Upcoming Enhancements to the LTC Claims Management System

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Texas Medicaid & Healthcare Partnership (TMHP) is planning significant enhancements to the Long Term Care (LTC) Claims Management System on April 29, 2016. These enhancements are designed to more closely align the TMHP claim systems with those of the managed care organizations (MCOs), and therefore potentially reduce the amount of claim denials and rejections.

If a third party vendor is used for claims submission, it is the responsibility of the provider to notify those vendors about the upcoming changes to the Claims Management System so that software updates can be made if needed.

When these enhancements are implemented, the following changes will be reflected in the claim submission process:

- A validation will be added to ensure that an *International Classification of Diseases*, Ninth Revision, (ICD-9) External Cause of Injury code or ICD-10 External Cause of Morbidity code is submitted in the third diagnosis field in both TexMedConnect and the TMHP Electronic Data Interchange (EDI).

- A modification will be made to the Other Insurance (OI) submission validations in TexMedConnect and EDI to allow entry of the Employer Name or Group Number, but not both.

- Based on the value contained in the provider file (Billing NPI [National Provider Identifier]), the Tax ID will auto populate in TexMedConnect.

- A heading for Tax ID will be added in TexMedConnect.

- A validation of the Attending Provider NPI field will be added in both TexMedConnect and EDI.

- Additional edits will be added to reject or deny claims submitted with dates of service (DOS) spanning both fee-for-service and managed care segments. Providers must submit separate claims for fee-for-service DOS and managed care DOS.

TMHP will continue to update providers about these enhancements through articles on the TMHP website at www.tmhp.com.

For more information, call the LTC Help Desk at 1-800-626-4117, Option 1.