Wyoming Department of Health

Benefits Management Services – CMS 1500

Medical Providers

Introductory Training: Medicaid Website, Portals, Claims, TPL

Course Content

- Introducing CNSI
- Moving Forward with WINGS
- Scope of Fiscal Agent
- BMS Operations Team
- New Wyoming Medicaid website (not secure – publicly accessible)
- New Provider Portal (secure portal)
- CMS 1500 Claims – Demo of BMS system
- TPL Disallowance Portal
- Questions & Answers

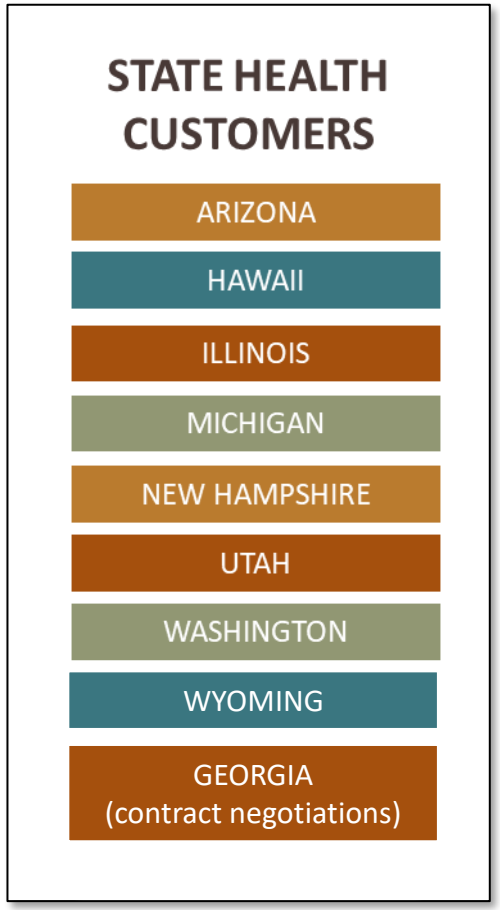
© 2021 CNSI

CNSI – Wyoming Medicaid's New Fiscal Agent

CNSI is …

- A trusted partner working to improve the lives of millions of Americans through transformative technology that empowers and advances healthcare outcomes
- In locations across the United States and in India with corporate offices in Virginia and Maryland
- Experienced across large-scale, complex State and Federal implementations
- Focused on Public Sector in order to be an advocate for better health and better care

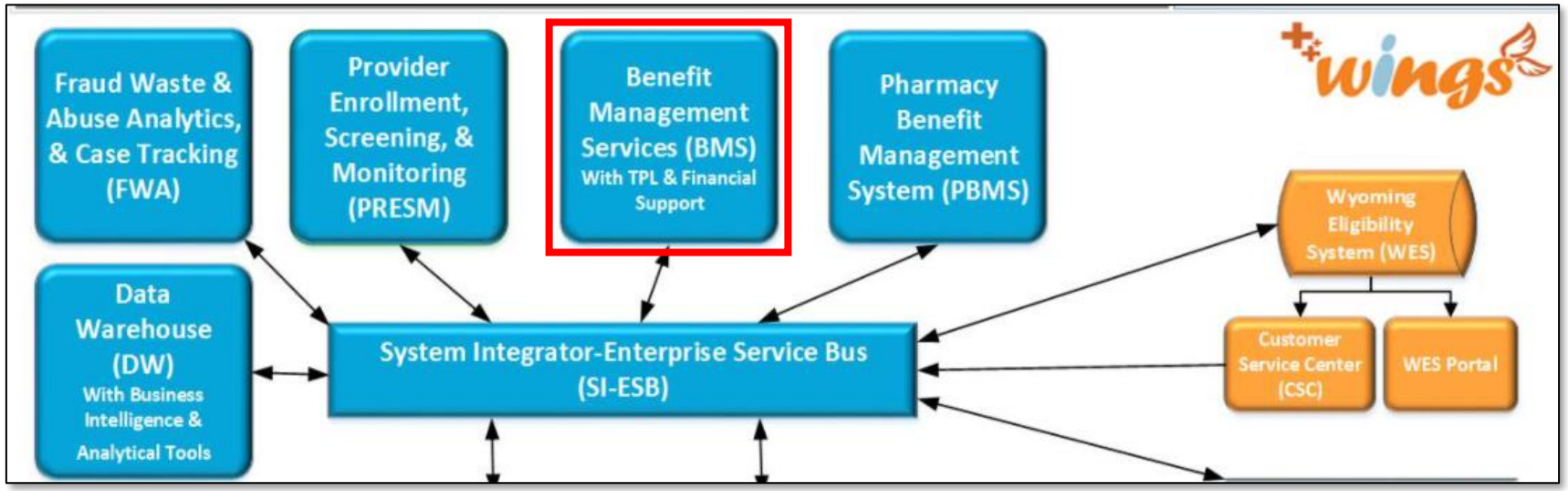
CNSI assumes operations for Benefits Management Services (BMS) in late 2021



© 2021 CNSI

Wyoming Medicaid – Moving Forward with WINGS

- Wyoming Integrated Next Generation System (WINGS) to replace Wyoming Medicaid Management Information System (MMIS)
  https://health.wyo.gov/healthcarefin/wyoming-integrated-next-generation-system-wings-project/
- New structure involves multiple modules versus operations maintained all within one entity
- Primaries: CNSI (BMS), HHS Technology (Provider Enrollment), Change Healthcare (Pharmacy)
- Module structure streamlines and enhances overall integrated approach to claims processing



© 2021 CNSI

Wyoming Medicaid – Fiscal Agent Roles and Goals

CNSI Roles

- Business Operations
- Claims Processing
- Financial Services
- Provider Services Call Center
- Provider Outreach and Training
- Provider Publications and Communications
- Support Services
- Third Party Liability

BMS Goals

- Improve quality of care
- Reduce administrative burden
- Adapt to rapid changes
- Centralize data
- Increase efficiencies

© 2021 CNSI

Wyoming Medicaid – BMS Operations Team

Benefits Management Services (BMS) Team includes the following key operational staff:

Program Director	Randy Boltz
Provider Services and Call Center Manager	Tracy Fulton
Claims, Grievances & Appeals Manager	Kelly Miller
HMS, TPL Operations Manager	Jeremy Wilch
Field Representatives Each Field Representative is positioned strategically in quadrants across the state of Wyoming	Northwest – Cindy Izadi South – Colleen Fulmer South – Mary Tearpak Northeast – Eric Reyna
Call Center Supervisors	Medical – Mikayla Saxon Institutional – Veronica Johnson Dental – Erika Cody
Call Center Representatives	
Publications and Communications	Jerry Lawson

Provider Enrollment and Pharmacy responsibilities align to HHS Technology and Change Healthcare

© 2021 CNSI

About HMS

Founded

1974

HQ

Irving, Texas

TPL Operations Manager located in Cheyenne

Customers

- 350+ health plans
- 40+ state Medicaid programs
- 160+ employers
- HMS is committed to supporting users through online tools and dedicated customer service agents

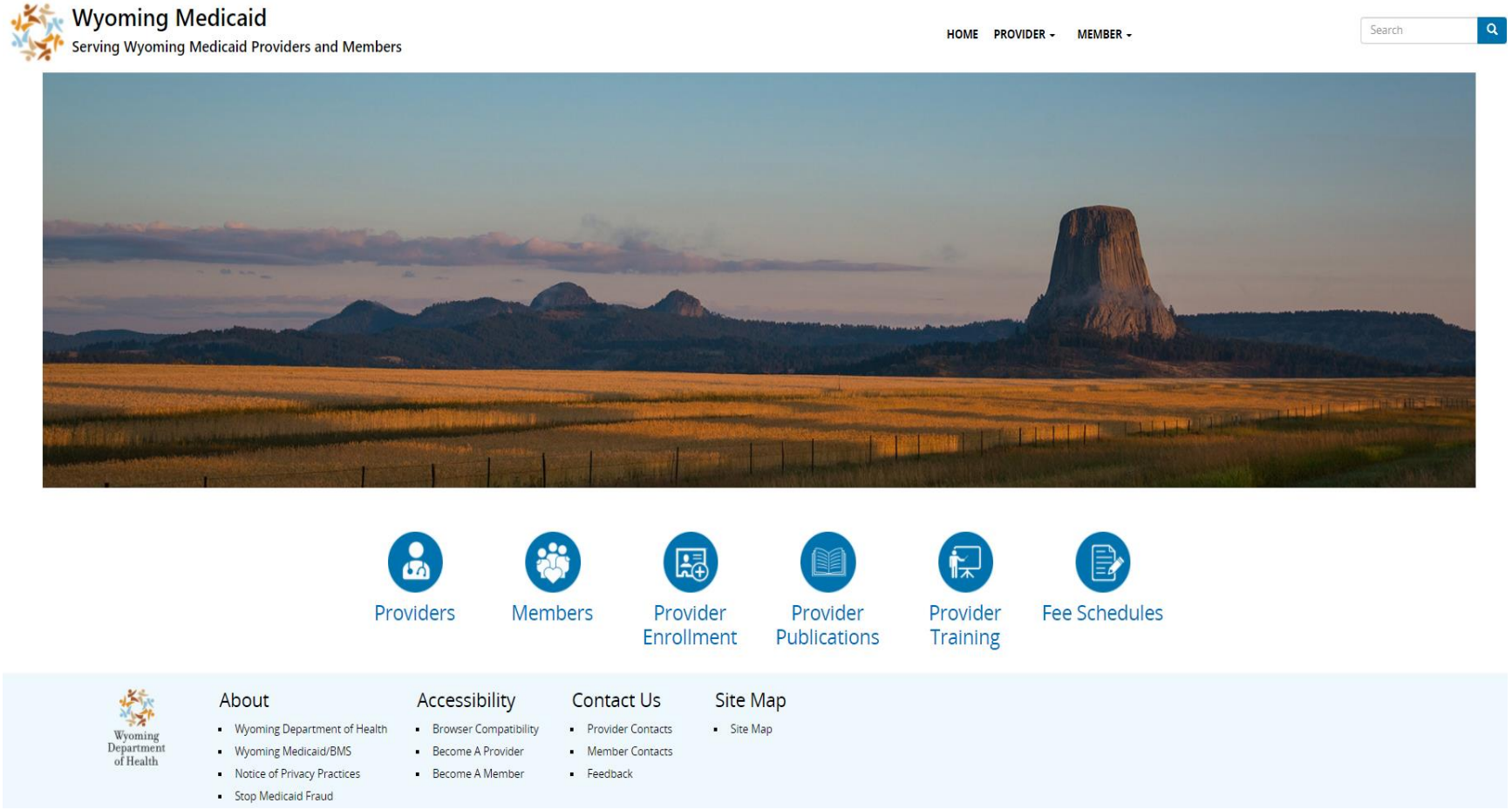
HMS is providing Third Party Liability (TPL) services for Wyoming Medicaid. Our role is to facilitate recoveries for Medicaid. HMS is performing Billing, Disallowance, Cost Avoidance, Subrogation, and Credit Balance Audit services.

New Wyoming Medicaid Website

URL: www.wyomingmedicaid.com

Wyoming Medicaid Website – Home Page

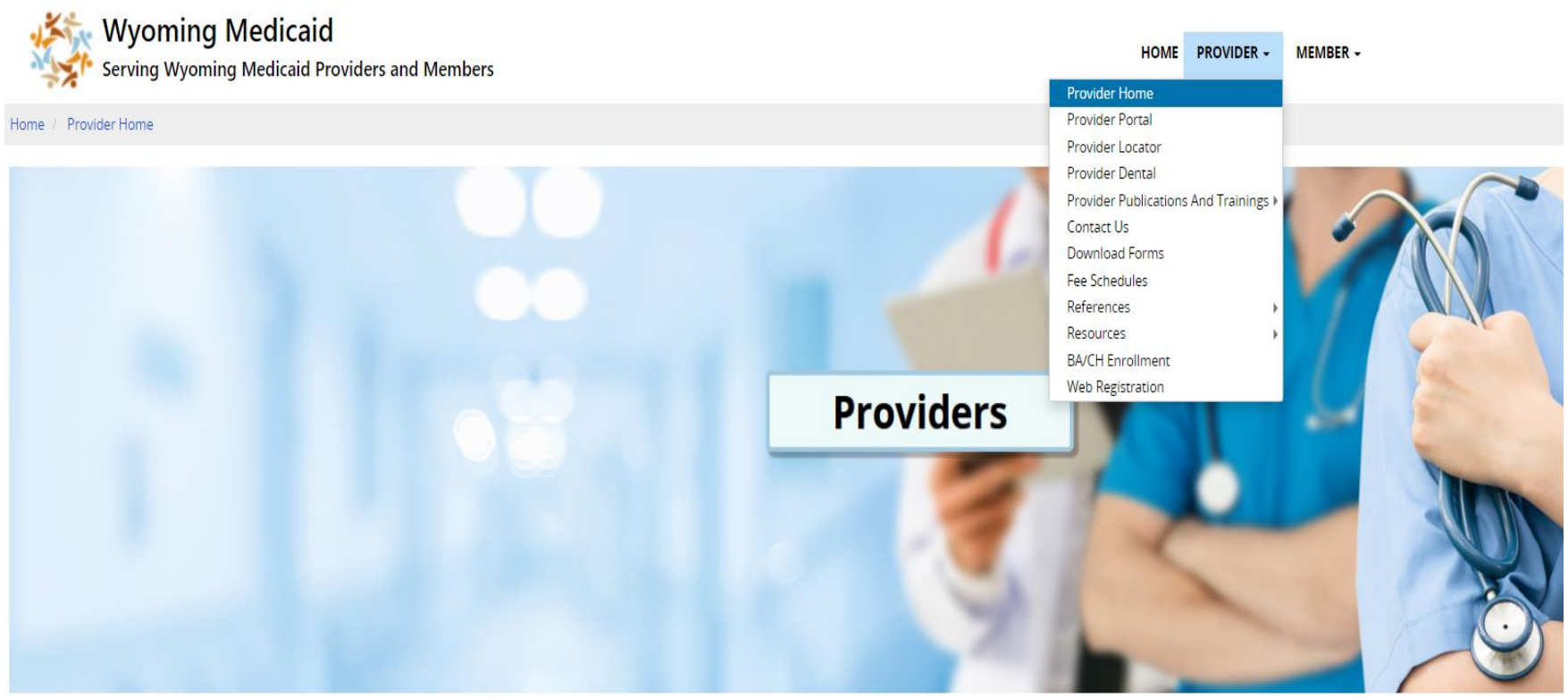
- Publicly Accessible
- Primary Tabs (3 Total)
- Search Bar
- Quick Access Icons (6 total)
- Redesigned Footer
- New Website URL: www.wyomingmedicaid.com



© 2021 CNSI

Wyoming Medicaid Website – Provider Home

- Provider tab offers 12 primary options
- Arrows ▶ signal additional sub-listings via responsive drop-down lists
- Provider Portal is the provider's secure site for transactions



© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
Change Healthcare	Tel (877) 209-1264 (Pharmacy Help Desk) Tel (877) 207-1126 (PA Help Desk)	http://www.wymedicaid.org/	• Pharmacy prior authorizations (PA) • PAs for physician administered injections • Pharmacy manuals • FAQs
Claims Department Wyoming Department of Health PO Box 547 Cheyenne, WY82003-0547	Fax (307) 460-7408	www.wyomingmedicaid.com	• Claim adjustment submissions • Hardcopy claims submissions • Returning Medicaid checks
Communicable Treatment Disease Program Email: CDU.treatment@wyo.gov	Tel (307) 777-5800 Fax (307) 777-7382 For Pharmacy Coverage Contact: ScriptGuideRX Tel (855) 357-7479	N/A	• Prescription medications • Program information

Customer Service Center (CSC),
Wyoming Department of Health
 	
3001 E. Pershing Blvd, Suite 125
Cheyenne, WY 82001
	Tel (855) 294-2127
	TTY/TDD (855) 329-5205
	
	(**Members Only**,
	CSC cannot speak to providers)
	
	7 am-6 pm MST M-F
	
	Fax (855) 329-5205
		https://www.wesystem.wyo.gov	• Member Medicaid applications
			• Travel Assistance
			• Member ID Card
			• Member Eligibility questions regarding these programs:
			  ○ Family and Children's
			  ○ Tuberculosis Assistance
			  ○ Medicare Savings
			  ○ EID

Division of Healthcare Financing (DHCF) 122 West 25th St, 4th Floor West Cheyenne, WY 82002	Tel (307) 777-7531 Tel (866) 571-0944 Fax (307) 777-6964	https://health.wyo.gov/healthcarefin/	• Medicaid State Rules • State Policy and Procedures • Concerns/Issues with State Contractors/Vendors • Developmental Disability Services

- Change Healthcare processes PAs for physician administered injections – previously handled by Medical Policy
- CSC IVR is the main number and routes members to the applicable call centers

© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
DHCF Pharmacy Program 122 West 25th St, 4th Floor West Cheyenne, WY 82002	Tel (307) 777-7531 Fax (307) 777-6964	N/A	• General questions
DHCF Program Integrity 122 West 25th St, 4th Floor West Cheyenne, WY 82002	Tel (855) 846-2563 **NOTE:** Callers may remain anonymous	N/A	• Member or Provider Fraud, Waste and Abuse
HHS Technology Group (PRESM) Provider Enrollment Email: WYEnrollmentSvcs @HHSTechGroup.com	Tel (877) 399-0121 8 am-5 pm MST M-F (call center hours)	https://wyoming.dyp.cloud (Discover Your Provider)	• Provider Enrollment/Re-enrollment • Provider Updates • Email Maintenance
HMS (Health Management Services) Third Party Liability (TPL) Department 5615 High Point Drive, #100 Irving, Texas 75038	Provider Services Tel (888) 996-6223 7 am-6 pm MST M-F (call center hours) 24/7 IVR Availability **Note:** Within IVR, either say Report TPL, update insurance – to be transferred to TPL.		• Member accident covered by liability or casualty insurance, or legal liability is being pursued • Estate and Trust Recovery • Reporting Member TPL • New/Update Insurance Policy • Problems getting insurance information needed to bill • Problems regarding third party coverage or payers • WHIPP/EID Program • TPL Disallowance Portal

- HHS Technology Group is the new provider enrollment vendor
- HMS, TPL Department is accessible via Provider Services

© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
Maternal & Child Health (MCH)/ Children Special Health (CSH) Public Health Division 122 West 25th Street 3rd Floor West Cheyenne, WY 82002	Tel (307) 777-7941 Tel (800) 438-5795 Fax (307) 777-7215	N/A	• High Risk Maternal • Newborn intensive care • Program information
Medicare	Tel (800) 633-4227	N/A	• Medicare information
Magellan Healthcare, Inc.	Tel (307) 459-6162 8-5 pm MST M-F (855) 883-8740 After Hours	https://www.magellanofwyoming.com/	• Care Management Entity Services that require PA
Provider Services Wyoming Department of Health PO Box 1248 Cheyenne, WY 82003-1248 Email: Wyproviderservices@cns-Inc.com	Tel (888) WYO-MCAD or (888) 996-6223 7 am-6 pm MST M-F (call center hours) Fax (307) 460-7408 24/7 IVR Availability	www.wyomingmedicaid.com	• Bulletin/manual inquiries • Claim inquiries/submission problems • Member eligibility • Documentation of Medical Necessity • How to complete forms • Payment inquiries • Request Field Representative visit • Training seminar questions • Timely filing inquiries • Provider Portal assistance/training • WY Companion Guide • Trading Partner Registration • Technical support for vendors, billing agents/clearinghouses • Web Registration

- Provider Services has new hours and numbers
- Dental and EDI Services calls are handled within Provider Services

© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
Social Security Administration (SSA)	Tel (800) 772-1213	N/A	• Social Security benefits
Stop Medicaid Fraud	**NOTE:** Remain anonymous when reporting	https://health.wyo.gov/healthcarefin/program-integrity/	• Information, education, and to report fraud, waste, and abuse in the Wyoming Medicaid program

- Stop Medicaid Fraud website allows providers and members to report information anonymously

© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
WYhealth (Utilization and Care Management) PO Box 49 Cheyenne, WY 82003-0049	Tel (888) 545-1710 Nurse Line: (OPTION 2) **Fax PASRRs Only** (888) 245-1928 (Attn: PASRR Processing Specialist)	http://www.WYhealth.net/	• Diabetes Incentive Program • DMEPOS Covered Services manual • Educational Information about WYhealth Programs • ER Utilization Program • Medicaid Incentive Programs • PASRR Level II • Questions related to documentation or clinical criteria for DMEPOS Prior Authorization for: • Acute Psych • Binaural Hearing Aids • Dental Services (limited) • Severe Malocclusion • Durable Medical Equipment (DME) or Prosthetic/Orthotic Services (POS) • Extended Psych • Extraordinary heavy care • Gastric Bypass • Genetic Testing • Home Health • PRTF • PT/OT/ST/BH after threshold • Surgeries (limited) • Transplants • Vagus Nerve Stimulator • Vision services (limited) • Unlisted Procedures

- WYhealth processes PAs for dental and malocclusion services– previously handled by Medical Policy
- The PA Table is updated in the provider manuals

© 2021 CNSI

Wyoming Medicaid Website – Contact Us

Agency Name & Address	Telephone/Fax Numbers	Website URL	Contact Us for
Wyoming Department of Health Long Term Care Unit (LTC)	Tel (855) 203-2936 8-5 pm MST M-F Fax (307) 777-8399	N/A	• Nursing home program eligibility questions • Patient Contribution • Waiver Programs • Inpatient Hospital • Hospice
Wyoming Medicaid Website	N/A	www.wyomingmedicaid.com	• Provider manuals/Bulletins • Wyoming Medicaid EDI Companion Guide • Fee schedules • Frequently Asked Questions (FAQs) • Forms (e.g., Claim Adjustment/Void Request Form) • Contacts • What's new • Remittance Advice Retrieval • Trading Partner Registration • Secured Provider Portal • Training Tutorials • Web Registration

- This contact information is updated in the Quick Reference Guide within the provider manuals
- New Medicaid website address

© 2021 CNSI

Wyoming Medicaid Website – IVR

- Interactive Voice Response (IVR) phone number for Provider Services is 1.888.WYO.MCAD or (888)996-6223 (effective at Go Live)
  - Speech recognition built in
    - > Easier for providers to reach the Call Center to check claims history
  - Clients are now termed “Members”, but IVR recognizes both terms
  - Provider Authentication process, slightly modified whereby Provider Data immediately populates
    - > NPI plus Taxonomy, if it finds Provider ID, then authentication complete
      - – If no Provider ID is found, then ZIP code plus 4-digit extension is required
  - Verify Eligibility, Check Claims Status, and Payment Information

© 2021 CNSI

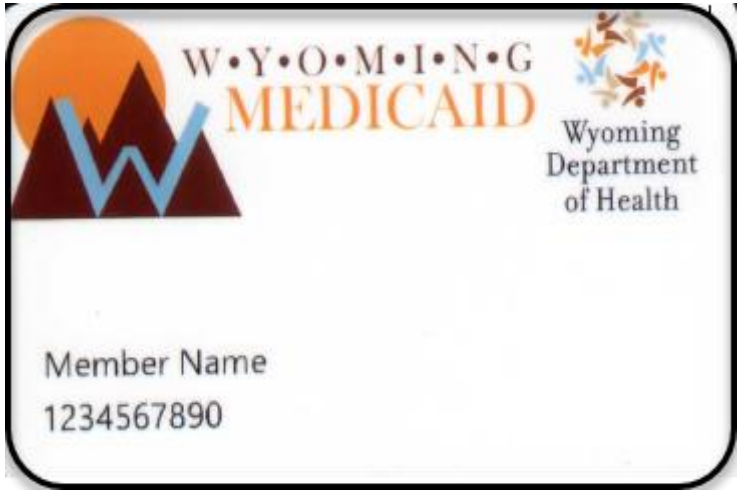
Wyoming Medicaid Website – IVR

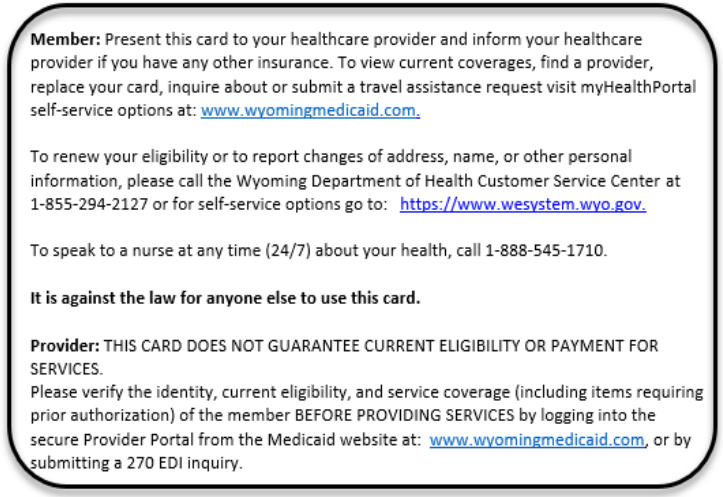
- Benefit Plans
  - State of Wyoming has consolidated plans to 35
  - Several separate adult plans (such as MCAD, ADSS, and EID) are now one new ADULT plan
  - Changed ALEN plan to EMERGENCY plan
  - MATR plan changed to PREGNANT plan
  - An updated ‘Provider Medicaid and State Healthcare Benefit Plan’ job aid is posted to the website

© 2021 CNSI

Wyoming Medicaid Website – New Member ID Card

- Members are issued a new Medicaid/Kid Care CHIP Member Identification Card

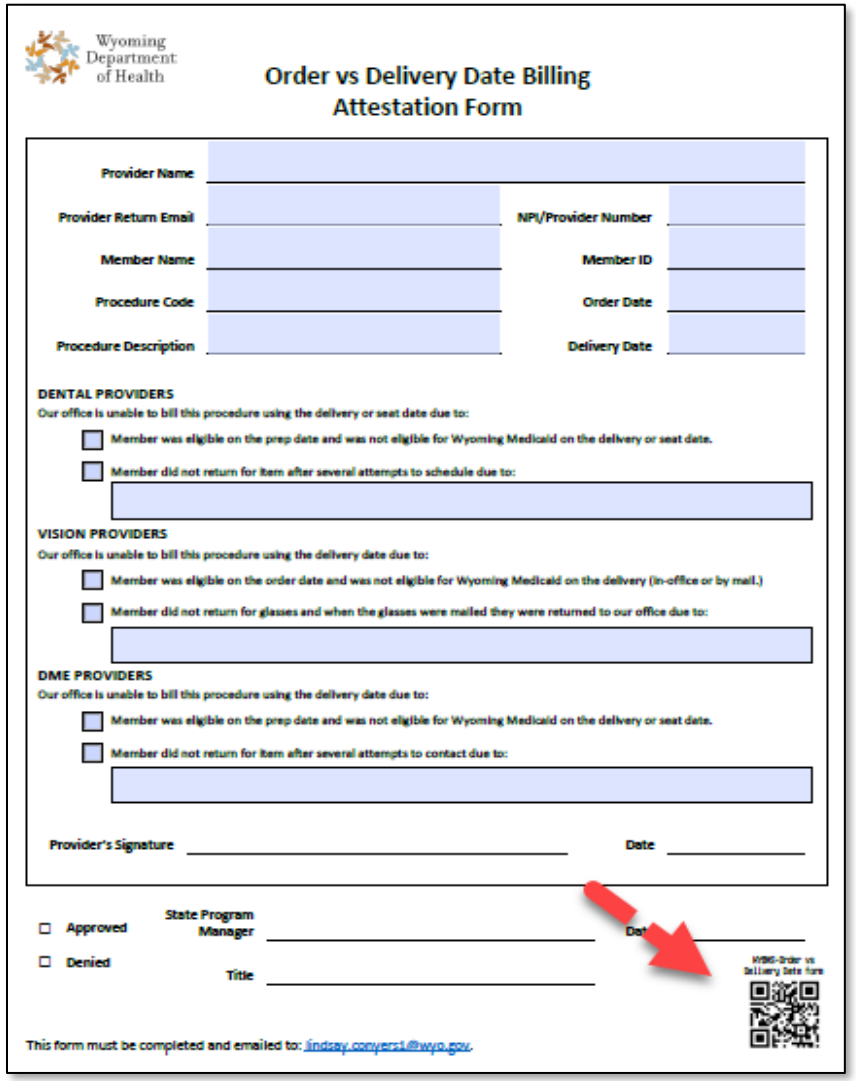




- Members can access their new ID card on their mobile devices.
- Members may print a copy of their card.
- The Member ID card is no longer a swipe card.

© 2021 CNSI

Wyoming Medicaid Website – Forms



Wyoming Department of Health

Order vs Delivery Date Billing Attestation Form

Provider Name

Provider Return Email | NPI/Provider Number

Member Name | Member ID

Procedure Code | Order Date

Procedure Description | Delivery Date

DENTAL PROVIDERS

Our office is unable to bill this procedure using the delivery or seat date due to:

- ☐ Member was eligible on the prep date and was not eligible for Wyoming Medicaid on the delivery or seat date.
- ☐ Member did not return for item after several attempts to schedule due to:

VISION PROVIDERS

Our office is unable to bill this procedure using the delivery date due to:

- ☐ Member was eligible on the order date and was not eligible for Wyoming Medicaid on the delivery (in-office or by mail.)
- ☐ Member did not return for glasses and when the glasses were mailed they were returned to our office due to:

DME PROVIDERS

Our office is unable to bill this procedure using the delivery date due to:

- ☐ Member was eligible on the prep date and was not eligible for Wyoming Medicaid on the delivery or seat date.
- ☐ Member did not return for item after several attempts to contact due to:

Provider's Signature | Date

☐ Approved ☐ Denied

State Program Manager | Date

Title

This form must be completed and emailed to: lindsay.conyers1@wyo.gov.

- Forms remain downloadable from the website
- Forms are updated in the provider manuals
- Forms continue to hold key info (Mailing Address, Phone Number, Fax Number)
- Forms may contain a Quick Response (QR) Code in the footer of each form
- Some forms may no longer be required - example, Authorization of Medical Necessity
- New forms there have updated instructions

Use New Forms; previous forms now obsolete

© 2021 CNSI

Wyoming Medicaid Website – Prior Authorizations (PAs)

- Prior Authorization (PA) changes
  - PAs previously handled by Medical Policy are now the responsibility of WYhealth and Change Healthcare
  - Dental PAs transition to WYhealth
- PA Tables in the provider manuals are updated to reflect the appropriate vendors

© 2021 CNSI

Wyoming Medicaid Website – Electronic Data Interchange (EDI)

- Chapter 8, Electronic Data Interchange (EDI), updated to Electronic Data Interchange (EDI) & Provider Portal
- Provider Portal information added to Chapter 8
  - Provider Portal profiles and access information for both providers and BA/CHs
  - Key points and terminology
  - TPL Disallowance Portal access information
- Reference to and a direct hyperlink to the Wyoming Medicaid EDI Companion Guide
- WINASAP discontinued
- Medicaid is not producing 277CA

© 2021 CNSI

Wyoming Medicaid Website – Wyoming Medicaid EDI Companion Guide

- Wyoming Medicaid EDI Companion Guide replaces Chapter 9, Wyoming HIPAA 5010 Electronic Specifications, and is posted to the website
- Technical Infrastructure and Procedures
- Steps for Uploading Batches via Web Interface
- Steps to complete SFTP Setup
- Transactions Standards
- Testing Process
- Acknowledgements

Note: Wyoming Medicaid Payer ID remains the same at 77046

© 2021 CNSI

Wyoming Medicaid Website – CMS 1500 Provider Manual Changes

- Quick Recap of changes already discussed
  - Website
  - Contact Us – Phone numbers, IVR
  - Forms / PA Table
  - Chapter 8 and 9 changes

- CMS 1500 Provider Manual Changes - Majority of changes impact the general sections, Chapters 1–10, to list a few:
  - TPL
  - TCN
  - Remittance Advice (RA)

All updated provider manuals are posted to the Medicaid website

© 2021 CNSI

Wyoming Medicaid Website – Third Party Liability (TPL)

Chapter 7 – Third Party Liability

- Policy change
  - Prior Legacy Policy
    - > If the TPL payer paid less than 40% of the total billed charges, include the appropriate claim reason and remark codes or attach an explanation of benefits (EOB) with the electronic claim (Electronic Attachments).
  - New Policy
    - > If the TPL payer paid less than 2/3 (approximately 67%) of the calculated Medicaid allowed charges, include the appropriate claim reason and remark codes or attach an explanation of benefits (EOB) with the electronic claim (Electronic Attachments).

© 2021 CNSI

Wyoming Medicaid Website – Third Party Liability

Chapter 7 – Third Party Liability

- Policy change
  - Medicare Crossover Claims
    - > More stringent editing on crossover claims to coincide with Medicaid's requirements, so claims that may have previously paid may now deny
- New sections
  - Third Party Disallowance
  - TPL Credit Balance Audits

© 2021 CNSI

Wyoming Medicaid Website – Third Party Liability

Third Party Disallowance

- Medicaid may seek recoupment from the provider of service of any paid claims that should have been the responsibility of a primary payer through the third-party disallowance process.
  - Primary payers may be commercial health insurance, Medicare Part A and Part B, Worker's Compensation
- A letter is delivered to the provider identifying the liable third-party coverage accompanied by a list of claims. The letter invites the provider to access the TPL Disallowance Portal to view claims and more.
- The HMS, TPL Disallowance Portal is a secure portal that functions as the primary provider dashboard throughout the disallowance and recovery process.
- Through the TPL Disallowance Portal, providers can utilize a broad scope of self-service options.
- Providers are not to adjust these claims or submit a manual refund payment (cash, check, money order), claims are automatically adjusted by the BMS.

© 2021 CNSI

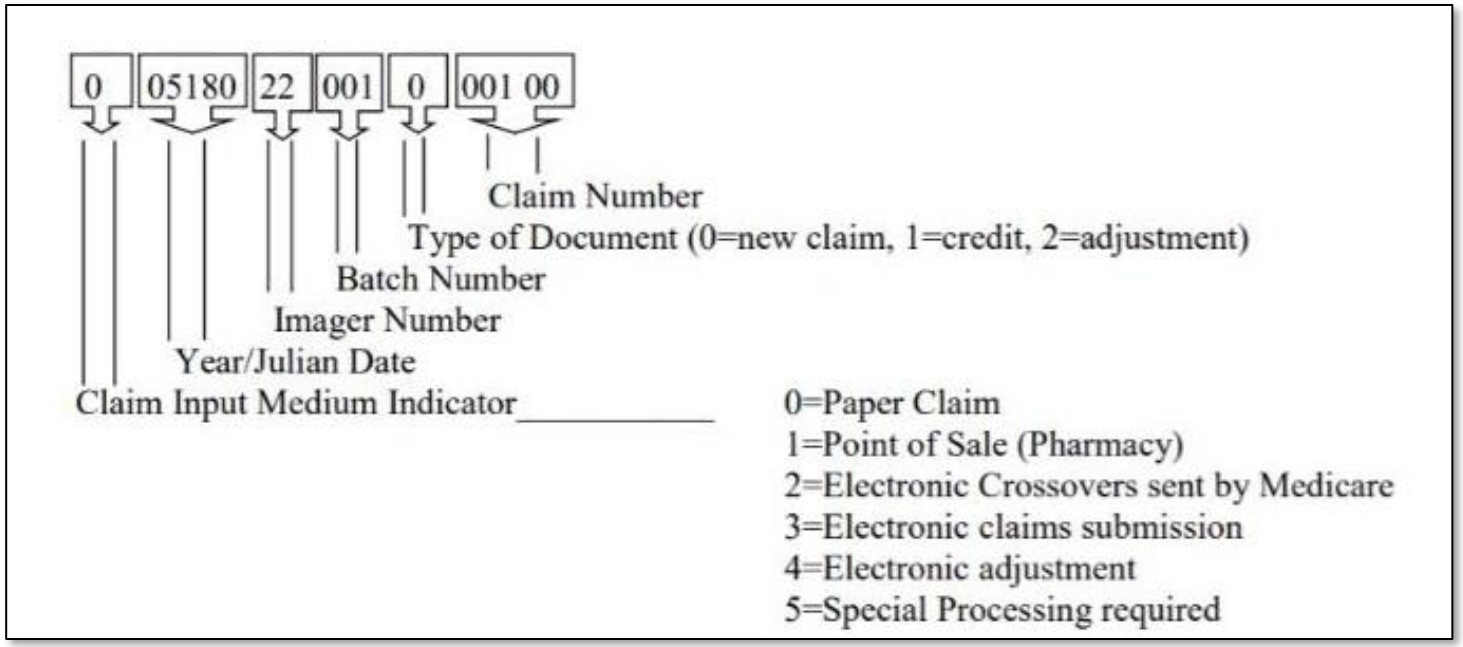
Wyoming Medicaid Website – Third Party Liability

TPL Credit Balance Audits

- Wyoming Medicaid leverages the services of its vendor, Health Management Systems (HMS), to conduct periodic credit balance audits to ensure all overpayments due to Wyoming Medicaid are processed appropriately
- If selected for a credit balance audit, the provider of service of receives a notification from HMS advising them of the audit and the audit process.
- An assigned HMS credit balance auditor contacts the provider of service to schedule the audit and answer any questions the provider may have regarding the process.
- Providers are not to adjust these claims or submit a manual refund payment (cash, check, money order), claims are automatically adjusted by the BMS.

© 2021 CNSI

Wyoming Medicaid website – Legacy TCN



- 3 years of claims history converted to the BMS
- Legacy TCNs remain the same 17-digit number in the BMS
- TCNs remain a unique transaction identifier
- TCNs continue to track each claim through the process

© 2021 CNSI

Wyoming Medicaid Website – New TCN

Field	Field Description	Length	Value
1st Digit	Input Medium Indicator	1	• 1 – Paper Claim without Attachment(s) • 2 – Direct Data Entry (DDE) Claim – via Provider Portal • 3 – Electronic Claim – HIPAA Compliant Transaction • 4 – Adjusted Claims – Provider adjustments or BMS mass or gross adjustments • 8 – Paper Claim with Attachment(s)
2nd Digit	TCN Category	1	• 1 – Assigned to Institutional, Professional and Dental Claims • 2 – Assigned to Crossover Claims – Received via Medicare Intermediary
3rd to 7th Digit	Batch Date	5	• YYDDD – Year + 3-digit Julian Date
8th Digit	Adjustment Indicator	1	• 0 – Original Paper Claim • 1 – Original DDE and Electronic HIPAA Claim • 7 – Replacement (Adjustment) Claim • 8 – Void Claim
9th to 14th Digit	Sequence Number	6	• Sequence Number starting with 000001 at the beginning of each Julian Date.
15th to 17th Digit	Line Number	3	• Line Number begins with 001 for every new claim. The header has the line number as 000.

- New TCN carries a different format for the 17 digits
- DDE – when keying a claim directly into the Provider Portal
- 1st digit does not change when submitting an attachment for DDE or HIPAA claim submissions
- Julian Date still critical
- 8th digit aligns to adjustments and voids
- 9th through 14th digits align to volume of claims

© 2021 CNSI

Wyoming Medicaid Website – Sample TCNs

TCN for First Original Paper Claim without an attachment on 03-16-2021	**1**-1-**21075**-**0**-000**001**-001
TCN for Tenth Adjustment Paper Claim without an attachment on 03-16-2021	**4**-1-**21075**-**7**-000**10**-001
TCN for 100th Void DDE Claim without an attachment on 03-16-2021	**4**-1-**21075**-**8**-000**100**-000
TCN for First Original Paper Claim with attachment(s) on 03-17-2021	**8**-1-**21076**-**0**-000**001**-000
TCN for First Original DDE Claim without attachment(s) on 03-17-2021	**2**-1-**21076**-**1**-000**001**-001
TCN for Fifth Original Electronic Crossover Claim without attachment(s) on 03-17-2021	**3**-**2**-**21076**-**1**-000**005**-000
TCN for First Original Electronic (HIPAA) Claim with attachment(s) on 03-17-2021	**3**-1-**21076**-**1**-000**001**-001

Legacy TCNs remain in the old format in the new BMS system.

© 2021 CNSI

Wyoming Medicaid Website – Medicaid RA

- Medicaid Remittance Advice (RA)
  - Not your 835
- Located within the secure Provider Portal
- Medicaid RA only has the HIPAA X12 External Code Sources that appear on the 835:
  - Remittance Advice Remark Codes (RARCs) and
  - Claim Adjustment Reason Codes (CARCs)
- New Look!

© 2021 CNSI

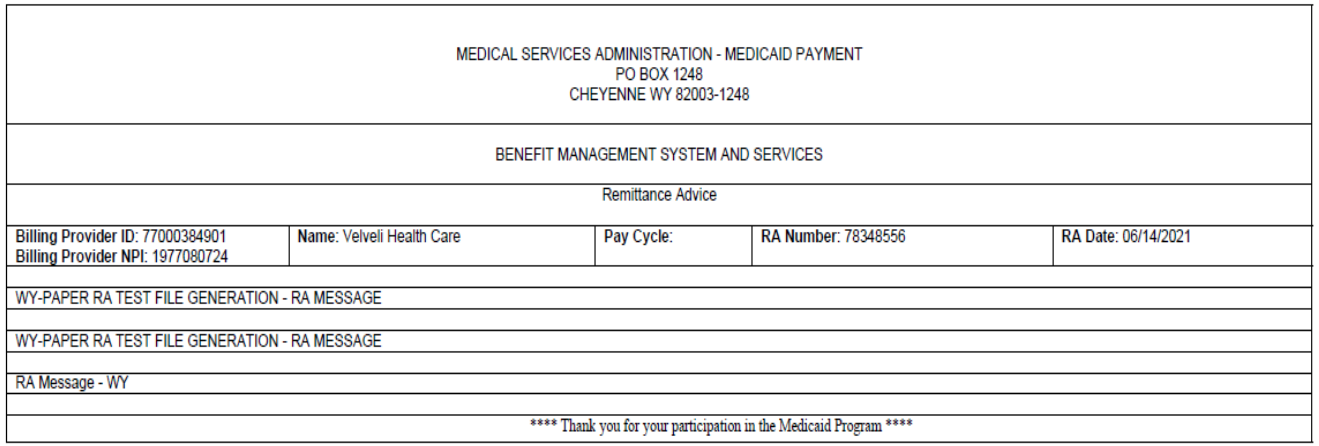
Wyoming Medicaid Website – Medicaid RA

Institutional Provider Manual, Section 6.17, Remittance Advice

- Explains how the RA is organized
- Provides definitions of key fields within the RA
- TCN digits are broken down (old and new)
- Has multiple “Sample” RAs with paid, denied, adjusted and voided claims
- The RA does not provide the member’s other insurance coverage, contact Provider Services

© 2021 CNSI

Wyoming Medicaid Website – Medicaid RA



MEDICAL SERVICES ADMINISTRATION - MEDICAID PAYMENT
PO BOX 1248
CHEYENNE WY 82003-1248

BENEFIT MANAGEMENT SYSTEM AND SERVICES

Remittance Advice

Billing Provider ID: 77000384901 **Billing Provider NPI**: 1977080724	**Name**: Velveli Health Care	**Pay Cycle**:	**RA Number**: 78348556	**RA Date**: 06/14/2021

WY-PAPER RA TEST FILE GENERATION - RA MESSAGE

WY-PAPER RA TEST FILE GENERATION - RA MESSAGE

RA Message - WY

**** Thank you for your participation in the Medicaid Program ****

RA is organized in the following manner:

- Cover Page
- Summary Page
- Claim Detail Pages
- Last Page

The cover page will display active RA Banner message(s) notifying providers of important information.

- Provider ID/NPI
- Provider Name
- RA Number
- RA Date

Wyoming Medicaid Website – Medicaid RA

Billing Provider ID: 49934000301 **Billing Provider NPI**: 1005268960	**Name**: Velveli Health Care	**Pay Cycle**:	**RA Number**: 78348641	**RA Date**: 06/21/2021

FINANCIAL ADJUSTMENTS

Adjustment Type	Previous Balance	Adjustment Amount	Remaining Balance
Balance Owed by Tax ID	$0.00		$0.00

CLAIM SUMMARY

Category	Count	Total Billed Amount
Paid	1	$3,500.00
Credited	0	
Denied	1	$3,500.00
GA	0	

Total Approved	$3,500.00	Total Adjusted	$0.00	Total Paid	$3,500.00

Warrant/EFT #: 202106160001 Warrant/EFT Date: 06/16/2021

Summary Page provides:

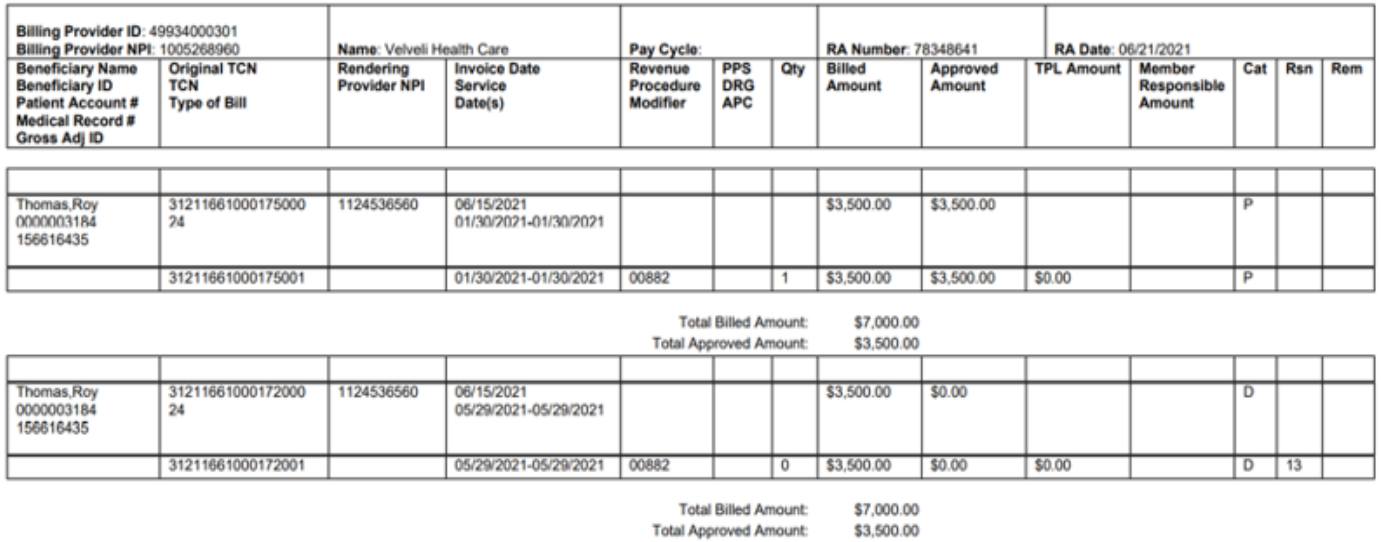
- A summary of paid, denied, credited, gross adjusted, total billed, and total paid claims.
- Warrant/EFT number and date

The sample RA Summary page:

- 1 Paid Claim
- 1 Denied Claim
- Total billed amounts per category (paid, credited, denied, gross adjusted)
- Total Approved and Paid

© 2021 CNSI

Wyoming Medicaid Website – Medicaid RA



Billing Provider ID: 49934000301
Billing Provider NPI: 1005268960
Name: Velveli Health Care
Pay Cycle:
RA Number: 78348641
RA Date: 06/21/2021

Beneficiary Name / Beneficiary ID / Patient Account # / Medical Record # / Gross Adj ID	Original TCN / TCN / Type of Bill	Rendering Provider NPI	Invoice Date / Service Date(s)	Revenue / Procedure / Modifier	PPS / DRG / APC	Qty	Billed Amount	Approved Amount	TPL Amount	Member Responsible Amount	Cat	Rsn	Rem
Thomas,Roy 0000003184 156616435	31211661000175000 24	1124536560	06/15/2021 01/30/2021-01/30/2021				$3,500.00	$3,500.00			P		
	31211661000175001		01/30/2021-01/30/2021	00882		1	$3,500.00	$3,500.00	$0.00		P		

Total Billed Amount: $7,000.00
Total Approved Amount: $3,500.00

Thomas,Roy 0000003184 156616435	31211661000172000 24	1124536560	06/15/2021 05/29/2021-05/29/2021				$3,500.00	$0.00			D		
	31211661000172001		05/29/2021-05/29/2021	00882		0	$3,500.00	$0.00	$0.00		D	13	

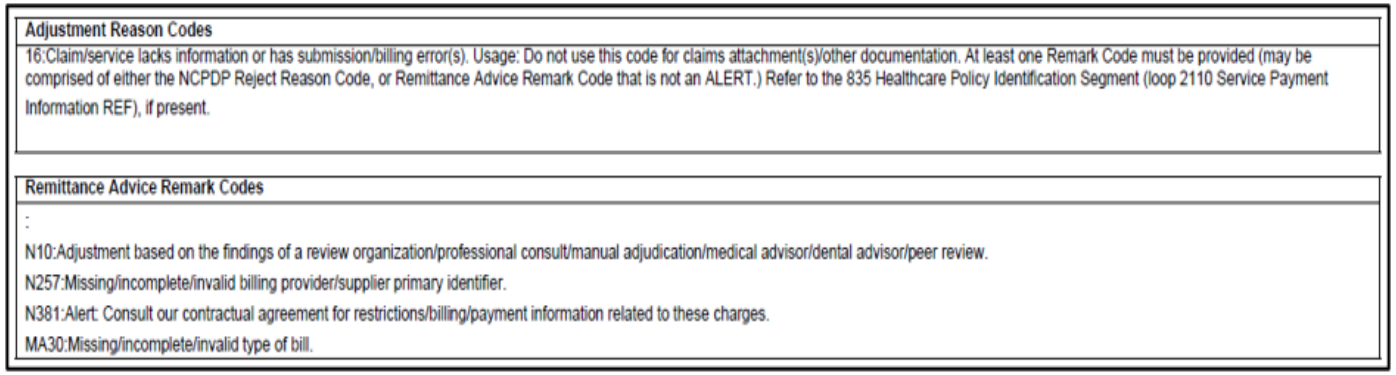
Total Billed Amount: $7,000.00
Total Approved Amount: $3,500.00

Claim Detail Page provides:

- Member's information
- TCNs
- Rendering NPIs
- Dates of services
- Procedure and revenue codes
- Modifiers
- DRG/APC
- Quantity
- Billed amount
- (Medicaid) approved amounts
- TPL amounts
- Member responsible amount
- Category
- Reason and remark codes

© 2021 CNSI

Wyoming Medicaid Website – Medicaid RA



Adjustment Reason Codes
16:Claim/service lacks information or has submission/billing error(s). Usage: Do not use this code for claims attachment(s)/other documentation. At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.) Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.

Remittance Advice Remark Codes
:
N10:Adjustment based on the findings of a review organization/professional consult/manual adjudication/medical advisor/dental advisor/peer review.
N257:Missing/incomplete/invalid billing provider/supplier primary identifier.
N381:Alert: Consult our contractual agreement for restrictions/billing/payment information related to these charges.
MA30:Missing/incomplete/invalid type of bill.

The Last page or at the bottom of the Summary page will be a list of the Remittance Advice Remark Codes (RARCs) and Claim Adjustment Reason Codes (CARCs) for the denied lines/claims

On the Provider Portal providers will have the ability to view the TCN in detail to help determine the reason the claim denied, or providers may contact Provider Services.

© 2021 CNSI

Wyoming Medicaid Website – Recap and Q&A

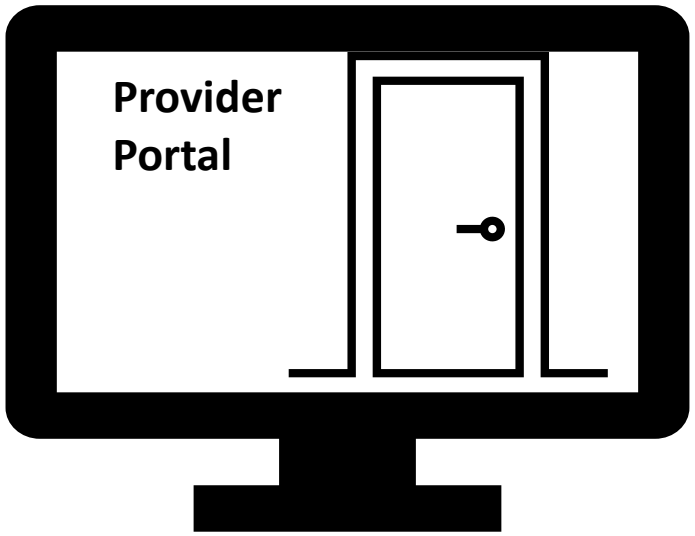
- Quick Recap
- Questions & Answers
- Break Time (5 minutes)

© 2021 CNSI

New Provider Portal

Medicaid Secure Features and Profiles

Features



Legacy Provider Portal	New Provider Portal
Ask Wyoming Medicaid	Ask Medicaid
Claims Submission	Claims Submission
Claim Status Inquiry	Claim Status Inquiry
Prior Authorization Inquiry	PA Inquiry
RA Retrieval	RA Listing
Upload Files	Upload Files
Provider Update	Not Applicable (HHS Provider Enrollment website)
Provider Warrant Summary	RA Listing
Prior Authorization Entry/Submission	Not Applicable (Vendor Submitted)
LT101 Inquiry	Eligibility Inquiry – LT101 Inquiry
PASRR Level I	Eligibility Inquiry - PASRR Level I Inquiry/Entry
Electronic Claim Attachment	Electronic Claim Attachment
EDI Application	Manage Provider / Billing Agents & Clearinghouses
Client Eligibility Inquiry	Eligibility Inquiry
	Provider Information • View Provider Information • Manage EDI Information • Manage SFTP User Account

© 2021 CNSI

Profile Name	Access Rights
Provider Domain Administrator (Provider User)	Allows the **Provider user** to perform: • User Account Maintenance for accounts under a Provider, including Associating Security Profiles and Approving New User Accounts
Prior Authorization (PA) Access	Allows the **Provider user** to perform: • View and Inquire on PAs
Eligibility Inquiry	Allows the **Provider user** to perform: • Inquire on Member Eligibility • Enter and inquire on PASRR Level I • Inquire on LT101
Claim Access	Allows the **Provider user** to perform: • Claims inquiry (837 D, I, P) • Claims inquiry on pharmacy claims • Online claims entry or direct data entry (DDE) • Claim adjustment/void • Resubmit denied/voided claims • View and download remittance advice (view payment)

© 2021 CNSI

Profile Name	Access Rights
Provider Access	Allows the **Provider user** to perform: • View Provider Information • Manage EDI Information – contact information • Manage SFTP User Account – create user and password reset • Manage Mode of Claim Submission • Associate Billing Agents and Clearinghouses • Submit/Upload HIPAA batch transactions (270, 276, 837) • Online batch claims submission (837 D, I, P) • Retrieve HIPAA batch responses (835) • Retrieve acknowledgement and responses (999, TA1, 271, 277)
Provider Domain Administrator (Billing Agent/Clearinghouse User)	Allows the **BA/CH user** to perform: • User Account Maintenance for accounts under a Provider, including Associating Security Profiles and Approving New User Accounts

© 2021 CNSI

Profile Name	Access Rights
Provider Access	Allows the **BA/CH user** to perform: • Manage Provider (BA or CH) Information • View Associated Providers • Manage SFTP User Account • Online Batch Claims Submission (837 D, I, P) • Submit HIPAA batch transactions (270, 276, 837) • Retrieve HIPAA batch responses (835) • Retrieve acknowledgements and responses (999, TA1, 271, 277)
Claims Access	Allows the **BA/CH user** to perform: • Claim Inquiry (837 D, I, P)

© 2021 CNSI

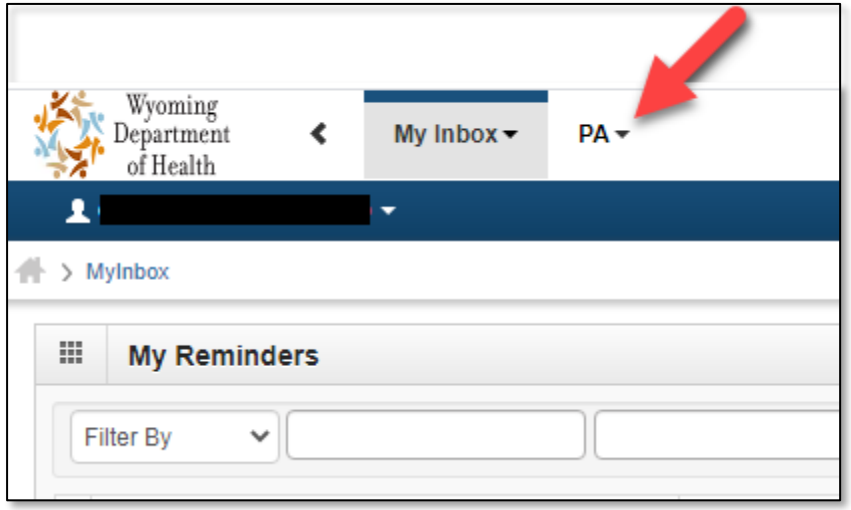
Provider Portal – Payment Relevant

- Prior Authorization Inquiry
- Manage Clearinghouses and Billing Agents
- Provider Password Reset
- Claim Submission
- WINASAP to be discontinued
- Professional Claim DDE
  - Claim Template
  - Electronic Adjustment/Void
- Claim Attachments

© 2021 CNSI

Provider Portal – PA Inquiry

- Providers only have access to the PAs aligned to their specific submissions.
- Full list of active PAs displayed upon login.
- Filter can be conducted via PA #.
- “PA” appears next to "My Inbox” on the user’s Provider Portal home page when the user selects “PA Access” provider profile from their drop-down menu.



Legacy

- Search by Provider ID
- Search by DOS (6-month span max)
- Via Client ID or DOS
- Via PA #

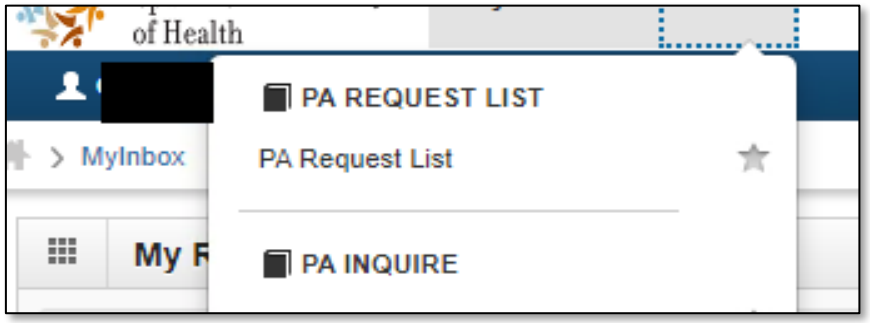
New Portal

- Used PAs are visible
- Not limited to 6-month DOS span

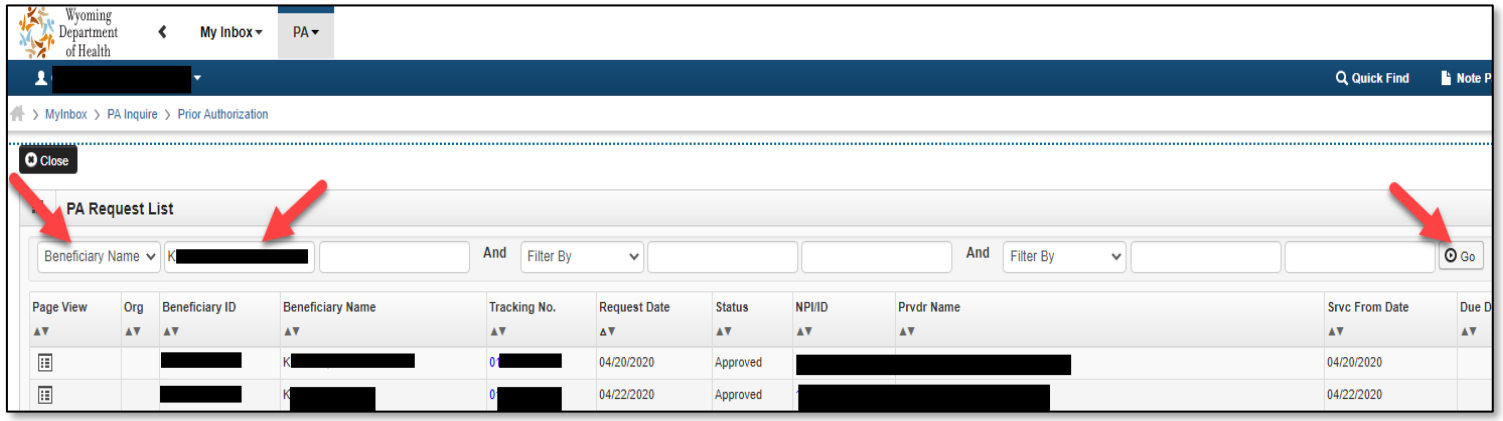
- Provider Profile: PA Access

© 2021 CNSI

Provider Portal – PA Inquiry



Example of a search by the Member Name – From the first drop-down list, select **Member Name**, enter the last name, and select **'Go'**. Below is only partial information that displays.



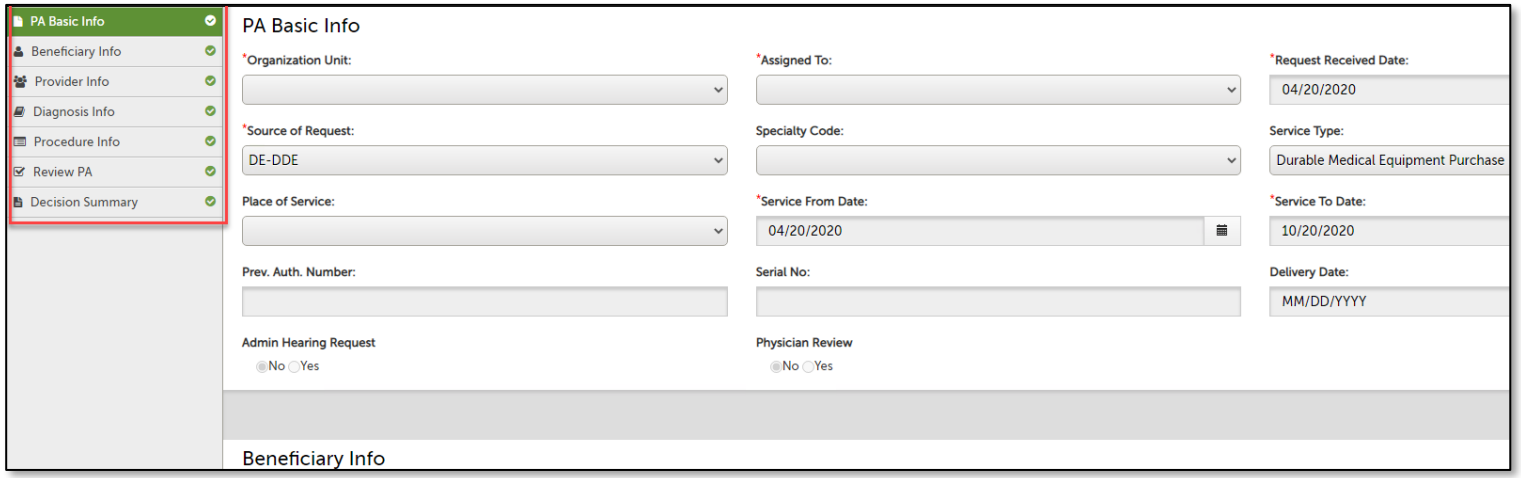
From the PA drop-down menu, select:

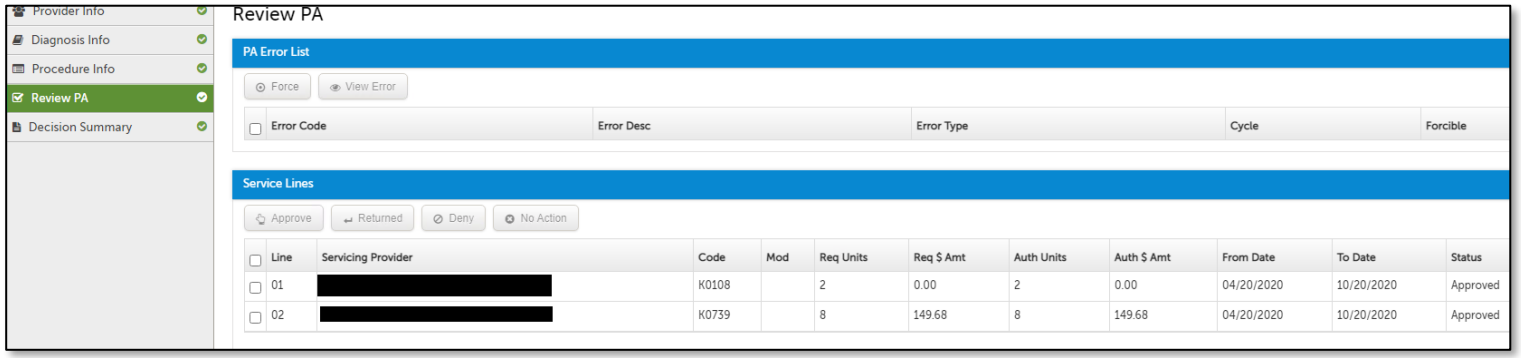
- PA Request List – when you do not have the PA number or to inquire on PAs or
- PA Inquire – to enter the PA number

Providers inquiring on PAs select **'PA Request List'** and filter (search) in various ways, such as with PA Tracking No. (PA number), Member ID, Member Name, Status, and Service Date.

Select the blue PA Tracking Number to view the PA details

Provider Portal – PA Inquiry





PA screen:

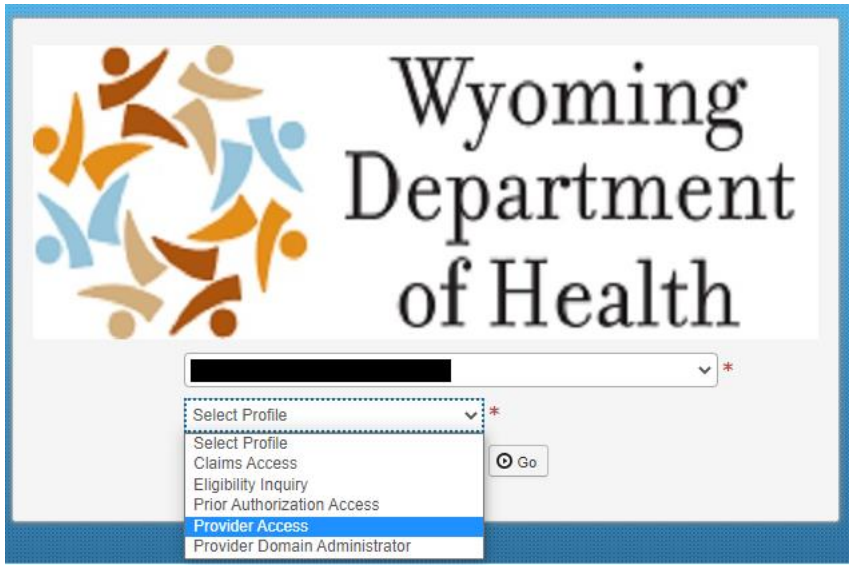
Providers scroll up and down (right side of screen) to navigate the PA, or use the navigation on the left to go directly to a specific area.

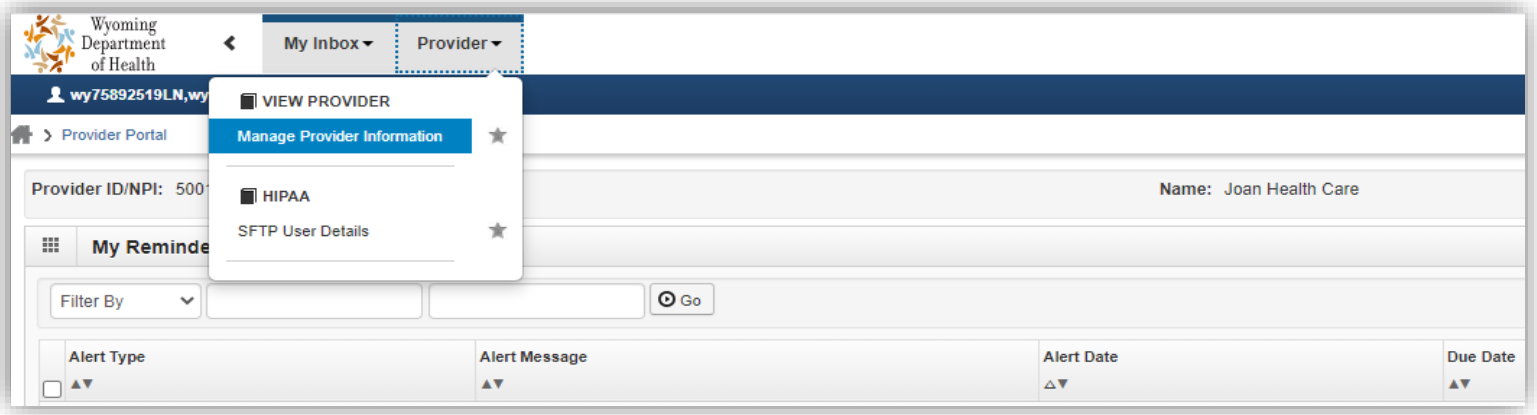
Review PA (example)

- Line detail
- Codes
- Units
- Dates of service
- Status

Provider may print the PA or view.

Manage BA and CHs





Legacy

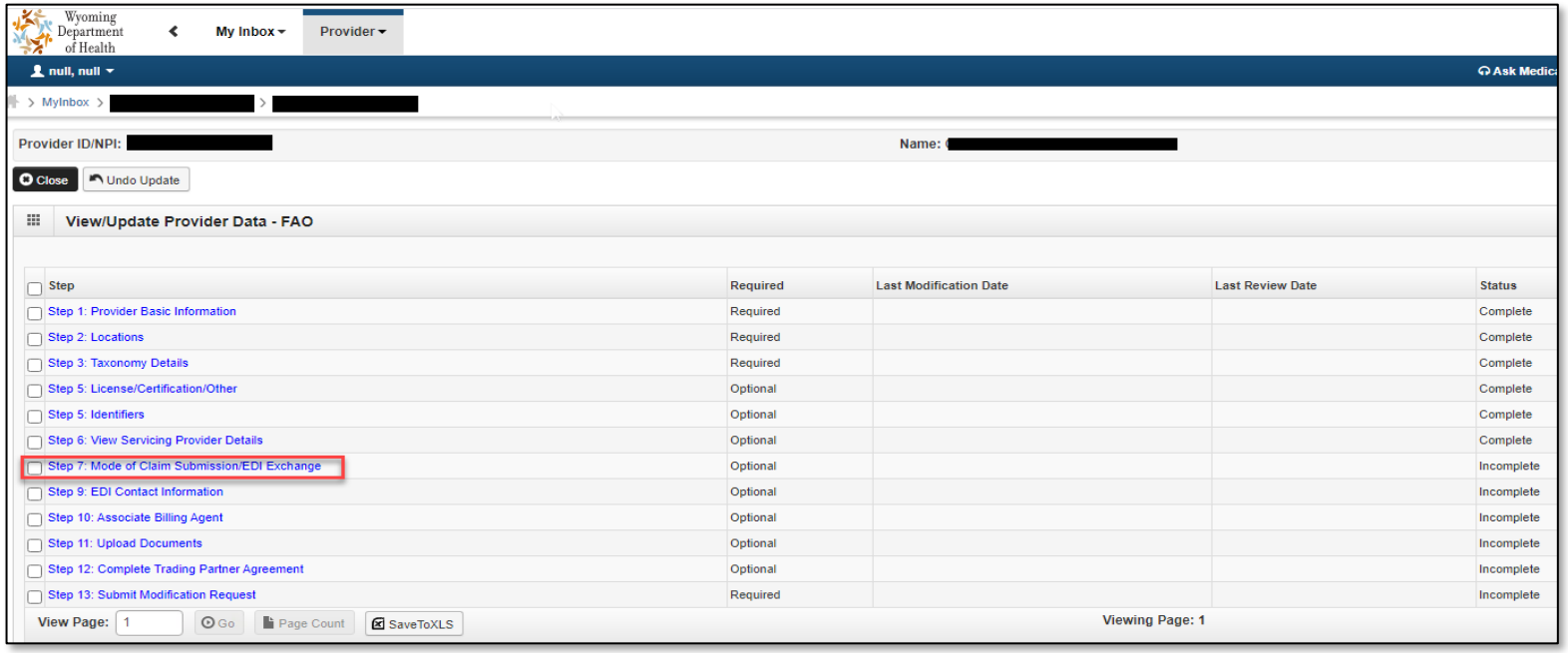
- Providers submitted forms to manage Billing Agents (BA) and Clearinghouses (CH)
- Call Center staff updated the Trading Partner ID, Transactions, and Associate providers with BA/CHs upon request

New Portal

- Providers manage directly and add, remove, or update the BA/CH with whom they are doing business
- Provider Profile: Provider Access
- From Provider drop-down menu, select '**Manage Provider Information**'

© 2021 CNSI

Step 7: Mode of Claim Submission/EDI Exchange (Provider User)



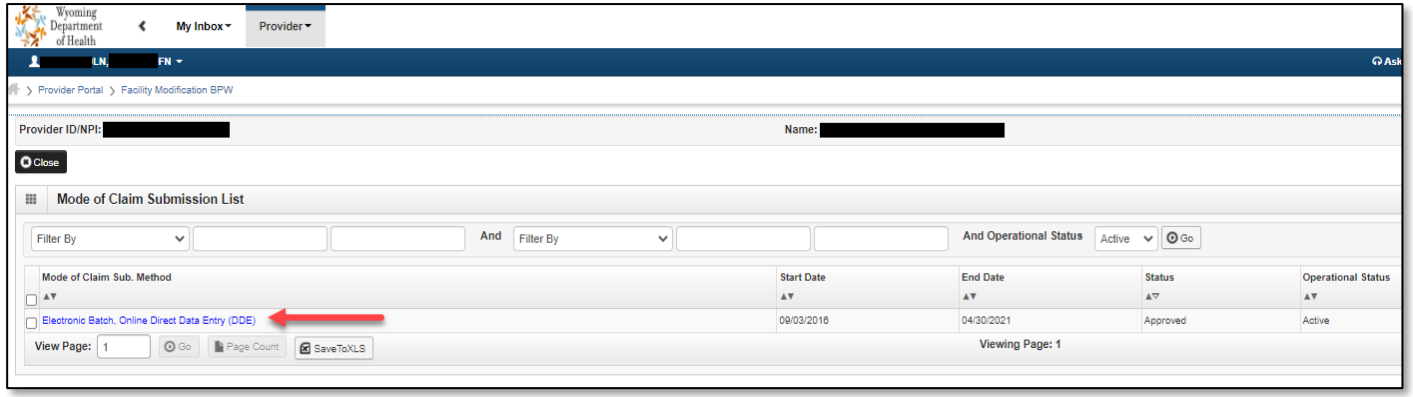
Select the blue hyperlink to display the Mode of Claim Submission page

- EDI elections by enrolled pay-to providers and their BA/CH associations will be transitioned from Conduent to the BMS.
- Online Direct Data Entry for claims (DDE) will be defaulted
- ALL converted providers should verify the mode of claim submissions (Step 7) to avoid claim submission problems which may result in payment delays

NOTE: The verification steps are covered in depth in the Web Registration Training sessions.

© 2021 CNSI

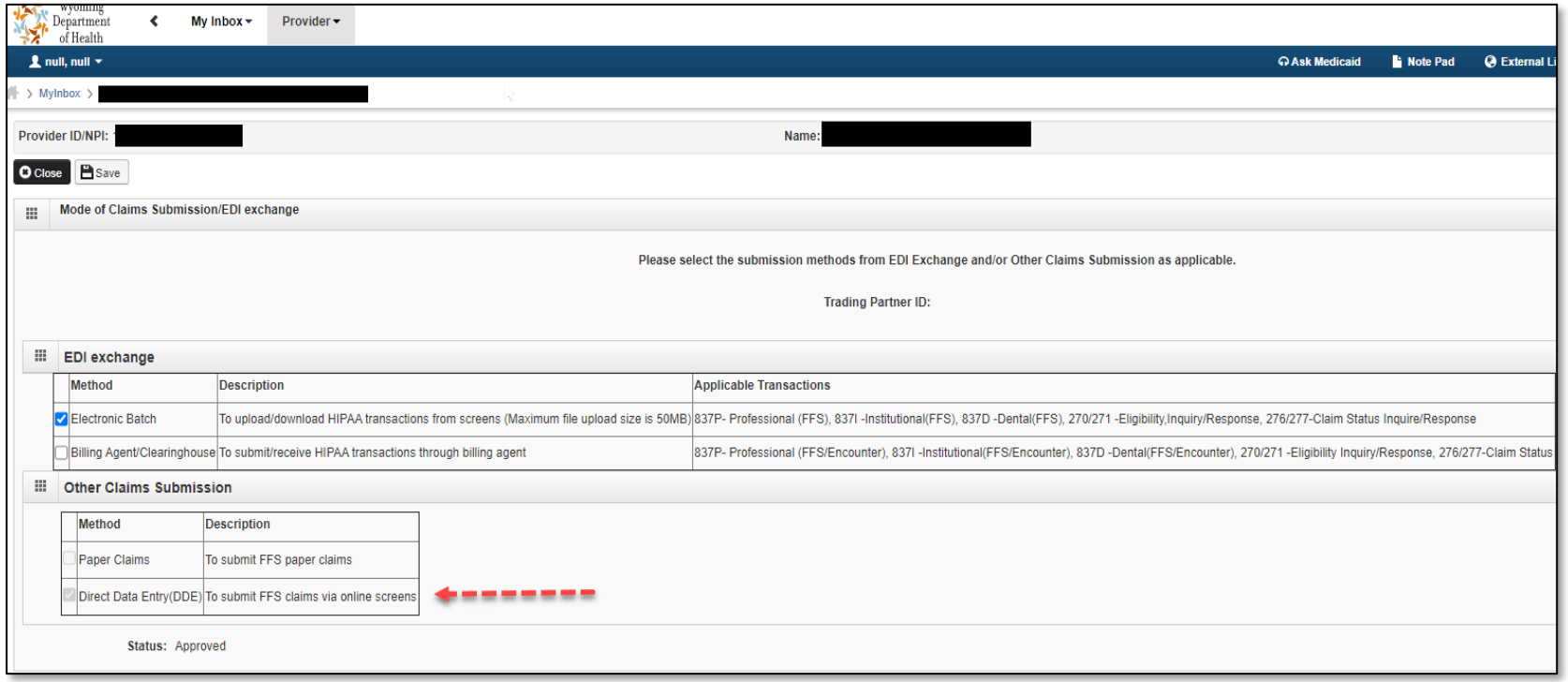
Step 7: Mode of Claim Submission/EDI Exchange (Provider User)



- This sample provider's modes of claim submission are 'Electronic Batch' and 'Online Direct Data Entry (DDE)'
- Select the blue hyperlink to expand to view the details and to make changes

© 2021 CNSI

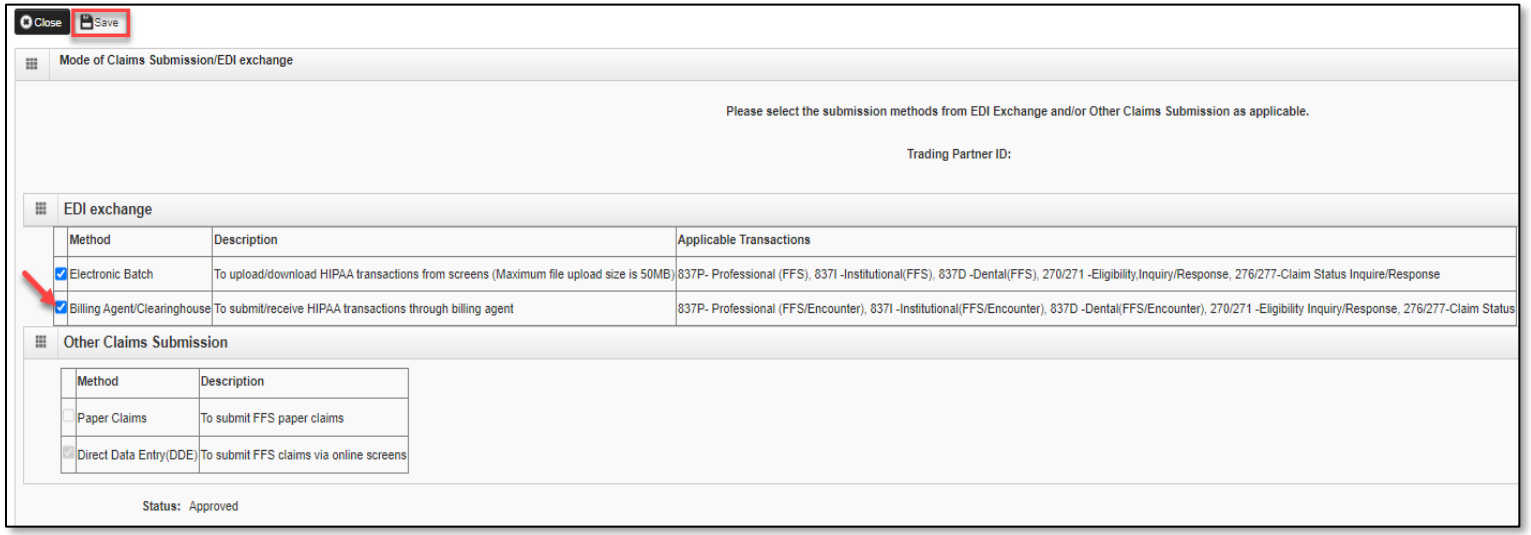
Step 7: Mode of Claim Submission/EDI Exchange (Provider User)



1. When using a billing agent, select the checkbox next to Billing Agent/Clearinghouse.
2. Select **‘Save’** at the top of the screen.
3. Select **‘Close’** to return to the previous screen with the 12 steps.

DDE is defaulted and cannot be ‘unselected’

Step 7: Mode of Claim Submission/EDI Exchange (Provider User)



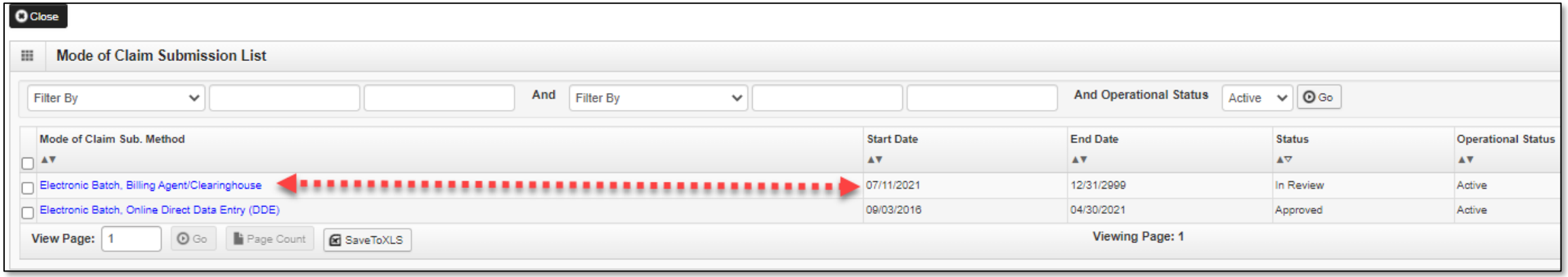
- To select a BA/CH to submit electronic transactions on the provider's behalf:
  1. Select the '**Billing Agent/Clearinghouse**' checkbox.
  2. Select '**Save**'.
  3. Select '**Close**'.

© 2021 CNSI

Step 7: Mode of Claim Submission/EDI Exchange (Provider User)

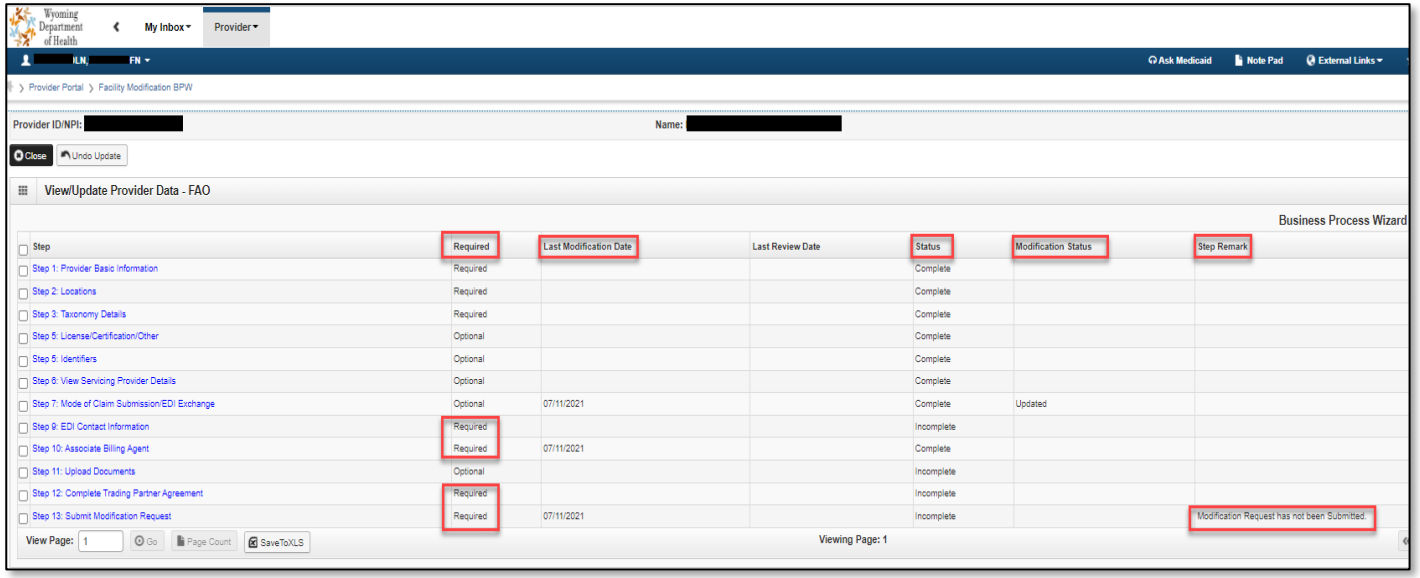
The Mode of Claim Submission List displays your new selection with the start date as the date of the selection.

- Select '**Close**' to return to the 12 steps page.



© 2021 CNSI

Step 7: Mode of Claim Submission/EDI Exchange (Provider User)

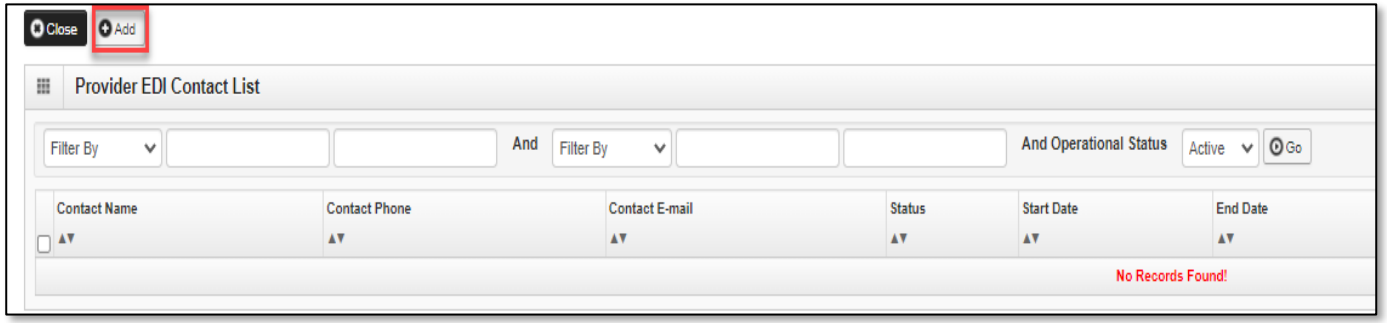


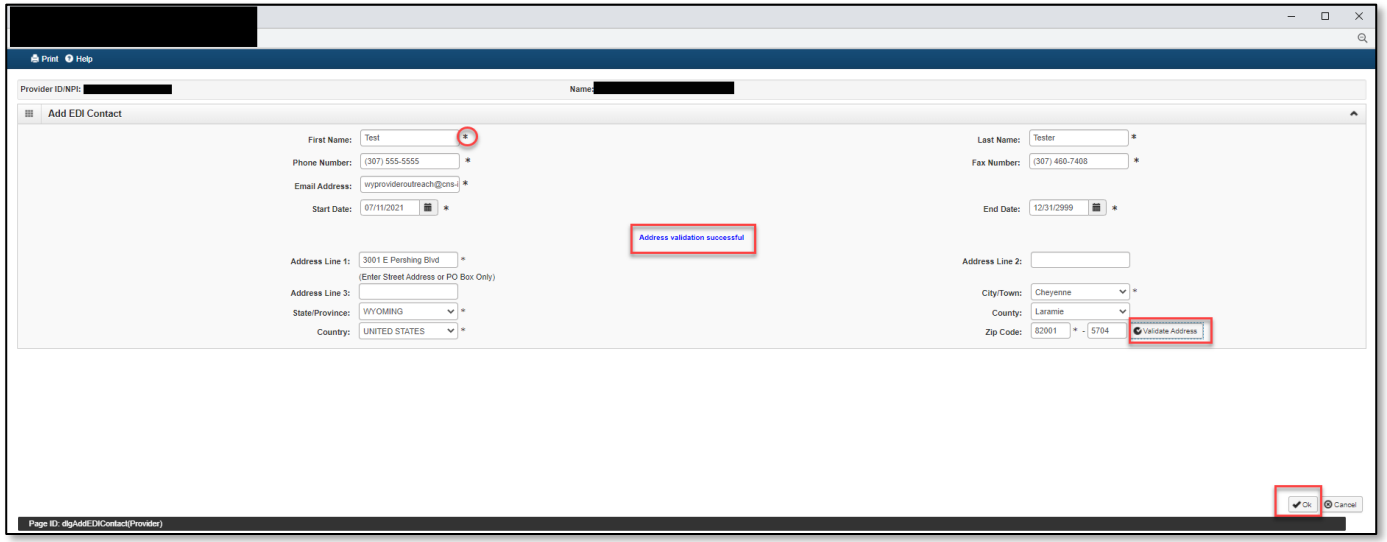
Step 8 is ‘incomplete’ which means the provider did not previously have EDI contact information converted.

- Since we made an update in Step 7, the ‘View/Update Provider Data’ page now reflects newly required steps, the modification date displays, the ‘Status’ column guides you as you complete required steps, and Step 12: Submit Modification Request is now required and incomplete.
- Steps 8, 9, 11, and 12 now require action

© 2021 CNSI

Step 8: EDI Contact Information (Provider User)





1. Select '**+Add**' to add an EDI contact. Complete all required fields notated by an asterisk (*)

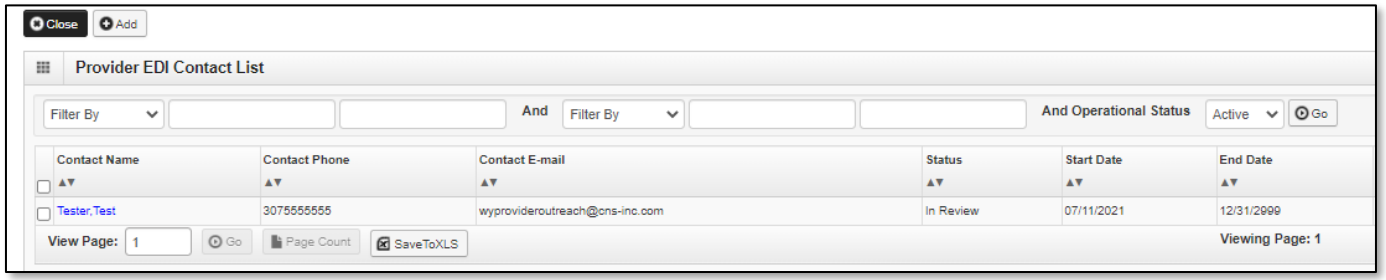
NOTE: Addresses must be validated

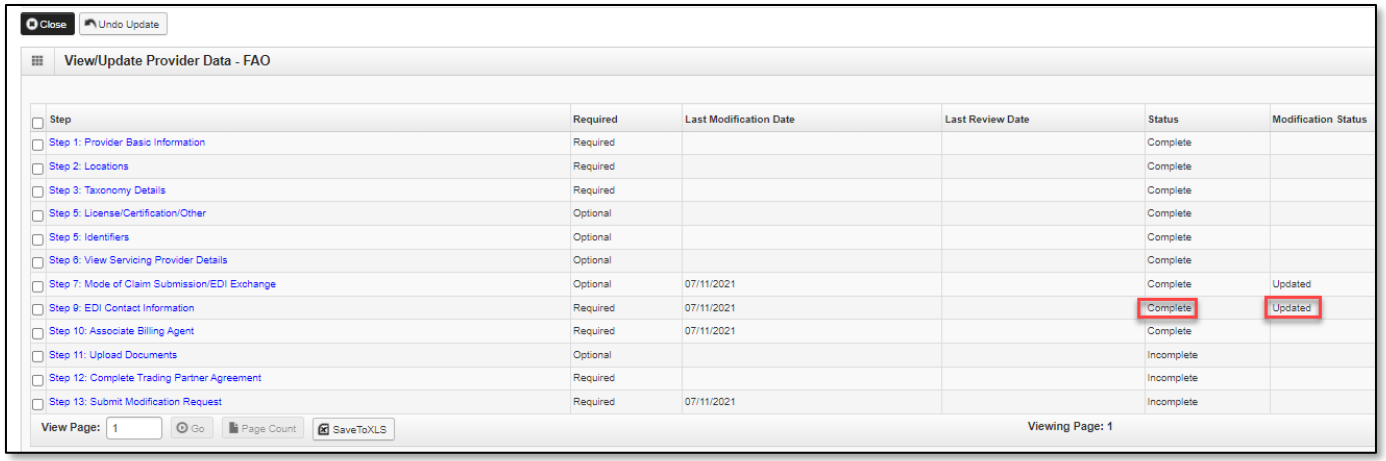
2. Select '**Ok**'.

To add another EDI contact, repeat these steps, or select '**Close**' to exit the page

© 2021 CNSI

Step 8: EDI Contact Information (Provider User)





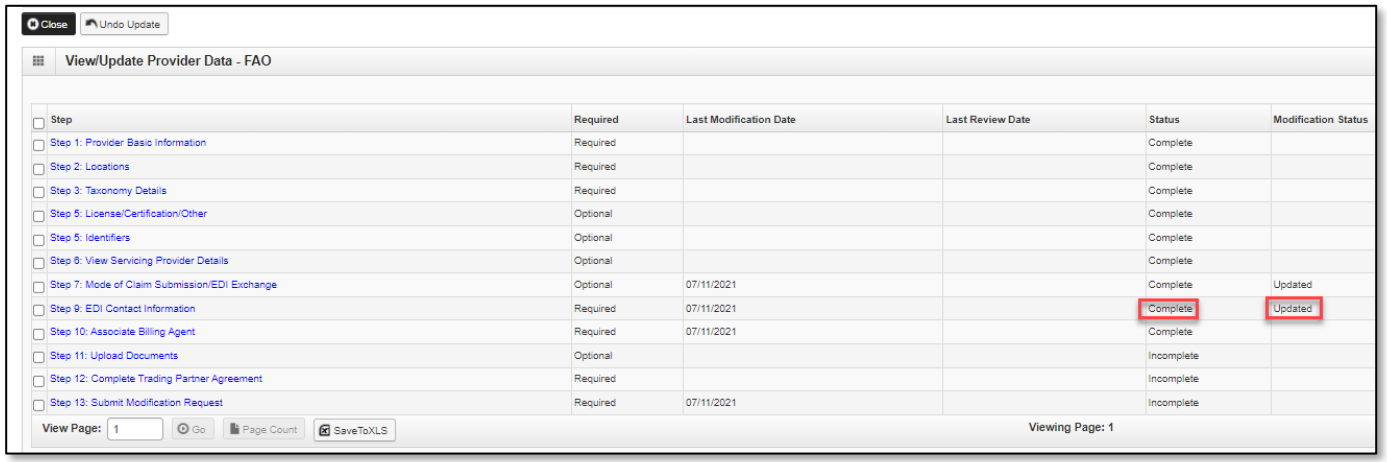
- EDI contact name was successfully added
- Step 8: EDI contact now reflects ‘Updated’ and the status is ‘Complete’

Select the blue hyperlink for Step 9 to expand to view the details and to make changes

© 2021 CNSI

Step 9: Associate Billing Agent (Provider User)

- Important! In this step, the provider selects the BA/CH that is to submit electronic HIPAA transactions on their behalf.
- Remember! Step 9 is only required when you select a BA/CH in Step 7.



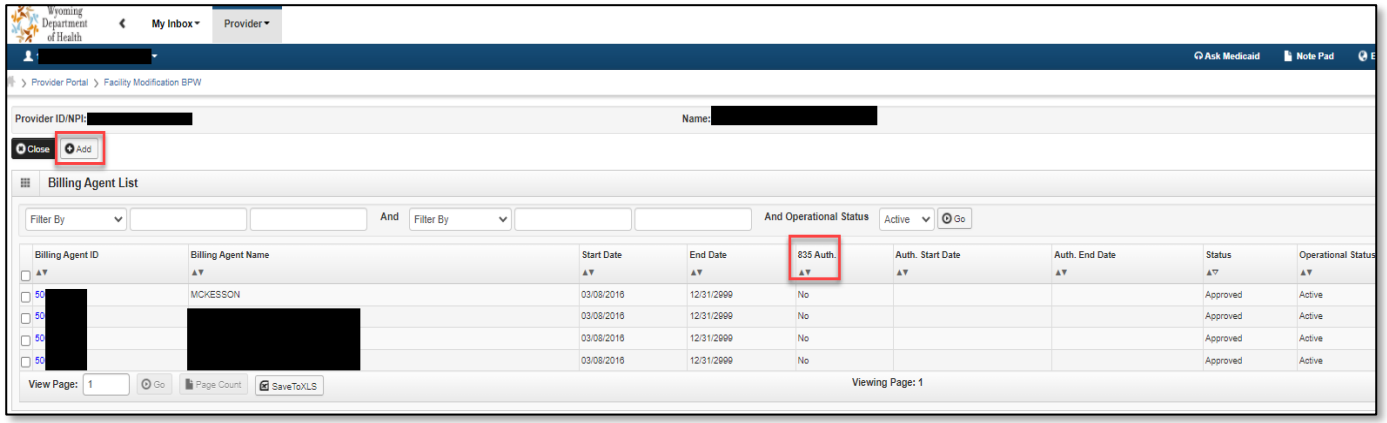
- Conduent's Legacy process:
  - Providers submit forms to manage CH and BAs & the call center updates
- New Provider Portal process:
  - Providers manage Billing Agents and Clearinghouse directly

In our example, this provider already has a list of active BA/CHs, but we are going to add another BA/CH for this provider

In the '835 Auth' column, notice that none of the BA/CHs are receiving this provider's 835 transaction. Remember, 835 files can only be delivered to one (1) provider or BA/CH.

© 2021 CNSI

Step 9: Associate Billing Agent (Provider User)



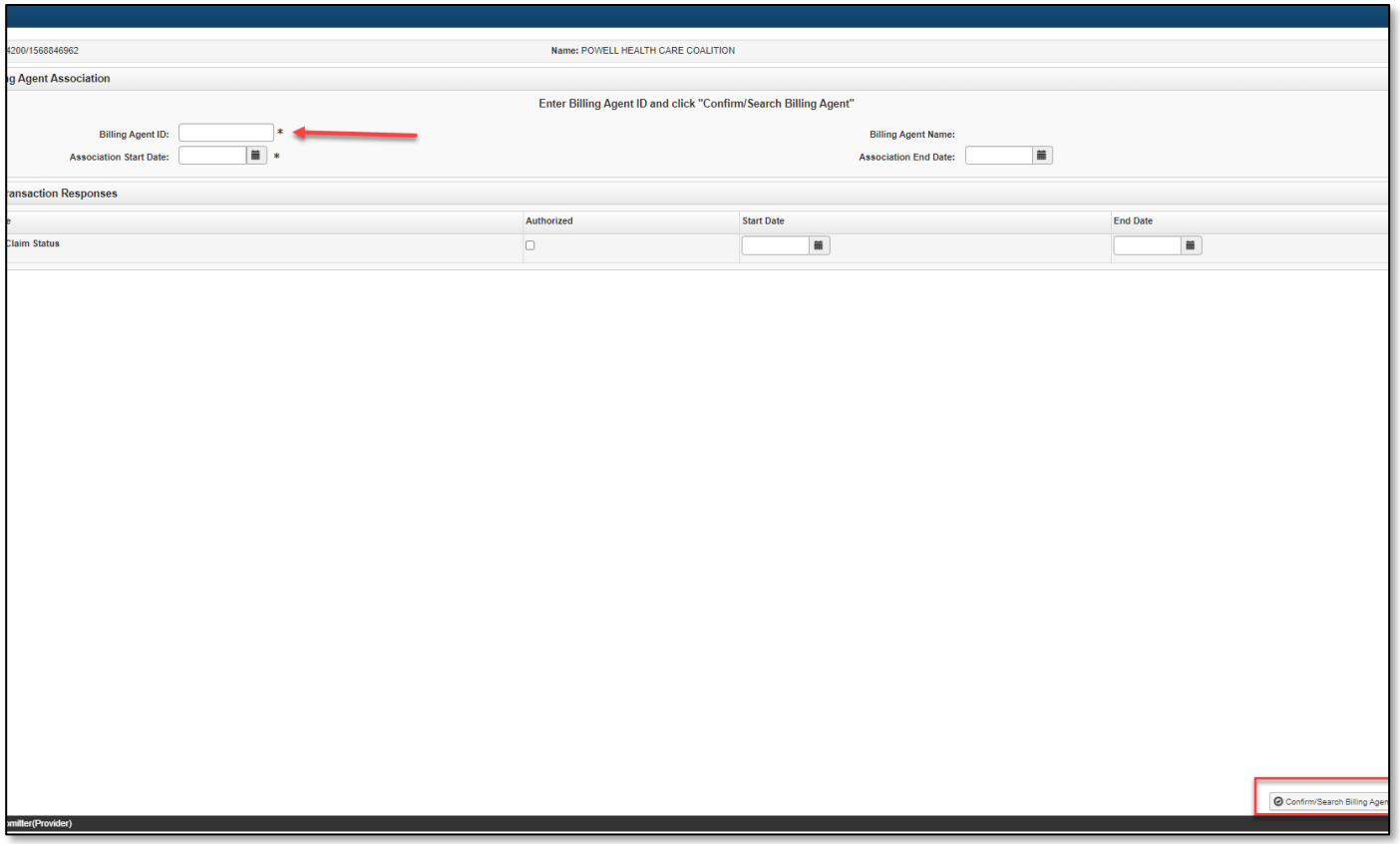
- Select '**+Add**' to add or to search for the new BA/CH to add to your file.

In the '835 Auth' column, notice that none of the BA/CHs are receiving this provider's 835 transaction.

Remember, 835 files can only be delivered to one (1) provider or BA/CH

© 2021 CNSI

Step 9: Associate Billing Agent (Provider User)



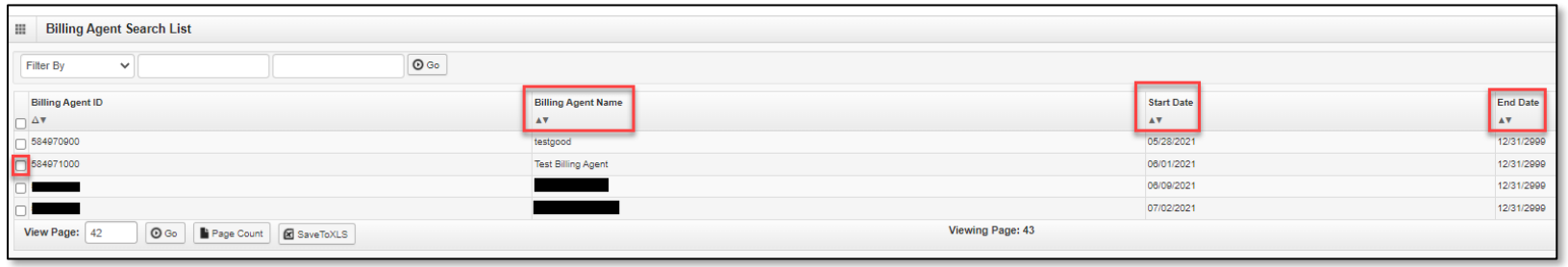
- If you have the BA/CH ID#, enter it, select the association start date and end date, and select '**Ok**'

  OR

- To search for the BA/CH, select '**Confirm/Search Billing Agent**' at the bottom right

© 2021 CNSI

Step 9: Associate Billing Agent (Provider User)



- From the 'Billing Agent Search List', select the appropriate BA/CH.

NOTE: You can filter or use the 'next' and 'previous' buttons at the bottom right to scroll through the list.

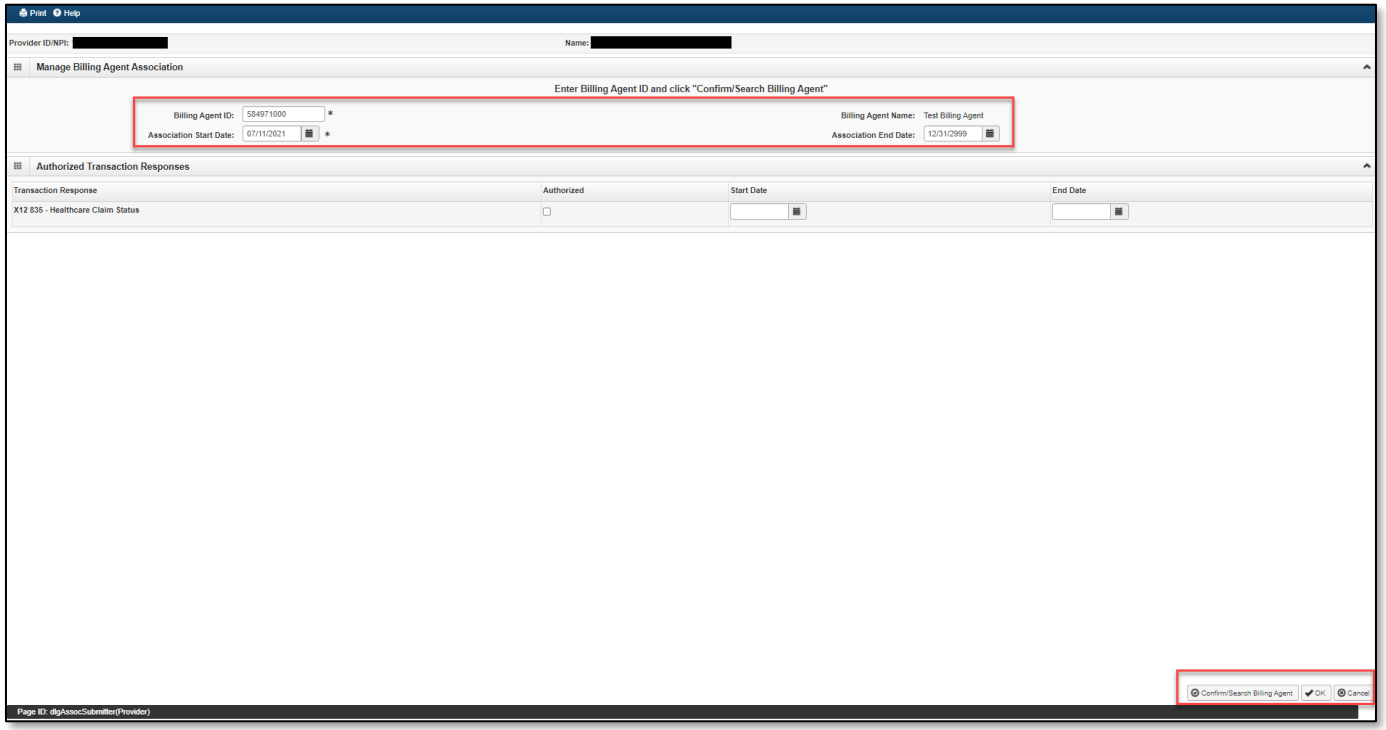
Once we select the checkbox next to the Billing Agent ID we are adding, we select '**Select**'.

For our example, we are selecting the BA/CH of 'Test Billing Agent'. Always confirm the BA/CH's start and end dates cover your service needs.

© 2021 CNSI

Step 9: Associate Billing Agent (Provider User)

Start date is not date of service driven, it means as of 7/11/2021, Test Billing Agent can submit electronic HIPAA transactions on your behalf.



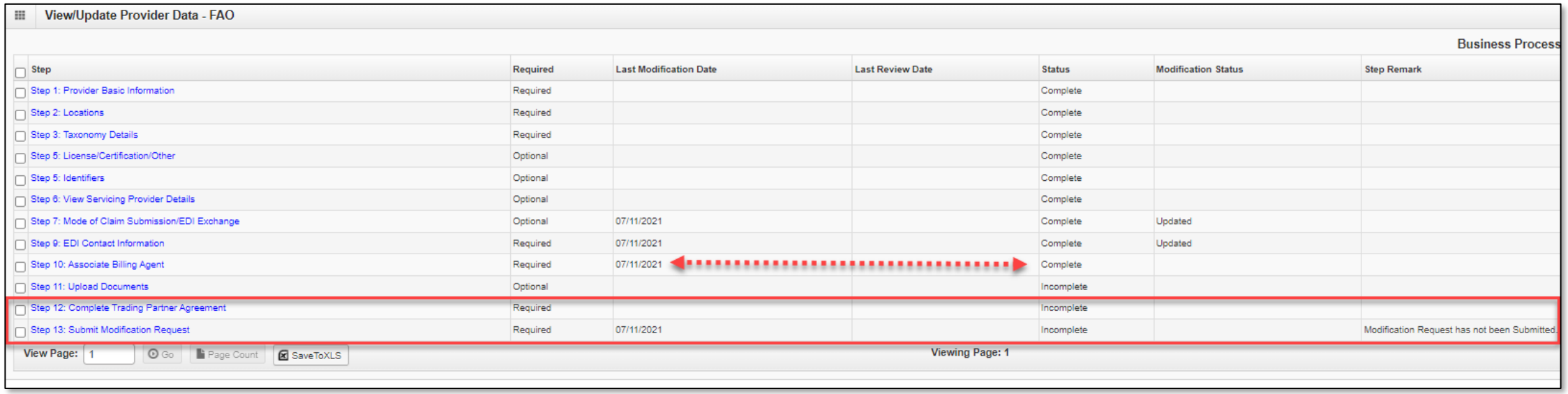
1. The Association Start Date defaults to the date of the update, but you can change it to a future date.
2. If you have a specific end date, update the end date.
3. Once you make any necessary changes or approve as is, select '**Ok**'.

To add another BA/CH, repeat the steps above, otherwise select '**Close**' on the Billing Agent Search page.

© 2021 CNSI

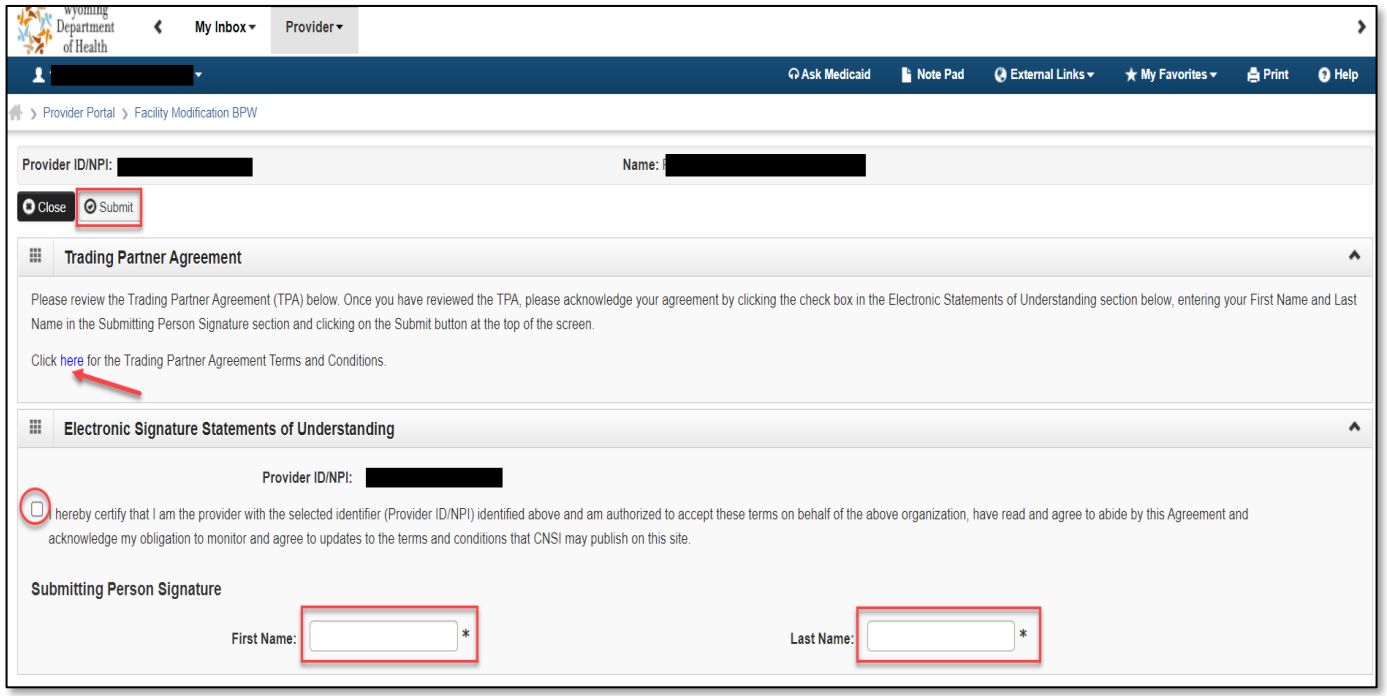
Step 9: Associate Billing Agent (Provider User)

- Step 9: Associate Billing Agent list the modification date and the status is complete
- There are two (2) remaining steps to complete



© 2021 CNSI

Step 11: Complete Trading Partner Agreement (TPA)

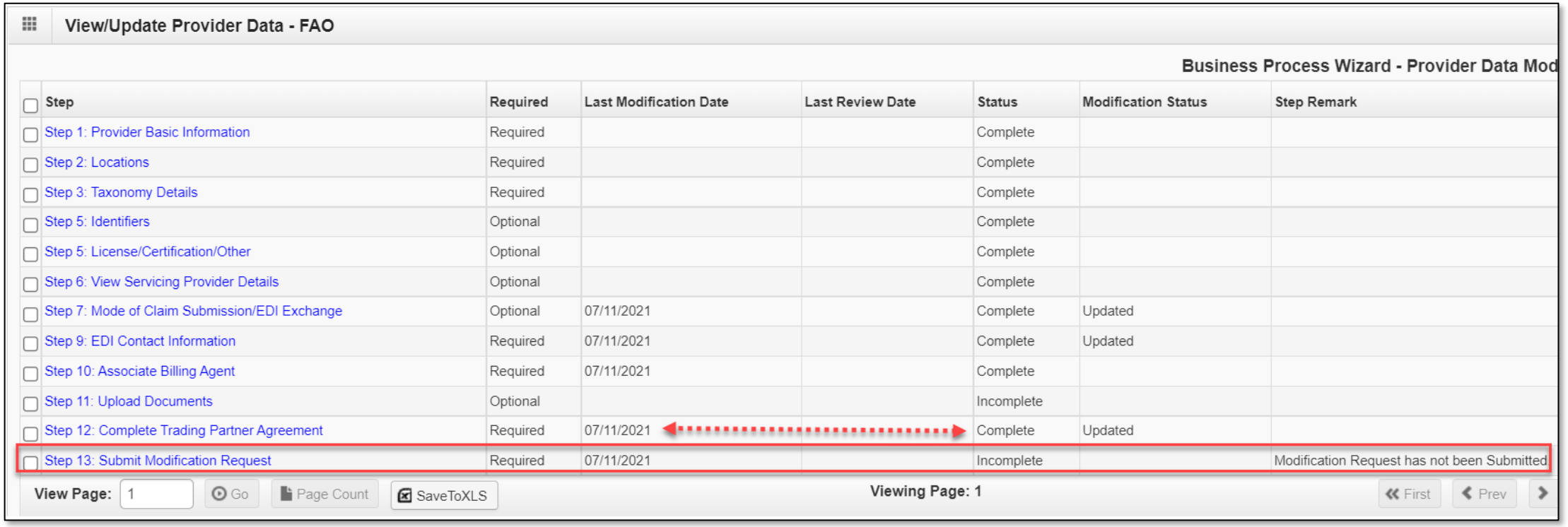


- To complete the Trading Partner Agreement (TPA):
  1. Read the TPA.
  2. Enter your name.
  3. Select '**Submit**' to update.
  4. Select '**Close**' to return to the View/Update Provider Data page.

© 2021 CNSI

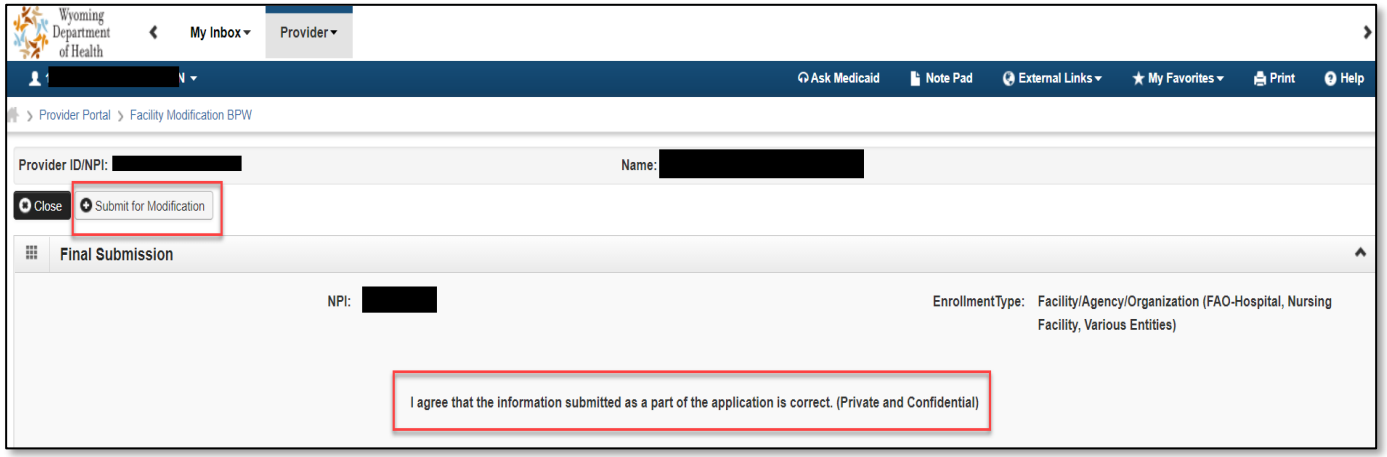
Step 11: Complete Trading Partner Agreement (TPA)

- Step 11: TPA is now complete
- You have one (1) remaining step, which is to submit your modifications



© 2021 CNSI

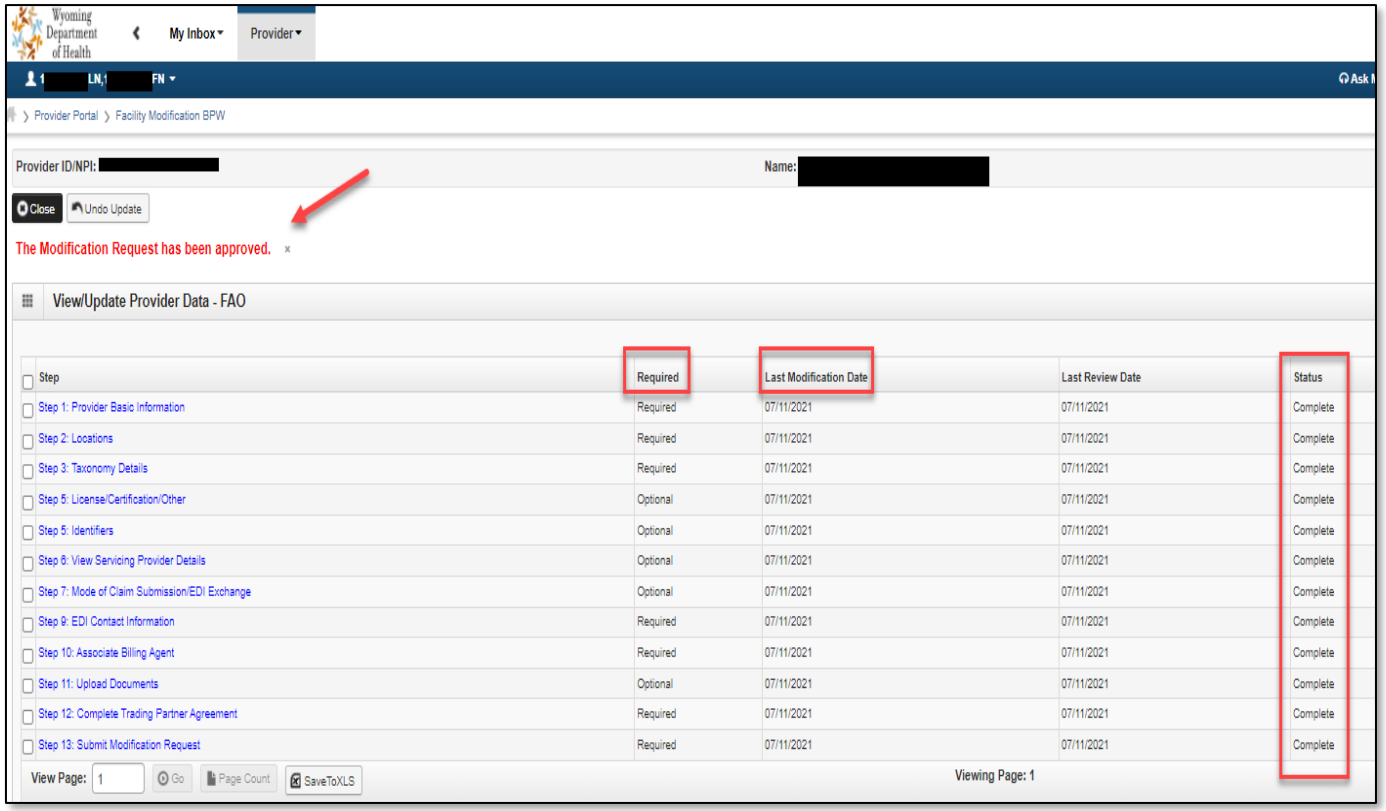
Step 12: Submit Modification Request



- Step 12 is a self-confirmation of the updates made
- Verify the provider's name and provider ID/NPI one last time and select '**Submit for Modification**'

© 2021 CNSI

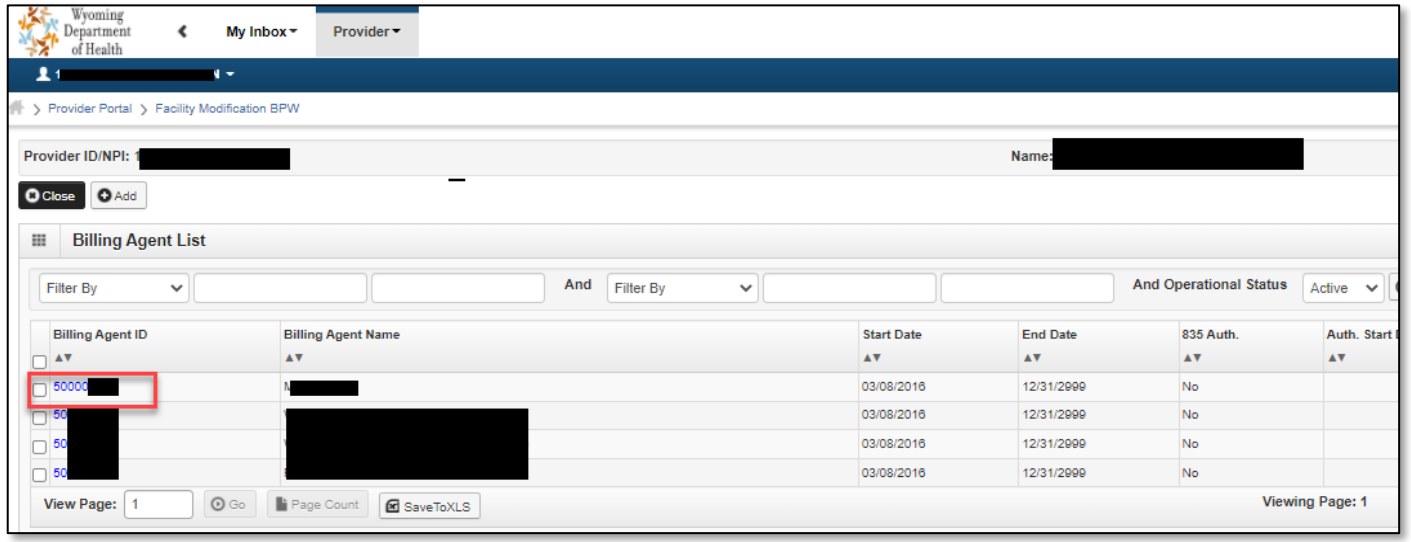
Step 12: Submit Modification Request

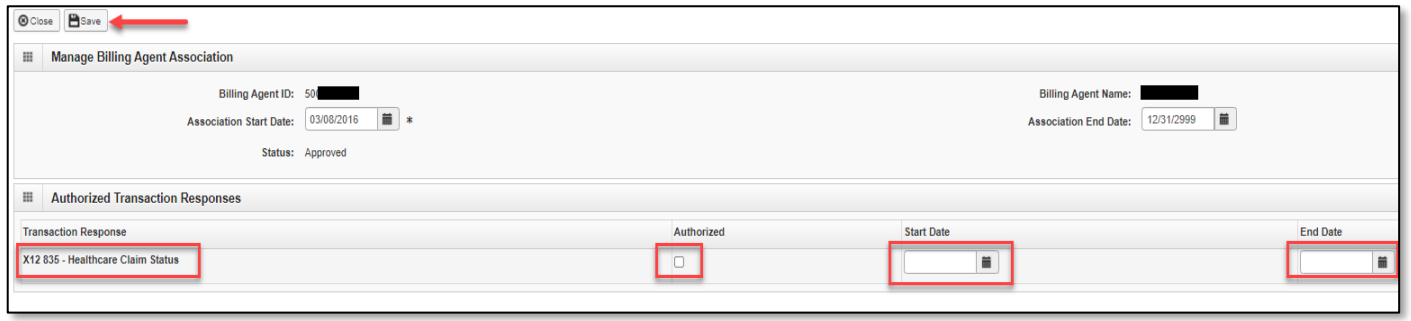


- All required steps are now complete, and your modification approved, select '**Close**'

© 2021 CNSI

Manage CH and BAs (Provider User)





- To have a provider's 835 delivered to a BA/CH they are already associated with, go back into the 'View/Update Provider Data' page and select Step 10: Associate Billing Agent
- From the list of Billing Agent IDs, select the blue hyperlink of the one you want to receive your 835 transactions
- Select the **'Authorized'** checkbox and add a Start Date and End Date.
- Select **'Save'**.

© 2021 CNSI

Provider Portal – Recap and Q&A

- Quick Recap
- Questions & Answers
- Break Time (5 minutes)

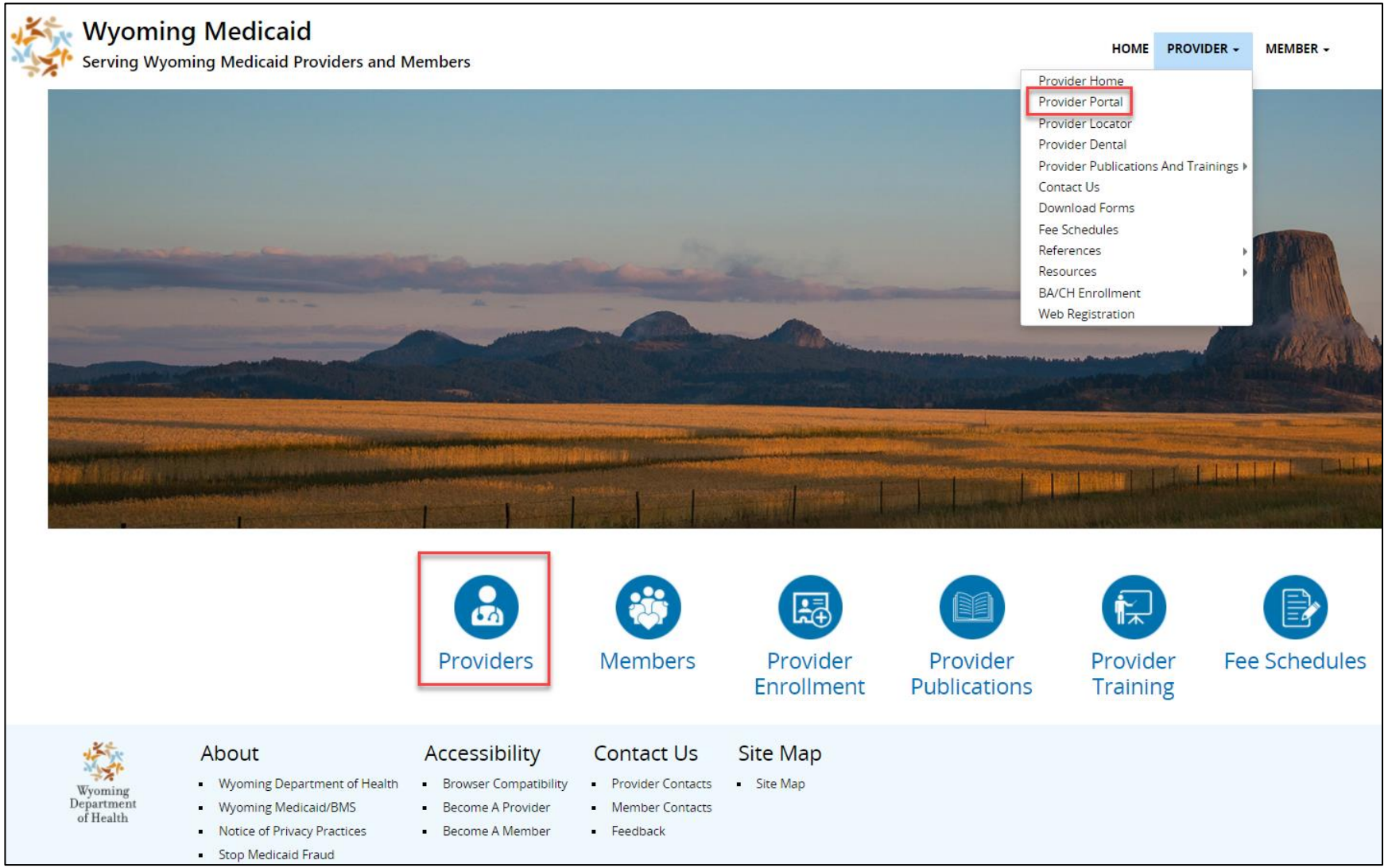
© 2021 CNSI

Password Reset/Forgot Password

URL: www.wyomingmedicaid.com

© 2021 CNSI

Password Reset/Forgot Password



Important! A Password Reset or Forgot Password is used only after providers or users have completed their single sign-on (SSO) and are registered for the Provider Portal.

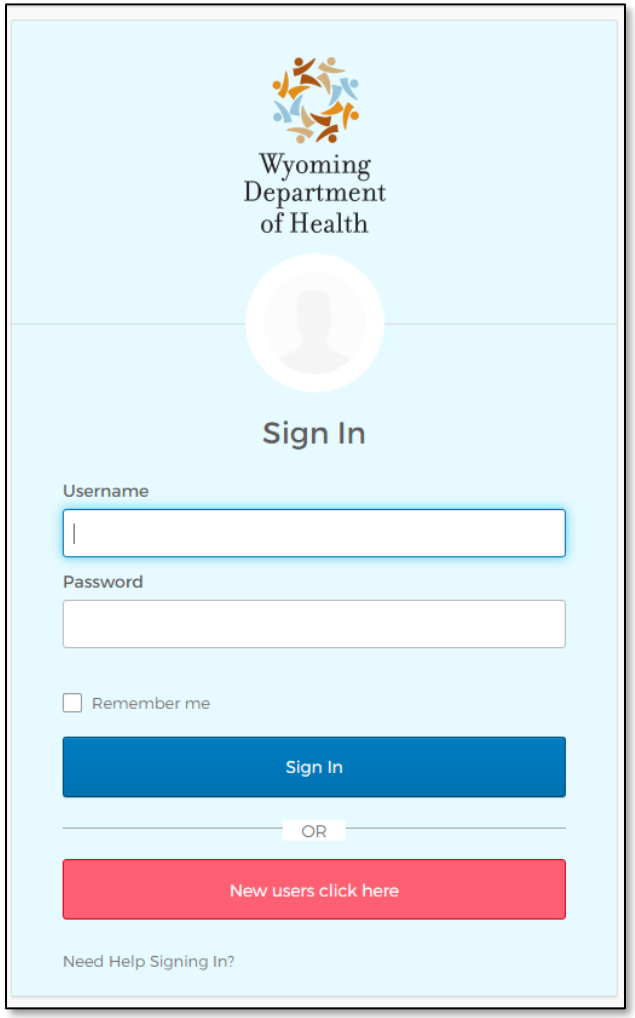
- Provider and BA/CH Web Registration PowerPoint trainings are posted on the website on the Provider Training page.

Wyoming BMS Medicaid Website:
www.wyomingmedicaid.com

- From the drop-down menu, select '**Provider Portal**'.

© 2021 CNSI

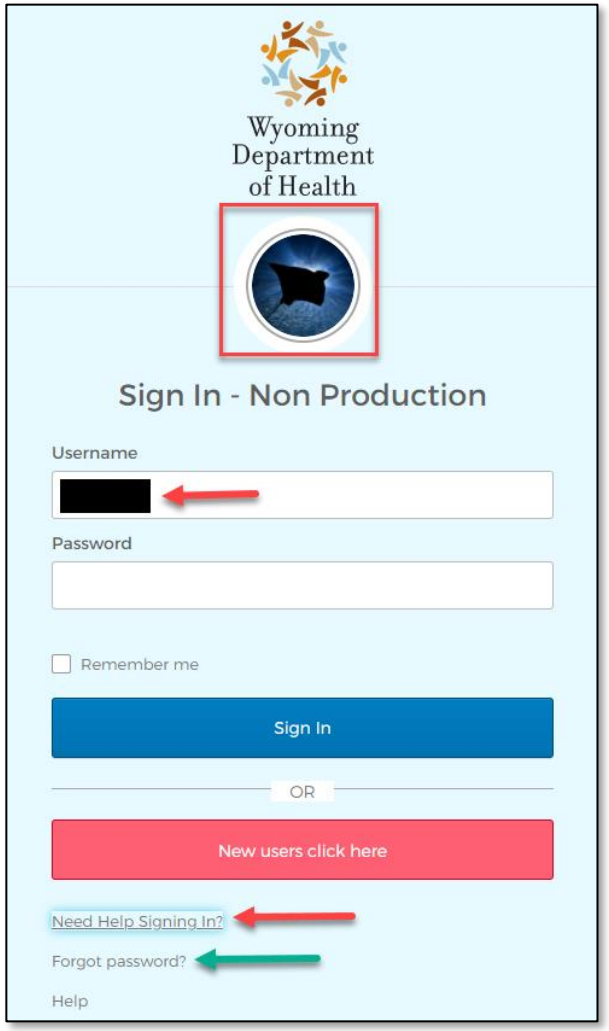
Password Reset/Forgot Password

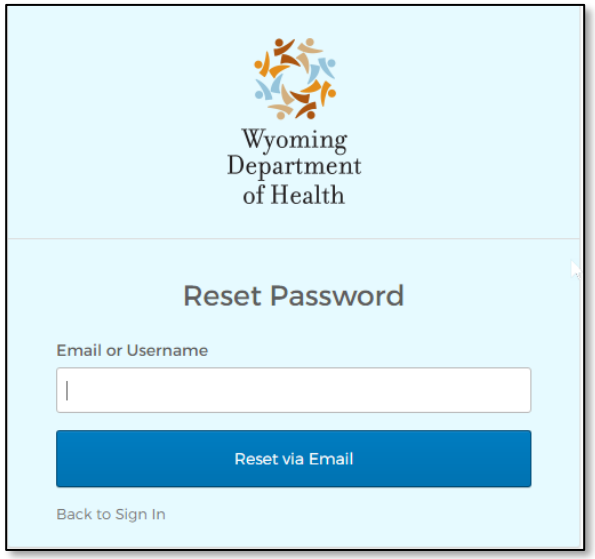


- You are directed to the Single Sign-On (SSO) page
- To request a password reset:
  - Enter your username/user id.
  - If your username is recognized, the Security Image you chose during the registration process displays.
  - Then, select **'Need Help Signing In?'**.

© 2021 CNSI

Password Reset/Forgot Password



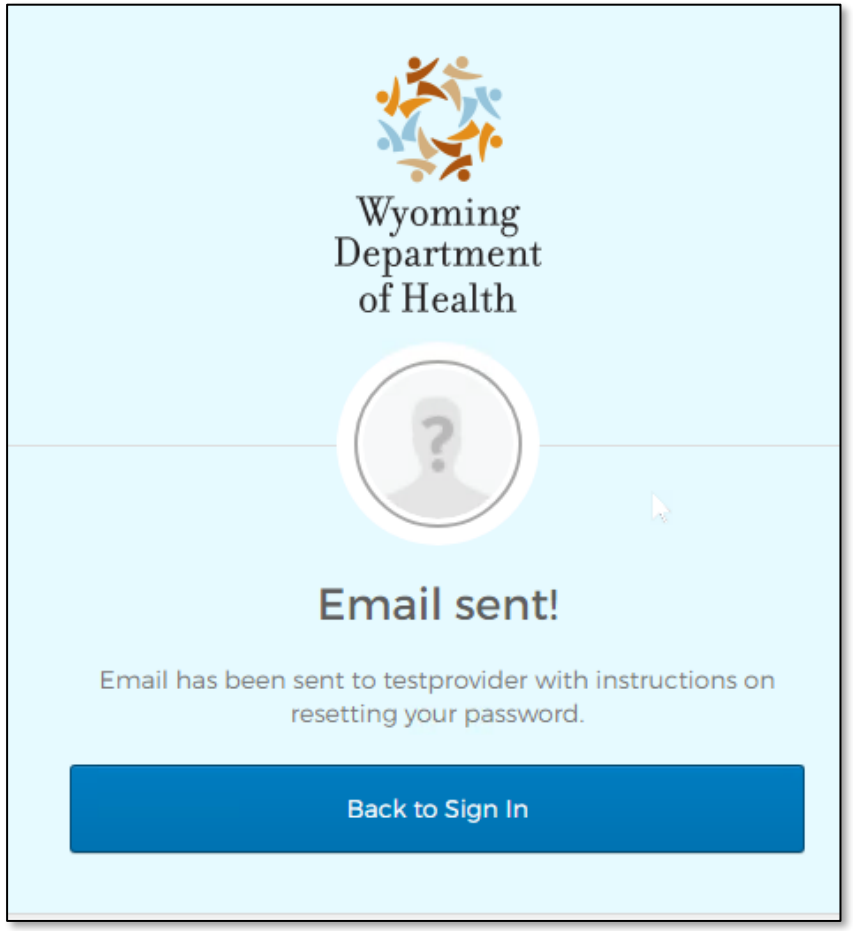


Once you select **'Need Help Signing In?'**, the **'Forgot password?'** message appears.

- Select **'Forgot password?'** to enter your email or username.
- Enter username or email and select **'Reset via Email'**.

© 2021 CNSI

Password Reset/Forgot Password



- Check your email
- Follow the instructions within that Password Reset email

© 2021 CNSI

CMS 1500 Claims – BMS Demo

New Claims Processing System

New BMS Claims Submission

- Providers enter claims directly into the BMS - direct data entry (DDE)
- The data that is entered into the new BMS system is in Real-Time
- Providers can create/save Claim Templates
- Providers can attach documents to their Claims during the DDE process or upload after the claim has been submitted
- Provider Profile: Claims Access

- New Wyoming Medicaid website: https://wyomingmedicaid.com/
  1. Select the **Provider** tab.
  2. Select **Provider Publications and Trainings**.
  3. Select **Provider Trainings, Tutorials, and Workshops** .

PRESM and Eligibility files are updated nightly

© 2021 CNSI

BMS Browser and Version Compatibility

Compatible web browsers and versions:

- Google Chrome – Version 90.0.4430.212 (Official Build) (64-bit)
- Firefox – Version 88.0.1
- Microsoft Edge – Version 90.0.818.6 (Official Build) (64-bit)

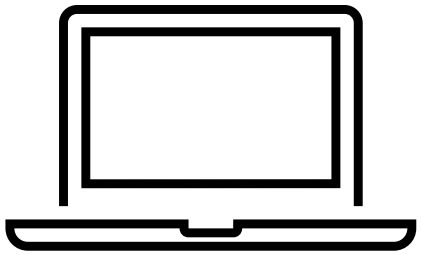
Internet Explorer (IE) is no longer a compatible web browser when visiting either the Wyoming Medicaid website or the Provider Portal

BMS requires the use of “Pop-Ups”, depending on the browser take one of the following actions:

- Update your browser to allow pop-ups
- Turn off your browsers pop-up blocker
- Enable pop-up blockers within your browser

© 2021 CNSI

Live Demo



- Direct Data Entry (DDE):
  - Straight Claim
  - TPL Claim
  - Medicare Claim
- Direct Data Entry (DDE):
  - Straight Claim with attachment
- Upload Attachment separately

- Direct Data Entry of TPL
  - Payer ID is a required field
  - Enter five nines, ‘99999’ only when you do not know the payer ID
- Tertiary claims can be keyed into the Provider Portal

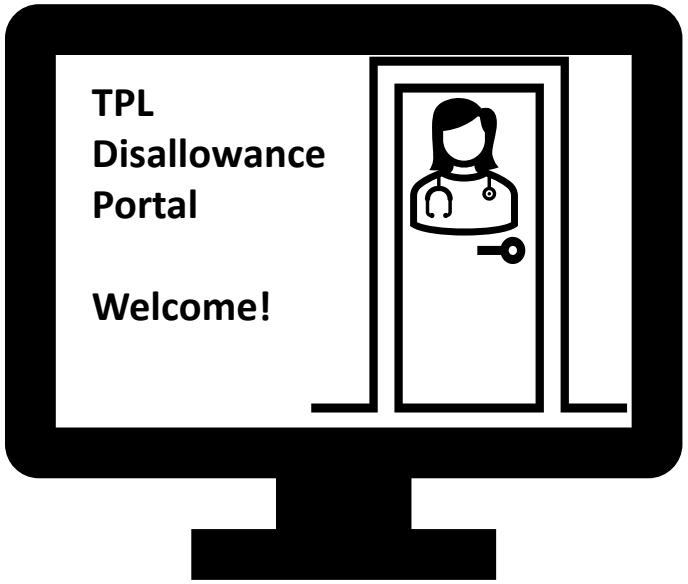
Taxonomy codes are required when submitting claims to Wyoming Medicaid

© 2021 CNSI

TPL Disallowance Portal

Portal Benefits

Features



- A secure web-based application that functions as the primary Point of Contact throughout the claim identification and recovery process
- Providers can access and update contact and claim information utilizing a broad scope of self-service options
- Includes a complete list of patients, claims, and insurance information

© 2021 CNSI

Disallowance Portal – Portal Benefits

- A single dashboard with everything you need to review claims at your fingertips
- Recent Activity – Most recent locations visited within the HMS Provider Portal
- “HMS Newsroom” provides the latest news updates pertaining to HMS
- Accelerated Recoveries
- Increased Accuracy Rates

My Apps:

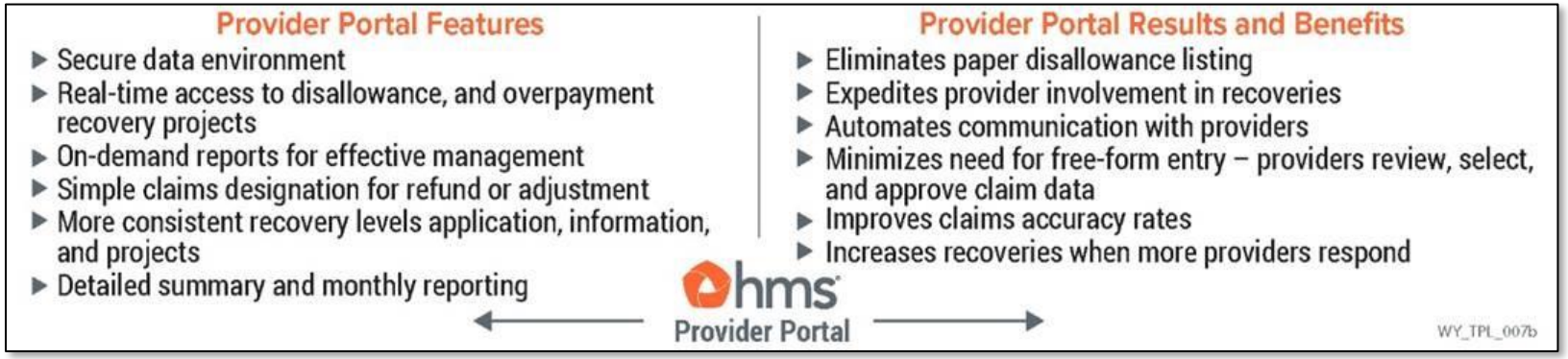
- HMS Provider Portal contains Provider Contact, Audit and Case information
- Product portal where claims are reviewed

My Resources:

- Frequently Asked Questions (FAQs) provides answers to questions you might have
- “Explore HMS” allows you to learn all that HMS has to offer

© 2021 CNSI

Disallowance Portal – Topic Here



HMS Provider Portal also provides:

- Online communication with HMS about claim reviews via email and chat functions.
- Real-time ability to review, status, acknowledgement, report, and upload documentation.
- An easy and efficient self-registration process.
- A paperless system – Decreases PHI risk.

© 2021 CNSI

Question & Answers

© 2021 CNSI

Provider Trainings Being Offered - www.wyomingmedicaid.com

Training Name	Audience	Estimated Training Duration
1500 General	**All providers submitting medical claims** Except Waiver, CME, Taxi/Non-Taxi, Lodging, and IHS providers	3 hours
1500 Waiver CME	**Waiver and CME providers**	2.5 hours
1500 Travel (Taxi, Non-Taxi, Lodging)	**Taxi providers, non-tax (mini bus) providers, and enrolled lodging providers submitting claims for non-emergency medical travel (NEMT)** Except IHS providers	2.5 hours
Open Session Q&A – All Providers	**We will answer any questions regarding the Registration process**. You can enter at any time during these 1 hour sessions - just register and join!	1 hour
UB – FQHC, RHC, ESRD	**FQHC, RHC, and ESRD providers** The dental policy and claims are covered for FQHC and RHC providers.	3 hours
UB – Hospital PRTF, CORF, Home Health Hospice	**Hospital, PRTF, CORF, Home Health, and Hospice providers submitting UB or institutional claims**	3 hours
UB – NH	**Nursing home, Swing bed, and ICF-ID providers**	3 hours
IHS	**All IHS providers**	3 hours
Dental	**Dental providers** Except IHS, FQHC, and RHC providers	3 hours
Web Registration: BA/CH	**Billing Agents and Clearinghouses currently enrolled**	1 hour
Web Registration: Waiver & CME	**Waiver and CME providers**	90 minutes
Web Registration: Single Provider	**All providers with ONLY a single pay-to provider number to register**	90 minutes
Registration: PROV/TPs	**All providers** Except Waiver and CME or BA/CHs	90 minutes

© 2021 CNSI

Email Field Representatives

WYprovideroutreach@cns-inc.com

© 2021 CNSI

Wyoming Department of Health

Thank you

Medicaid Website, Portals, Claims, TPL