



Letter from the Director

Maintaining an array of high-quality Medicaid providers is essential to ensuring the success of Ohio's Medicaid program. Ohio's Medicaid Information Technology System (MITS) will support this goal by offering a number of tools and features designed specifically with Medicaid providers in mind. The main avenue for providers to interact with MITS is via the Medicaid Internet Web portal, which will offer access to Medicaid business functions 24 hours per day, seven days per week. This month's newsletter features the new Medicaid claims processing system available via MITS. This new system will improve the efficiency, accuracy, and speed of Ohio Medicaid claims submission, processing and payment.

Although this newsletter focuses on claims processing features that will be implemented with the MITS "Go Live" date in December 2010, I want to remind readers that some Medicaid claims (professional claims submitted on the HCFA 1500) can already be submitted via an early version of the Medicaid Web portal. Providers can use the Web portal to verify Medicaid consumer eligibility and download remittance advice. Readers can get more information about these features by reviewing the July 2008 and October 2008 editions of the MITS News.

I hope you find the June, 2009 edition of the MITS News helpful and informative.

-John Corlett, Ohio Medicaid Director

Improving Medicaid Claims Processing through MITS

MITS will automate and streamline numerous aspects of Medicaid claims processing for providers. New MITS functionality will improve the ease of claims submission, editing and resubmission, and will allow providers to quickly check payment status for previously submitted claims. Medicaid service providers will have 24/7 access via the Internet for "self-serve" features such as:

- Medicaid claims submission including the ability to upload attachments as electronic files;
- "Up-front edits," identifying common claims submission errors and advising providers to make corrections and resubmit, all online via the Web portal;
- Online claims adjustment features, including the original and replacement claims;
- Status reports for submitted claims and/or prior authorization requests;

- A claim "copy" feature that will allow providers to copy (rather than re-type) paid claims in order to submit similar claims for other consumers.

When MITS is fully implemented, Medicaid providers will be able to submit many different types of claims through the Web portal or submit EDI files through billing agents or clearing houses. MITS will allow claims attachments to be easily uploaded as electronic files that accompany and support Medicaid service claims. Attachments will be stored with their respective claims to ensure that supporting information is easily accessible during claims processing. Medicaid claims processing under MITS will eliminate many business processes that are currently paper-driven and will promote efficient, timely and accurate payment of claims and adjustments.

Improving Medicaid Claims Processing through MITS (continued)

MITS will also ensure federal compliance with HIPAA security requirements, including editing of claim files and security precautions to access the Web portal. For example, only Medicaid

providers who are authorized may access a Web portal account, thereby increasing the security of protected health information.

Features and Benefits of MITS Claims Processing

Feature	Benefits
Web Portal Electronic File Submission	<ul style="list-style-type: none"> • Electronic file submission allows claims to be submitted 24 hours per day, 7 days per week. • Providers can utilize the Web portal to submit individual claims, view claims status, and receive a near real-time adjudication decision. • Electronic submission promotes efficient, timely and accurate payment of claims and adjustments. • MITS will contain an easy-to-use "copy" feature that will allow paid claims to be copied and modified when creating new claims, reducing data entry work. • Up-front edits will identify many common claim errors so that providers can be immediately notified of errors and correct them on the spot. • Attachments can be submitted on the Web portal as electronic files.
Adjustments	<ul style="list-style-type: none"> • Claims can easily be adjusted electronically. • Claims history will identify the original claim, and the replacement claims will reflect the adjusted payment amounts.

Frequently Asked Questions about Medicaid Claims Submission

Q Why should I use the Medicaid Web portal to submit claims?

A Using the Web portal is easy, fast and free. Claims will no longer need to be submitted via U.S. mail, speeding up claims submission and processing and reducing provider administrative costs. Claims can be submitted, adjusted or viewed via the Web portal, and attachments can be uploaded as electronic files. Common claim errors will be identified up front so that providers are immediately notified and can make needed corrections at the time of claims submission. Providers can obtain status reports for all submitted claims, eliminating the guesswork of when claims will be paid. Previously submitted claims can be copied and modified for new submissions. Claims submission via the Medicaid or MITS Web portal will offer numerous improvements in efficiency, administrative costs, and timeliness.

Q Can I continue to have Medicaid claims submitted through my billing agent or clearing house?

A Yes, as long as your billing agent or clearing house is authorized to file claims on your behalf.

Looking for more?

For past newsletter issues, FAQs and more information about the Medicaid Information Technology System, log on to the ODJFS Web site: <http://jfs.ohio.gov/mits/info.stm>