

PERMEDION, INC., AN HMS COMPANY

Questions & Answers

Massachusetts Hospital Association
Presentation – October 27, 2009



Preadmission Screening (PAS)

1. Please provide clarification of which Rehab Hospitals will require PAS from Permedion.
Only rehab centers that are contained within an acute hospital facility will be reviewed by Permedion. We will not review the free standing rehab hospitals. Permedion will review the following:
 - a. Southcoast Hospitals Group (St. Luke's, Charlton, Tobey)
 - b. Berkshire Health Care Systems
 - c. Boston Medical Center
 - d. Health Alliance Hospitals
 - e. Noble Hospital
 - f. Sisters of Providence-Mercy Hospital

2. Is a provider able to download a PAS form and fax it into Permedion instead of using the web portal?
Yes, this is a good way to request an Admission Screening. The web link to the form is:
http://www.mass.gov/Eeohhs2/docs/masshealth/provider_services/forms/pas-a.pdf

3. Will Permedion only have one phone number for all questions?
Yes. The phone number to call for all questions concerning Admission Screening, Pre- and Postpayment Review will be (877) 735-7416. Callers will be directed to the appropriate person to assist them.

4. Will assistance be provided if a provider needs assistance with filling out the PAS request form and uploading documents to New MMIS?
Yes. A phone representative from Permedion will be happy to assist a provider with filling out a request from NewMMIS. Also, a provider may call in the PAS request to Permedion.

5. If a provider uses a combination of submitting documents via the provider online service center (POSC) and by mail will this create a duplicate request?
No. This will not create a duplicate request in the system. Permedion will be able to check to see if a request has already been initiated.

6. How long will the PAS number be good for?
The number will be good indefinitely.

7. What if a provider needs a retroactive PAS number or a date needs to be changed for an admission?
Retroactive requests should be directed to Kathleen Mckeown at MassHealth for review. Permedion processes changes of admission dates from the present to a future date.

8. Do acute care transfers that are urgent or emergent require Admission Screening?
No. Only elective, inpatient admissions require Admission Screening.

9. When performing Admission Screening, will the Review Nurses rigidly adhere to InterQual criteria, or will the InterQual criteria be utilized as guidelines in the decision-making process?
Permedion Review Nurses will use InterQual criteria as guidelines. Cases that closely mirror, but do not meet InterQual criteria, will be decided utilizing clinical judgment, Nurse Reviewer to Manager conference, and Nurse Reviewer to Medical Director conference to make decisions that best meet the patients' needs and MassHealth regulations. In the event a Nurse Reviewer questions the Medical Necessity on a case, it is referred to the Physician Reviewer.

Prepayment and Postpayment Reviews

10. Who will be receiving the Medical Request Letters at each hospital provider? Will Permedion be using MassPRO's contact list?

Permedion's database allows for two (2) contact persons per institution. Anuj of MHA has requested that each hospital provider supply Permedion with the name of their preferred contact persons. Permedion does have MassPRO's Contact List, but it will need to be updated. Please send your contact information to the attention of Maryann Allen at Permedion, mallen@hms.com.

11. Will Prepayment Review by Permedion result in a delay of payment?

No. Payment of claims is made by MassHealth.

12. Will Permedion be able to identify codes via NewMMIS that require Prior Authorization in addition to Admission Screening?

Permedion's responsibility is to perform Admission Screening (PAS) only. Permedion will refer providers to MassHealth at (800) 841-2900 for assistance with the Prior Authorization (PA) process. The codes for which Prior Authorization is required during an inpatient elective admission are found in the MassHealth Physician Manual which is online. You may also reference MassHealth Bulletin 137 on this topic.

13. Will our hospital receive 2 letters for each denial determination so that these can be shared with the appropriate departments?

It has been Permedion's process to send only one letter to each facility, assuming that it is the facility's responsibility to forward the letter to others that might need it. Permedion, however, will take this suggestion under consideration and we have determined that this can be done. Permedion will require an updated Contact List (with these 2 contact names) from Anuj at the MHA for this to occur. Alternatively, email your contact information to the attention of Maryann Allen at Permedion, mallen@hms.com.

14. Will Permedion be using a sampling method to select Postpayment and Prepayment claims for review?

Yes, for Postpayment review selection, Permedion data analysis will identify cases per MassHealth criteria. MassHealth determines the selection of records for prepayment review using a sampling method.

15. What will be the process if a hospital would prefer an onsite visit instead of a desk review?

MassHealth's *preferred method* of review is desk review; however, an onsite review will be considered if extenuating circumstances exist. Permedion is sensitive to the numbers of records requested from providers at any given time. The hospital contact person should call Jeffrey Driscoll, Review Manager, at 617-398-1418, or email Jeffrey at jdriscoll@hms.com.

16. What is the process for recoupment of a denied claim?

This process has not changed. MassHealth will void the claim.

17. Will the number of requested medical records be for a large quantity?

Permedion is sensitive to the number of medical records that a provider receives at any one time. We will make every effort to spread out the requests for records for any individual provider but of course this will depend on how many records hit our sampling methodology.

18. Has the rebilling policy changed? Will a provider be able to rebill a denied inpatient stay as an outpatient stay?

This policy has not changed and a provider will be able to rebill a denied inpatient stay as an outpatient claim.

19. Will Mass Health pay for copying fees for medical records?

No, there is no provision for MassHealth to reimburse for copying charges.

20. If a provider receives a “technical denial” or deferral for not producing a medical record, will they be able to send in a “reopen letter” if the medical records is found?
Yes, if the medical record is found, a provider will be able to submit a “reopen letter.” Permedion will review this record.
21. Will Permedion be able to send 3 copies of all denial determination letters (#1 to Medical Records, #2 to Case Management and #3 to Accounting)?
See answer to Question #10. Permedion will take this request under consideration and has determined that this can be done.
22. Will Permedion be able to place the hospital’s patient account number on all determination letters?
Permedion is not sure that as the contractor we would have access to the patients’ account numbers and we will look into this request.

Physician Review

23. Will a physician peer-to-peer conversation occur with all initial denial determinations?
Permedion follows URAC’s guidelines for this process. At the first denial level, a peer-to-peer conversation (physician-to-physician) will be provided for any Admission Screening denial. At the reconsideration level, the physician reviewer will be peer-matched by board specialty and will conduct the reconsideration review; this physician reviewer will make an attempt to speak to the requesting physician. A peer-to-peer conversation is not guaranteed for Pre- and Postpayment Review. However, if a provider feels the need to discuss a case with a like specialist, he/she can call Permedion at 877-735-7416 and a teleconference can be arranged with appropriate peers.