



December 11, 2013

To: Nursing facilities

From: Dale Elder, Manager
Operations and Provider Services Section, DMAP

Subject: Fee-for-service reprocessing of some extended care claims scheduled for December 20, 2013

On December 20, 2013, the Division of Medical Assistance Programs (DMAP) plans to reprocess a small number of payments made from July 1, 2013, to October 22, 2013, for extended care services to Medicaid clients.

This activity will not change any payments already made to you. We are writing to you let you know why this activity is happening and how this will read on your paper remittance advice (RA) from DMAP.

Why is this happening?

Starting July 1, 2013, the Oregon Health Authority (OHA) pays for extended care services for Medicaid-eligible clients. We updated our system on October 22, 2013, to reflect this change.

To show OHA as the payer in our records, we now need to reprocess extended care claims that the Department of Human Services paid for between July 1, 2013, and October 22, 2013.

What should you do?

No action is required on your part.

What you will see on the paper remittance advice

The Claim Adjustments section will list the affected claims by original Internal Claim Number (ICN).

- Each ICN will have an adjustment ICN (beginning with "52") to indicate reprocessing activity.
- The "Detail EOBs" will list Explanation of Benefits (EOB) code *EOB 0082 - Disregard this adjustment which was processed to correct our records only, no action is required on your part.*

What you will see on the electronic remittance advice (ERA) or Provider Web Portal

In both the ERA and Provider Web Portal, the reason for the reprocessing will be *Adjustment Reason Code 223 - Adjustment code for mandated federal, state or local law/regulation that is not already covered by another code and is mandated before a new code can be created.*

Questions?

Please contact the Provider Services Unit at dmap.providerservices@state.or.us or call 1-800-336-6016, Monday through Thursday, 8:30 a.m. to 4:00 p.m. and Friday 10 a.m. to 4:00 p.m. (phone lines closed 11:30 a.m. to 12:30 p.m. daily).

Thank you for your continued support of the Oregon Health Plan and the services you provide to Oregon's most vulnerable people.

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