**Important news:** An electronic submission process for Office of Medical Assistance Fee for Service (FFS) and the Office of Long-Term Living’s (OLTL) and LTC 180-day exception requests and other claims requiring documentation is available in the Promise Portal.

The electronic submission process will allow FFS and OLTL providers to request an Attachment Control Number (ACN) number and then upload the supporting documents. The upload should include the supporting documents for the justification of the request not just the ACN request page.

This process is for new claims only not adjusted claims.

Each claim submission online or via mail will require one ACN or one 180-day detail page, one claim submission, supporting documents for that specific claim and a signature transmittal if required.

OLTL recommends that professional claims submitted through this process have a single detail line that spans a date range which includes the dates that services were provided. Claims submitted with multiple detail lines could deny if only one detail line suspends.

### Updated PROMISe screens to upload supporting documents

- Providers have the ability to upload documentation supporting a claim submission via the electronic Provider Portal.

- Access the provider portal here: [PROMISe™ Internet Portal > Home (state.pa.us)]

  - Attachments should be no larger than 5MG and there is a limit of 3 files. Files need to be uploaded in a PDF format. Providers can submit supporting documents upon request of the ACN online. Providers have 21 days to submit the relevant attachments. If the attachments are not submitted within the 21 days, the ACN expires, and the claim denies. Providers would need to start over with a new ACN request. Each 180-day online claim submission will require an ACN.

- After logging into the portal, select the Search/Request ACN link. Enter the Recipient ID.
• A new question is displayed on the Search/Request ACN (Attachment Control Number) page ‘Are you requesting an exception to the 180-day timely filing rule?’

• A ‘Yes’ response will prompt providers to select a delay reason.

• A ‘No’ response will not prompt providers to select a reason but will allow them to request the ACN.

• When the request is submitted, an ACN will be created and the requested ACN must be included on the claim for the attachments to be connected to the claim.
• Providers can select the ‘Submit Attachments’ button and the Upload Instructions section opens.
- Providers can also submit attachments from the Claim Submission pages. When the claim is submitted with the ACN and in a ‘Suspended’ status, a section will open on the page to allow providers to submit relevant attachments in a PDF format.

- An ACN cover sheet is not a required document to upload since the form is automatically populated when then ACN is created.
Screen print of the Upload Criteria section showing the 1 file is ready to be uploaded.

After adding files to attach, click on the “Upload Attachments” button. Receiving the message “Successfully Uploaded Attachments” verifies that your documents have been added to the claim.

Screen print of the Upload Criteria section displaying a 'Successfully Uploaded attachments' message.

180-Day Exception Requests

- MA providers may submit 180-day exception requests for claims that meet the criteria specified in MA regulations (see 55 Pa. Code 1101.68, 55 Pa. Code § 1101.68. Invoicing for services. (pacodeandbulletin.gov)) and as specified in MA Provider Handbooks (see PROMISe Handbooks (pa.gov)). To date, these requests have been submitted hardcopy via mail.
As a reminder, all 180-day exception requests must meet the criteria and include the required documentation before the request can be granted.

While the MA Program will strongly encourage use of the electronic submission process, FFS providers will still have the option to submit 180-day exception requests by mail. Providers MUST submit the 180 days detail page to be accepted as a 180-day request otherwise it will be processed as a regular claim. Each request for an exception will require its own exception request form, claim, supporting attachment, and signature transmittal if needed. The mail processing for FFS will no longer accept one 180-day request form and one supporting document for multiple claim submissions after June 1, 2023.

Important news: Effective 8/01/2023, the Office of Long-Term Living (OLTL) will no longer be able to accept for processing 180-Day claims submitted by email. Providers wishing to submit 180-Day claims for processing can continue to do so using the paper submission process OR the new 180-Day electronic submission process. Providers are strongly encouraged to use the electronic submission process.

All FFS Exception requests that are over 365 days will need to be submitted via paper and sent to:

Department of Human Services/Office of Medical Assistance BFFSP
365 Exception Request
PO Box 8050
Harrisburg, PA 17105

OLTL 180-day exception requests submitted via paper should be sent to:

Office of Long-Term Living
Division of Provider Operations
Forum Place, 6th Floor
PO Box 8025
Harrisburg, PA 17105-8025
Attention: Provider Operations

Please utilize the training link PROMISe Provider Education & Training (pa.gov) to register for upcoming trainings.

Thank you for your service to our MA recipients. We value your participation. Check the Department's website often at: www.dhs.pa.gov.