



**CABINET FOR HEALTH AND FAMILY SERVICES
DEPARTMENT FOR MEDICAID SERVICES**

275 E. Main Street, 6W-A
Frankfort, Kentucky 40621
(502) 564-4321 Voice - (502) 564-0509 Fax
www.chfs.ky.gov

Ernie Fletcher
Governor

Mark D. Birdwhistell
Secretary

Glenn Jennings
Commissioner

May 21, 2007

**TO: All *KyHealth Choices* Providers
Provider Letter A-76**

RE: New MMIS-Changes You May Encounter

Dear *KyHealth Choices* Provider:

KyHealth Choices is implementing a new Medicaid Management Information System (MMIS) at the end of May. The new MMIS will provide significant enhancements for providers. Listed below are some changes providers will encounter with the implementation of the new MMIS.

Internet Claim Submission

- To access the new *KyHealthNet*, you must have a single sign on account (not the same User ID you use to access *KyHealthNet* currently). PIN letters have been sent to all active providers, with instructions for activating the single sign on account. If you have not activated your account and require assistance, please call the Electronic Claims help desk at 1-800-205-4696 or send inquiries via email to KY_EDH_Helpdesk@eds.com. Note that you will be required to change your account password every 30 days.
- The new *KyHealthNet* has a "claims wizard," which offers interactive screens that walk you through the claim submission process.

Immediate Claim Adjudication on Internet Claims

- Claims submitted via *KyHealthNet* will be adjudicated immediately, and provide a real-time response. This will allow you the opportunity to correct denied claims, and resubmit them immediately.

(Please see reverse side)

HIPAA-Compliant Electronic Claims Transactions

- Providers submitting 837P transactions will submit the notes data on claim details, not on claim headers. This change only applies to providers in certain programs (Transportation, Preventive Care, School Based, EPSDT, Community Mental Health), and providers who submit EPSDT Referral Codes or Vaccine Codes. Refer to the 837P Companion Guide available at www.kymmis.com for more information.

Prior Authorization/Peer Review

- Inpatient facilities will no longer be issued 8-digit PRO numbers for inpatient certification. Ten-digit Prior Authorization numbers will now be issued for inpatient certification and claims will be edited to ensure the services billed match the services authorized.

New Claim Forms

- New claim forms (UB-04, ADA 2006, and the new CMS 1500) have recently been implemented. Refer to www.kymmis.com for updated Billing Instructions.

National Provider Identifier

- Instructions for submitting claims with a National Provider Identifier (NPI) will be available at www.kymmis.com on May 19, 2007.

Remittance Advice Statements

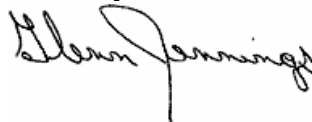
- The *KyHealth Choices* Remittance Advice statements will be formatted differently. Sample Remittance Advice pages with corresponding explanations are included in the new Billing Instructions. Refer to www.kymmis.com for updated Billing Instructions.

Provider Call Center

- The provider relations call center staff is available to answer questions at the same phone number – 1-800-807-1232. You may send inquiries via e-mail to KY_Provider_Inquiry@eds.com.

We are making every effort to make the transition a smooth one for providers. If you have any questions, call provider inquiry at 1-800-807-1232.

Sincerely,



Glenn Jennings
Commissioner