

## **Provider Newsbrief – April 19, 2021**

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### **Pre-adjudication claims edits, ROPA registration tips**

#### **Pre-adjudication edits needed to process claims in a timely manner**

Have you received a claim denial or a claim recoupment for any of the following?

- NPI not registered with AHCCCS on the Date of Service – Edit P378
- Provider not active on the Date of Service – Edit P281
- Provider type not eligible – Edit 353
- Provider not eligible for Category of Service – Edit 330

BUHP and other AHCCCS Health Plans are required to follow AHCCCS guidelines in Claims processing and procedure. BUHP has identified 4 common processing errors that result in payments that later result in a recoupment. Payments followed by recoupments result in additional work for your billing and office staff as well as to BUHP.

BUHP is going to implement a change that will alert providers when these Edits occur. However, the notification will be made before a claim is paid. BUHP is working to ensure that providers can be notified immediately through your Clearinghouse with a 277 “Pre-Adjudication Rejection File” if submitting claims electronically. Claims submitted on paper will be denied as well.

This change is coming on June 1, 2021.

BUHP has created tips to assist in reducing denials. During the AHCCCS registration process providers are assigned category of service and provider type, based on the licensing submitted by the provider. Furthermore, AHCCCS mandates that prior to payment of claims, Health Plans ensure providers have an NPI registered with AHCCCS on the date of service and that the billing provider be active on the date of service.

As provider groups grow and/or change, licensing may change. Licensing changes must be submitted to AHCCCS to ensure the causes for the Encounter Edits are corrected prior to providing services. When not updated timely or if there is a lapse in registration, claims payments are impacted. For providers that have been impacted, AHCCCS may grant retrospective approval. Contact AHCCCS if you need to:

- determine if AHCCCS has your current provider registration and NPI
- determine if AHCCCS has the correct COS registration for services billed by provider(s)

- determine if provider type is eligible to bill
- ask questions about other information that can affect billing practices

Please contact AHCCCS via the contact information below.

### **Provider Enrollment**

In Maricopa County: 602-417-7670 and select option 5

Outside Maricopa County: 1-800-794-6862

Out-of-State: 1-800-523-0231

Call Center Hours: Mon.-Fri., 8 a.m.-12 p.m. and 1 p.m. - 4 p.m.

### **AHCCCS Registration TIPS for Providers**

The Patient Protection and Affordable Care Act (ACA) and the 21st Century Cures Act (Cures) require that all health care providers who provide services to, order (refer), prescribe, or certify health care services for AHCCCS members must be enrolled as an AHCCCS provider.

Prior to these Acts being passed, referring, ordering, prescribing and attending (ROPA) providers were required to obtain a National Provider Identifiers (NPI's) but were not required to be enrolled as an AHCCCS provider. **This has now changed!**

After June 1, 2021, claims that include ROPA providers who are not enrolled with AHCCCS will not be reimbursed. This means that claims will be denied if ROPA providers are not enrolled with AHCCCS.

All ROPA providers who are currently submitting claims are strongly encouraged to register as an AHCCCS provider **as soon as possible**.

In addition, service providers whose claims include ROPA providers who are not registered with AHCCCS should work with these providers to complete their registration.

To ensure payment of claims when submitting for items and/or services attended, ordered, referred, or prescribed by another provider, the rendering provider must ensure that the ordering/referring/prescribing provider is actively registered with AHCCCS.

A provider who chooses to attend, order, refer, or prescribe items and/or services for AHCCCS members, but does not to submit claims to AHCCCS directly, **must still be registered** with AHCCCS to ensure payment of those items and/or services where he attended, ordered, referred or prescribed.

### **Examples of Claims that will be denied in the future based on ROPA:**

- A Non-registered provider prescribes a medication. The non-registered provider and the pharmacy will not be reimbursed.
- A registered provider refers a member to a non-registered (lab, PT, OT, etc.); the lab and/or therapy will not be reimbursed.
- A non-registered provider orders DME to a non-registered home health or medical equipment provider. Neither will be reimbursed for service or DME.

To facilitate communication as to these requirements and provide related guidance AHCCCS has developed and posted the FAQ's outlined below.

<https://www.azahcccs.gov/PlansProviders/NewProviders/ROPA.html>