

HSM UPDATE

QUARTERLY BULLETIN



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Newsletter Format Changes for HSM

HealthSystems of Mississippi (HSM) introduces HSM UPDATE as its quarterly bulletin. This publication will contain the latest information concerning utilization review for inpatient acute hospitals, psychiatric residential treatment facilities, private duty nursing, home health agencies, and durable medical equipment companies.

HSM UPDATE will also announce HSM policy or process changes, holiday closings, business hour changes, scheduled workshops and more.

HSM continually strives to provide up-to-date, accurate information regarding the utilization review process to Medicaid providers throughout Mississippi. It is our hope that readers will greatly benefit from the information presented in these quarterly bulletins.

Please distribute the HSM UPDATE to quality improvement/assurance, utilization and administrative personnel.

Statewide Meetings... A Success!

HealthSystems of Mississippi would like to thank all the providers who participated in the statewide provider training workshops held on June 25th, 26th, and 27th. It gave the HSM staff an opportunity to meet and talk with the providers we serve on a regular basis. The sessions contained information targeted for Hospitals, Home Health and Durable Medical Equipment providers. These educational workshops were held in Tupelo, Jackson, and Biloxi with approximately 375 attendees.

If you were unable to attend one of these sessions and would like more information or if you would like to schedule a workshop at your facility, please contact the HSM Education Department at 601-360-4961. If you have questions concerning HSM policies and procedures, call our HSM Help Lines: Inpatient Help Line 601-360-4949 or Home Health/DME Help Line at 601-360-4888.

Highlights of Revised DOM Policy

The Division of Medicaid (DOM) has revised the Durable Medical Equipment (DME) Policy/Criteria and Forms that became effective July 1, 2002. A few of the changes are highlighted below.

- ◆ Certification – is a condition of reimbursement and NOT a guarantee of payment. All DME, Orthotics & Prosthetics and medical supplies must be certified.
 - ⇒ Certification - DME requests that are submitted to HSM within 30 days of delivery on the appropriate forms with required documentation.
 - ⇒ Precertification – DME requests that are submitted to HSM prior to delivery.
- ◆ Volume ventilators may be certified for rental only.
- ◆ Diapers for beneficiaries 3 years - 20 years of age may be certified for up to 12 months with documentation from the physician.
- ◆ Apnea monitors may be certified for 6 months rental, and then recertified in 3 month intervals.
- ◆ For all E1399 items, an invoice is required. Catalog pages **ARE NOT acceptable**.

Do you have questions concerning HSM's
DME policies or procedures?

Call our DME Help Line

601-360-4888

8:00 a.m. – 5:00 p.m.

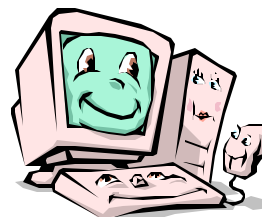
Monday through Friday

NEW... DME Quality Review

Effective July 1, 2002 HealthSystems of Mississippi (HSM) implemented the Durable Medical Equipment (DME) Quality Program as required by the Division of Medicaid (DOM). HSM will be performing Quality Review on those cases that are randomly selected for the 5% Quality Sample for all DME Providers contracted with DOM. The purpose of this activity is to ensure that services provided to Medicaid beneficiaries meet professionally recognized standards and to validate the information provided during certification with supporting documentation in the medical record/provider chart. The first request for submission of records will be mailed October 1, 2002.

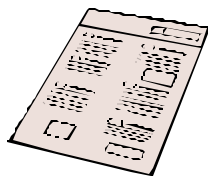
Provider information packets were mailed June 26, 2002. If you did not receive your Quality Information Packet or if you have any questions regarding the implementation of this program, please call HSM, DME Help-line, Bobbi Bobbitt at 601-360-4888.

To obtain a copy of the **Division of Medicaid's REVISED** manual go to the Division of Medicaid's website:
www.dom.state.ms.us



Note: you must download the newest version of
Adobe Acrobat reader

Announcing New/ Revised Inpatient Forms



Effective 07/01/02, HSM's Inpatient Department implemented new/revised review request forms. These forms were distributed during the June statewide Inpatient workshops. If a provider did not attend one of the sessions and needs a copy of the new/revised forms, please fax a written request including name of individual requesting the forms, provider number, name of facility, and mailing address.

In addition to revised forms, there is a new "Additional Medical Information" form. The Additional Medical Information form should be used for the following circumstances: 1.) Serves as an *attachment* to the Admission Review Form or Concurrent Review Form when space is needed for additional information. 2.) Serves as an HSM form to submit requested additional information required to complete the review process (pending review).

For questions or further assistance, you may call our Inpatient Help Line at (601) 360-4949.

PRTF Providers



PRTF Precertification Review Revisions

Effective July 1, 2002, all Psychiatric Residential Treatment Facility (PRTF) out-of-state admissions requests submitted to HSM for precertification review must be accompanied by a completed Out-of-State Referral Form for each applicable in-state facility. Review requests should be received by HSM seven (7) working days prior to the admission. A separate form must be completed by each in-state facility that offers the necessary specialized program required. Review activity will be suspended until all required information has been received.

Please do not hesitate to contact HealthSystems of Mississippi directly for questions or if additional clarification is required. You can reach the Help Line, Monday through Friday 8:00 a.m. to 5:00 p.m., at 1-601-360-4949.

Helpful Review Hints

The following tips will help ensure a complete and timely review process.

PRIVATE DUTY NURSING

- ◆ For a concurrent review, submit **ALL** nurse's notes for the last review period/month no later than 5 working days prior to the last day certified.
- ◆ Review the PDN monthly date calendar to determine the required time period for submission of ALL nurses notes.
- ◆ Indicate if a shift was NOT staffed and the reason why.

Note: Nurse's notes are reviewed for the following:

- Clinical changes
- Changes in level of acuity
- Possible quality issues

HOME HEALTH

- The Home Health certification request form must be filled out to its **entirety**
- Make sure ALL writing is LEGIBLE
- Send all required attachments with the completed form (assessments, physician's orders, nurse's notes)
- List medications including all changes
- Include lab results
- Be SPECIFIC with documentation (why is home care needed?)

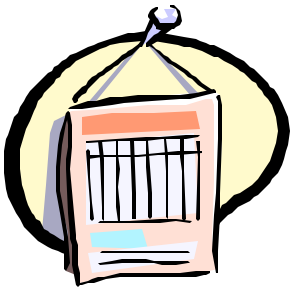




HealthSystems
OF MISSISSIPPI

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WE'RE ON THE WEB
WWW.HSOM.ORG



Upcoming Workshops

Tuesday, September 10, 2002

DME Provider Workshop
Location: HSM (Jackson, MS)

Tuesday, October 1, 2002

DME Provider Workshop
Location: HSM (Jackson, MS)

To register for one of the above workshops, please call HSM's Education Department (601) 360-4961. You must register to attend. Register early. Space is limited.

HSM's Holiday Schedule



As a reminder, our offices will be closed for business in observance of the following holidays:

Monday, November 11, 2002
Veteran's Day

Thursday, November 28, 2002
Thanksgiving Day

Wednesday, December 25, 2002
Christmas Day