ValueOptions® Maryland Update October 12, 2009

MAPS-MD/ValueOptions® Maryland Authorization Conversion: All the authorizations, beginning from 10/1/2004 have been downloaded in the ValueOptions® system. However, providers are able to view only the open authorizations processed by MAPS-MD that span 9/1/2009 and OMS authorizations within 100 days of 9/1/2009.

Moving between Screens in ProviderConnect: Providers are advised to use the "next" and "back" buttons in ProviderConnect (not the browser back button) to avoid losing data entered in the screens. However, if the provider changes the "type of service", the data previously entered on the next screens will be deleted and must be re-entered.

Late Charges: Inpatient facilities must use <u>bill type 117</u> to bill for late charges. The late charges should be submitted as a corrected claim and the original claim will be reversed and reprocessed for payment. If multiple parts of a split claim require late charge entries, a corrected claim for each part of the split claim.

Place of Service (POS) Clarification:

<u>PRP</u>: When submitting a claim form to report encounters, providers should use only the following POS codes:

- 15: off-site encounters
- 52: on –site encounters

<u>Mobile Treatment</u>: When submitting claims for services, Mobile Treatment Providers must use only the following POS codes:

- 12 home
- 15 mobile
- 11- Office

Supported Employment (SEP): When submitting claims for SEP, must use the following codes

- 11 Office
- 15 Mobile Unit
- 99 Unlisted

Providers must use the PRP encounter codes (15, 52) when reporting SEP/PRP encounters.