

Provider Update

Interim hospital inpatient claim processing

Summary: Amerigroup* is improving our process for inpatient interim claim processing. This will be applied to all inpatient claims for Medicaid (STAR and STAR+PLUS) and CHIP.

★ **What this means to you:** Effective February 8, 2016, Amerigroup is changing interim inpatient claims processing to minimize repeated reprocessing and adjustments.

Currently, Amerigroup processes all interim inpatient claims, regardless of payment methodology (e.g. DRG, Cost to Charge) and hospital type (e.g. Children's). As each interim claim is received, Amerigroup processes the claim, which creates a back and forth between payment and recovery of previously paid claims. This increases the administrative burden for providers, their reconciliation process, and the Amerigroup process for claim payments and recoveries. The refined process will significantly reduce those unnecessary and often confusing burdens.

Effective February 8, 2016, a hospital may submit a claim to Amerigroup before the member is discharged, but only the *first* claim for that member will be reimbursed. Subsequent claims for that stay will be paid zero dollars until discharge. When the member is discharged and the hospital submits a final claim, Amerigroup will recover the first payment and issue a final payment in accordance with your contract or state-required reimbursement. This method allows Amerigroup to ensure all accurate calculations for potential outlier payments or any other applicable calculation is applied. This process is consistent with the Texas Provider Procedures Manual Section 6.1.4 Claims Filing Deadlines.

What if I need assistance?

If you have questions about this communication, received this fax in error or need assistance with any other item, contact your local Provider Relations representative or call Provider Services toll free at 1-800-454-3730.

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