

Bulletin ID: No. 17 - Urgent Reminder Notice

Please be advised that December 31, 2006 is the cut-off date for all first-time claims submitted for processing with dates of service during Fiscal Year 2006 (10/1/05 – 9/30/06). After December 31, 2006, DMH will accept and process only re-submitted claims for services rendered during Fiscal Year 2006 that were denied during the adjudication process and returned to the provider for re-work. Please note that this cut-off relates to claims for services rendered during Fiscal Year 2006; DMH will continue to accept claims for services rendered during Fiscal Year 2007 (10/1/06 – 9/30/07).

Please note that through December 31, 2006 the Department will accept FY 2006 claims with authorizations that were denied for the following reasons:

- Authorization request received after authorization period
- Expired insurance
- Invalid number of units for the date, range and frequency
- Multiple open treatments that exist for a request
- Overlapping existing authorizations
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If the authorization plan where the denied service exists has an authorization plan number, please place that number on the claim. If the authorization plan where the denied service exists does not have an authorization number, submit the claim without the authorization plan number.

Please be advised that the Department will only pay for claims up to the FY 06 task order amount.