



COMMISSIONER
Adelaide Horn

June 12, 2009

To: DADS Long Term Care Services and Supports (LTSS) Providers

Subject: Information Letter No. 09-72
TMHP Remittance and Status (R&S) Report Information

The purpose of this letter is to emphasize the importance and usefulness of the TMHP Remittance and Status (R&S) Report. Providers that do not reconcile their R&S Reports may be billing incorrectly, which can result in audits and penalties. Providers should ensure not only that all billing is accurate, but also that any problems associated with the claim are resolved within the 12- month filing limitation. Repayment of invalid or inappropriate recoupments not resolved within 12 months is subject to the 12-month filing limitation.

As the new fiscal year approaches, it is especially important for providers to review their R&S Reports in order to ensure recoupments on paid claims are valid. Any invalid recoupments for FY 2007 services (September 1, 2006, through August 31, 2007) should be brought to the attention of state office staff so that services can be successfully re-billed prior to this year's August cutoff date for submitting claims prior to the state's new fiscal year. If rebilled after the August cutoff date, the claim becomes a "miscellaneous claim."

Additional detail regarding cutoff dates for FY09 will be provided soon.

Miscellaneous claims occur when the service dates are earlier than two prior fiscal years plus the current fiscal year. Claims for services that are less than eight years old and/or claims that total less than \$50,000 owed to a single legal entity are paid on a first-come, first-served basis using funds appropriated during each legislative session. Miscellaneous claims over \$50,000 and/or for services more than eight years old cannot be paid except as a special line item in the state budget.

Invalid or inappropriate recoupments should be immediately reported to Provider Claims Services 512-438-2200, Option 3 for Nursing Facility, Hospice and ICF/MR services and Option 4 for Community Services.

The following information provides guidance on how to use the R&S Reports for reconciliation purposes. To accurately assess claim activity for the reporting period, all three sections must be used. Electronic R&S Reports should be downloaded weekly. Dates that begin on a Friday through the following Monday should be used to generate a report. Each report is available for 90 days after the date it is generated.

R&S Reports are divided into three sections:

- The *Non-Pending* section contains HIPAA compliance information that is based on the national procedure or revenue codes submitted on the claim. It also lists any adjustments made to the total provider payment. Providers will receive one R&S Report per warrant issued for the reporting period.
- The *Claim Activity* section provides information about all finalized claims and claims still pending processing or payment. Finalized claims that make it through the claims payment process are either approved to pay or denied. The section includes the derived local billing code, units paid, billed amount, paid amount, and other details. Providers will receive only one Claim Activity section per reporting period. If more than one warrant is received in a particular week, the Claim Activity section may correspond to multiple Non-Pending sections.
- The *Non-Pending* and *Claim Activity* sections outline which claims were processed, the national code billed, the local bill code derived, and the payment amount for the services based on the derived bill code. This is the only way to determine whether the system derived the correct bill code for payment.
- The *Financial Summary* section provides warrant information and warrant amounts for the reporting period. The number of warrants issued and, indirectly, the number of non-pending sections to look for, is provided in the Financial Summary section.

Please contact TMHP at 1-800-626-4117, Option 1, with questions about the R&S Reports.

Sincerely,

[signature on file]

Gordon Taylor
Chief Financial Officer

GT: nmp