

## December 2007 Remittance Advice Notices

**RA Message for Provider Types 86 and 87**  
**12/19/2007**

**DIRECT BILL NOTES: NPI IMPLEMENTATION UPDATE:**

AS PREVIOUS COMMUNICATIONS HAVE INDICATED, ODJFS HAS EXTENDED THE DUAL IDENTIFIER PERIOD TO MAY 22, 2008. THEREFORE, THIS MESSAGE IS TO INFORM YOU TO CONTINUE TO SUBMIT YOUR NPI AND MEDICAID LEGACY NUMBER USING THE 1D QUALIFIER IN 837I. OTHERWISE YOUR CLAIMS WILL DENY. PLEASE SHARE THIS MESSAGE WITH YOUR SYSTEMS STAFF, SOFTWARE VENDOR OR TRADING PARTNER. A LETTER WITH ADDITIONAL INFORMATION WILL FOLLOW.

FOR DIRECT BILL: PLEASE CALL MIS-EDI SUPPORT (614.387.1212) FOR TECHNICAL QUESTIONS, THE IVR (1.800.686.1516) FOR PAYMENT/CLAIMS STATUS OR THE DIRECT BILL UNIT AT 614.466.9088 REGARDING THIS MESSAGE.

**RA to All Provider Types**  
**12/19/2007**

**GATEWAY MEMBERS CHANGE JANUARY 1, 2008**

EFFECTIVE JANUARY 1, 2008, GATEWAY WILL NO LONGER SERVE MEDICAID CONSUMERS IN MAHONING AND TRUMBULL COUNTIES. ALL GATEWAY MEMBERS WILL RETURN TO MEDICAID FEE-FOR-SERVICE (FFS) FOR A PERIOD OF TIME. MEMBERS WILL RECEIVE A MEDICAID (FFS) CARD ON OR BEFORE JANUARY 1, 2008 AND WILL RECEIVE MEDICAID SERVICES THROUGH THE FFS DELIVERY SYSTEM BEGINNING IN JANUARY. SERVICES THAT REQUIRE FFS PRIOR AUTHORIZATION (PA) WILL NEED TO BE SUBMITTED TO THE PA UNIT AT ODJFS. THE MANAGED CARE PLANS AUTHORIZATION DOES NOT SUFFICE FOR FFS PAYMENT. CLAIMS FOR SERVICES RECEIVED PRIOR TO JANUARY 1, 2008 SHOULD BE SUBMITTED TO GATEWAY. CLAIMS FOR SERVICES AFTER THIS DATE SHOULD BE SUBMITTED TO ODJFS. THE NORTHEAST CENTRAL REGION (COMPRISED OF COLUMBIANA, MAHONING, AND TRUMBULL COUNTIES) WILL BECOME A MANDATORY MEDICAID MANAGED CARE REGION IN THE UPCOMING MONTHS AND INFORMATION WILL BE SENT TO PROVIDERS TO ANNOUNCE THE EXPANSION OF MEDICAID MANAGED CARE IN THIS REGION.

**PA notice for provider type 70**  
**12/26/2007**

FOR MORE INFORMATION ABOUT THE PHARMACY PROGRAM VISIT THE WEBSITE <http://JFS.OHIO.GOV/OHP/BHPP/MEDDRUG.STM> OR FOR DRUG SPECIFIC INFO SEE <http://MEDLIST.OHIO.GOV>

CLAIMS THAT WERE PROCESSED BY PHARMACIES FOR OHIO MEDICAID THROUGH ACS ON 5/21/07 WERE RUN THROUGH THE ODJFS PAYMENT SYSTEM TWICE AND PAID TWICE. THE DUPLICATE PAYMENTS WERE INCLUDED IN THE PAYMENTS THAT WENT OUT ON 6/13/07. THE DUPLICATE PAYMENTS WILL BE TAKEN BACK. THIS WILL SHOW ON THE PAYMENTS SENT 12/26/07. BEGINNING WITH THE PAYMENTS SCHEDULED FOR 1/02/08, ALL PAYMENTS SHOULD BE BACK TO NORMAL. QUESTIONS ABOUT REMITTANCE ADVICES AND PAYMENTS MAY BE DIRECTED TO ODJFS PROVIDER NETWORK MANAGEMENT AT 1-800-686-1516. REPRESENTATIVES ARE AVAILABLE MONDAY THROUGH FRIDAY, 8 AM TO 4:30 PM.