

Date & Start Time: 09/28/07 10:00 am
Meeting Purpose: Providers Advisory Group Meeting
Teleconference Dial-in Number: N/A

End Time: 12:00
Meeting Location: OMS – CR 1B
Passcode/ID: N/A

		<ul style="list-style-type: none"> ➤ Fund Allocation Failures were at 11,330. ➤ Edits Processing Failures were at 24,253. • CMS Payment Error Rate Measurement (PERM) Audit. Robin reviewed a new process that CMS will implement FFY 2008. Starting with 2006, CMS is auditing State Medicaid and SCHIP programs to determine accuracy from eligibility determinations through to claims payment. Audits will be performed by The Lewin Group who will sample claims and request medical documentation from providers. Providers will have 30 – 60 days to respond to this audit request. If the provider does not submit the medical records timely the claim will be denied for lack of documentation. Key dates for PERM are as follows; <ul style="list-style-type: none"> ➤ 10/05/07 – CMS approval of State Sampling Plans ➤ 11/15/07 – Eligibility Determination Reviews begins ➤ 04/15/08* – Claims data provided to Lewin Group for Payment Review <p>*Estimated date based on Maine Sampling Plans pending approval</p>	
5	Interim Payment Recovery	<ul style="list-style-type: none"> • As of 09/14/07 interim payments made to providers were \$527.9 million. • Total of \$398.8 million had been recovered; \$386.9 million in recovery plus \$11.9 million in claims hold. • An additional \$40.3 million is in a recovery plan. • On October 1, 2007 the hold of claims for interim payment recovery will move to include all claims with service dates prior to July 1, 2007. <p>Norman Curtis provided an update to say that he has received a directive to collect interim payments back before 12/31. Interim Payment Recovery staff is in the process of contacting providers with multiple year pay back plans to try and negotiate an accelerated plan. They are currently working one on one with providers who have large discrepancies with regards to claims. Norman's staff is also working closely with Claims and the Audit Departments. The staff is trying to map out the next steps on providers who are not cooperating and refuse to work with OMS. The Team is also looking at options for releasing claims on an ongoing basis versus when balances are satisfied. Norman will keep this group posted in the next several weeks / months.</p>	
6	MeCMS Repair Initiatives and Patches	<ul style="list-style-type: none"> • VOID Functionality – October is the expected implementation timeframe. • Comprehensive Waiver/Section 21 date has been changed to the end of December while the Support Waiver/Section 29 implementation date is under evaluation. • Modifier and Other Repairs set for January 2008. This includes edits processing failure, cost of care, co-pay, & modifiers. • Adjustments schedule has been moved to March 2008. • Limits are scheduled for June 2008. • Behavioral Healthcare ASO - TBD • Radiology PA's –Proposals are under review. The State has received 2 bids. Mid-November will be the earliest timeframe for choosing a vendor. • Code sets update – 10/29 • Patches for 10/1 were reviewed 	
7	Fiscal Agent Activity	<p>Procurement schedule approved by CMS</p> <ul style="list-style-type: none"> • Phase 1 vendor site visits are complete: 	

Meeting Notes

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		<table border="1"> <tr> <td>Week of August 20</td> <td>First Health</td> <td>Virginia</td> </tr> <tr> <td>Week of September 3</td> <td>EDS</td> <td>Kentucky</td> </tr> <tr> <td>Week of September 10</td> <td>Unisys</td> <td>West Virginia</td> </tr> <tr> <td>Week of September 17</td> <td>ACS</td> <td>Mississippi</td> </tr> </table> <ul style="list-style-type: none"> Phase II will be a more detailed evaluation of vendor finalist. Phase III will include selection of a vendor, contract negotiations and CMS approval. Vendor selection scheduled to occur by January 2008. Phase IV is implementation. Implementation of new claims processing system by January 2010. 	Week of August 20	First Health	Virginia	Week of September 3	EDS	Kentucky	Week of September 10	Unisys	West Virginia	Week of September 17	ACS	Mississippi	
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8	Other Items Discussed	<ul style="list-style-type: none"> The Health & Human Services Committee would like us to identify a spokesperson from PAG and TAG who would be willing to bring ideas to the committee. The group discussed ideas for topics and will plan a presentation. John Bertl, Mary Lou Dyer, & Jeff Hadley will get together to define. The group discussed pink and green forms as part of the voids topic. They would like regular updates as to where OMS stands date wise once void functionality is operational. The group had a question about CDR. This is a company that was contracted by the State to work with providers and identify overpayments due to third party liability insurances. Patricia to follow up with Rossi Rowe and report back to this group. 	6												
9	Next Scheduled Meetings	<ul style="list-style-type: none"> Thursday, October 11th PAG Meeting from 10:00 – 12:00 Combined PAG/TAG on Thursday, October 25 from 10:00 – 12:00 													

Date Added	Action #	Assignee	Action	Notes
07/22/07	1	Brian Erdahl	Advantage ME Impact of missing provider ID on EFT's.	
09/28/07	2	Patricia Negron	Send out information with regards to Audit Dept. cost settlements.	
09/28/07	3	Patricia Negron	Send communication out on New & Restored Non-Categorical Services.	
09/28/07	4	Dawn Gallagher	Question about services being rendered and covered for non-categorical waiver prior to October 8 th .	
09/28/07	5	Patricia Negron	Clarification needed for patch "claim header does not post error".	
09/28/07	6	Patricia Negron	Follow up with Rossi Rowe with regards to CDR.	