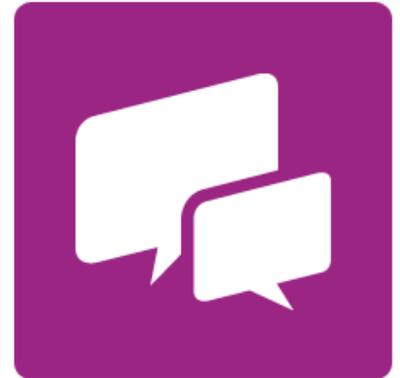# Preparing for the New MMIS Implementation
Frequently Asked Questions

Alaska Medicaid Health Enterprise is going live on October 1, 2013. All active providers enrolled in the Alaska Medical Assistance Program received a letter dated July 15, 2013 announcing Alaska Medicaid Health Enterprise (Health Enterprise) will go live October 1, 2013.

General Information

Why is the current MMIS being replaced?
The current MMIS is more than 20 years old. Adoption of technology that has been developed since it was created will offer vast improvements in business processes for Alaska Medical Assistance program and its enrolled providers. Additionally, federal regulations require states to periodically re-procure an MMIS to improve efficiency.

When will Health Enterprise be live?
October 1, 2013.

What happens to all my information on the old system?
We are converting and transferring your historical data from the legacy MMIS to Health Enterprise so that it will be available when Health Enterprise goes live on October 1.

When will there be more information?
Watch for additional communications from now until October 1, including mailings, web postings, remittance advice banner messages, newsletter articles, and e-mails.

Is the Fiscal Agent changing?
No. Xerox will continue to be the Fiscal Agent for the Alaska Medical Assistance program.

Key Dates and the "Blackout Period"

Will this transition impact me?
Yes. Several actions and key dates were identified in the letter. There are steps you must take to prepare for the transition to the new system. There are also steps you should take to prepare for using Health Enterprise.

What are some of the key dates that I need to know?

Date	Event
August 15, 2013	Last day for submission of new provider enrollment applications Last day for submission of changes to provider records
September 3, 2013	Last day for the submission of adjustments to claims
September 10, 2013	Last day for the submission of paper claims to Xerox
September 16, 2013	Last day for the submission of electronic and Payerpath claims to Xerox
September 17, 2013	Final financial cycle in legacy to process all claims received by the September 16, 2013 deadline; claims not paid will be denied
September 26, 2013	Last day for submission of hard copy service authorization requests to Xerox
September 27, 2013	Last day for submission of online travel authorization requests to Xerox

How can I make sure that my information is accurate?
Visit the Provider Enrollment Portal (https://enroll.medicaidalaska.com) before August 15 to verify that your information on file is correct. It is especially important to verify that your banking information is accurate so that you can take advantage of the new Electronic Funds Transfer (EFT) feature for direct deposit.

What do you mean that September 10 and 16 are the last days to submit claims?
There is a short period of time that is a "blackout period" or gap where you will not be paid for any claims that are submitted. This blackout is necessary to complete the transition to Health Enterprise. For paper claims, the cutoff date is September 10. For electronic and Payerpath claims it is 4:00 pm on September 16. A final payment cycle will be processed on the old system on September 17th. You will receive payment for claims that successfully process.

What happens to claims that are submitted by the deadlines but do not process due to errors?
Claims that do not process will be denied and returned to you for **resubmission** on the new Health Enterprise system. They will not be pended and held.

What does the "blackout period" mean to me?
Because you cannot submit claims during the blackout period, you could experience a gap in the receipt of regular claims payments. There will be a period of time where you will not be able to submit claims to the legacy MMIS and you must wait for Health Enterprise to go-live.

How can I reduce the impact of the "blackout period"?
Knowing this far in advance will help you prepare. You should keep your billing as current as possible so that as many of your claims as possible are paid before the cutoff dates. You should also prepare for the gap in processing claims during the last few weeks of September and the first weeks in October.

When will payments start being paid from Health Enterprise?
Health Enterprise will begin to process claims on 10/4/2013 and the first check and EFT payments will begin 10/8/2013.

Are the claim cutoff and processing dates changing?
Yes. The permanent payment cycle schedule is changing to a cutoff for claims receipt on Thursday, with payments issued on Tuesday.

New Medicaid Identification Number

Will I receive a new Medicaid Identification number?
Yes. Your new Medicaid ID will be mailed to you in early September. You will need to use this for all claims submitted with a date of service of October 1, 2013 forward.

Can I still use my current Medicaid ID?
You will need to use your current Medicaid ID for any claims submitted with a date of service up to September 30, 2013. If you submit claims using your NPI number currently, you may continue to submit with your NPI for claim dates of service after October 1, 2013 as well.

Training

How do I learn about how to use Health Enterprise?
Extensive computer-based training is available on the Alaska Medicaid Learning Portal at https://learn.medicaidalaska.com. Start with an overview of the system and then go from there. WebEx training will also be available. A schedule will be posted to http://medicaidalaska.com when it becomes available in August.

Access and Organization Administrators

How do I access Health Enterprise?
The Internet website address will be the same one you use now: http://medicaidalaska.com. But the look will change to be the new Health Enterprise portal beginning October 1.

What are the provider benefits of Health Enterprise?

Several! There will be a web portal available 24 hours a day/7 days a week where you can perform tasks online such as:

- Submit claims
- Submit service authorization requests
- Perform member eligibility inquiries
- Inquire on the status of claims and service authorizations

Will I be able to submit claims myself through the Health Enterprise web portal?
Yes. Beginning October 1, you will be able to submit claims online. You can also build templates for frequently used procedures or patients to simplify and streamline entry of data. Computer-based training is available on the Alaska Medicaid Alaska Medicaid Learning Portal at http://learn.medicaidalaska.com that provides an overview of online claims, explains how to submit claims, and describes how to build templates.

Do I have to do anything special to get access to Health Enterprise?
You will need to have a User ID and password to take advantage of the new online features. You should identify an organization administrator to issue User IDs and passwords to appropriate staff members. The organization administrator login and temporary password will be mailed in September.

What is an Organization Administrator?
The Organization Administrator is an individual designated for your office or facility that is responsible for granting access and establishing permission rights to Health Enterprise to other members of your staff. Having a User ID and password is what will enable members of your staff to check eligibility, submit service authorizations, submit online claims, and access your remittance advice online. To learn more, computer-based training is available on the Alaska Medicaid Alaska Medicaid Learning Portal at https://learn.medicaidalaska.com.

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Automated Voice Response System (AVRS)

Will the automated voice system change that I use for inquiring on member eligibility?
Yes. A new AVR system is also going live on October 1. The new AVR has more features, including inquiries for:

- Claim status
- Remittance advice information
- Service authorization status
- Member eligibility
- Physician fee schedule
- Service limits

How do I learn more about the enhanced Automated Voice Response system?
An overview of the new AVR is available in a computer-based training module on the Alaska Medicaid Alaska Medicaid Learning Portal at http://learn.medicaidalaska.com.

Is the telephone number to access the voice system going to change?
Yes. The new telephone number will be mailed to you in September with your new Personal Identification Number (PIN).

Provider Re-enrollment

I forgot to submit a re-enrollment application. Is it too late?
Yes. The cutoff was June 30, 2013 to submit a re-enrollment on the Provider Enrollment Portal (PEP). You will need to enroll in the program as a new provider beginning October 1, 2013. The one exception is if you initially enrolled in the program after August 2010 using the online portal (PEP).

What happens if I did not re-enroll?
In August you will receive a notice of your disenrollment in the mail. If you do not have an approved provider re-enrollment application, your claims submitted for service dates on or after October 1, 2013 will deny until a new enrollment application is approved.

I submitted a re-enrollment application. What is happening now?
Re-enrollment applications that have been submitted are being reviewed by Xerox so that they can be approved prior to October 1, 2013.

Trading Partners

Do I have to do anything if I use a billing service/trading partner to submit transactions?
Yes. If you use a trading partner, including a clearinghouse or billing agent to submit and/or receive electronic transactions on your behalf, you will need to make sure that your clearinghouse or billing agent has an approved trading partner application. You should verify that your trading partners are testing transactions to obtain certification with Health Enterprise.

Do trading partners/ billing services or clearinghouses need to prepare for Health Enterprise?
All trading partners currently submitting X12 electronic transactions to the MMIS are required to complete end-to-end certification testing in order to submit transactions in the new Health Enterprise system. Testing will begin in August. Xerox will notify all trading partners of testing requirements and monitor successful completion.

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