richman to expand funding and supports for other disabilities the state had not previously served. By changing to an **Office for Developmental Disabilities**, emphasis will be placed on adding autism and other developmental disabilities beyond mental retardation.

More information is available at:  
[www.dpw.state.pa.us/Disable/AutismAffairs](http://www.dpw.state.pa.us/Disable/AutismAffairs)

**Value Behavioral  
Health of PA, Inc.  
520 Pleasant Valley Rd  
Trafford, PA 15085**

**Phone:  
(877) 615-8503**

**Fax:  
(724) 744-6363**

**Past issues of  
ValueAdded can be  
accessed at:  
[http://www.vbh-  
pa.com/provider/prv\\_info  
rmatoin.htm](http://www.vbh-pa.com/provider/prv_info_rmatoin.htm)**