



180 Day Exception Electronic Process -

Updated 8/1/23

- 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

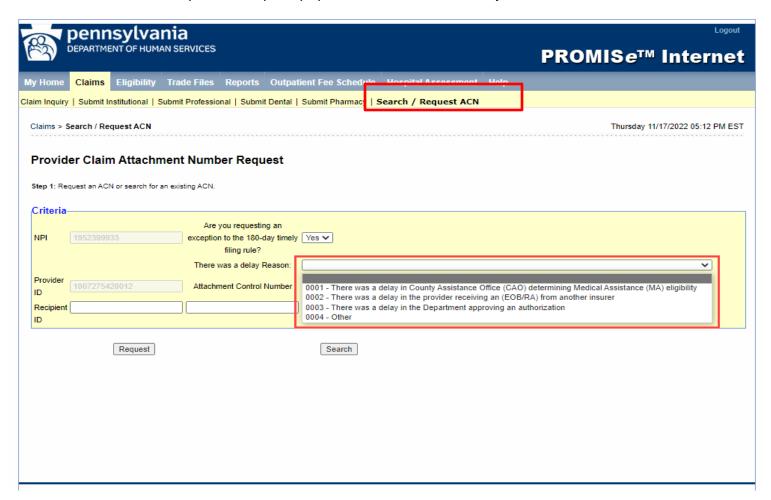
- Providers have the ability to upload documentation supporting a claim submission via the electronic Provider Portal.
- Access the provider portal here: <u>PROMISe™ Internet Portal > Home</u> (state.pa.us)
- Attachments should be no larger than 5MG and there is a limit of 3 files. Files need to be uploaded 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.







Provider (Claim At	tachment N	lumber R	Request									
Step 1: Request	an ACN or se	arch for an existin	g ACN.										
- Criteria -													
NPI				requesting an ex 30-day timely filin		Yes 🗸							
			Ther	e was a delay Re	eason:	0001 - The	ere was a delay in Count	ty Assistance	Office (CAO)	determining N	/ledical Assist	tance (MA) eligibility 🗸	
Provider ID	100002563	0043	Attac	hment Control N	umber								
Recipient 2	220104014	0											
	Red	uest			Sea	arch							
Step 2: Select or	ne of the links	below to view and	print the ACN	Form. Documents	can be uplo	aded through t	the provider portal or mailed to the	he address on the	ACN form. Acroba	Reader software	is required to vie	w and print the ACN form.	
Do NOT print th	is page to se	nd in with your a	ttachments. Th	ne ACN form avai	lable_throu	igh the ACN lir	nk(s) below must be printed.						
ACN	Status	Recipient ID	Date Issued	Date Received	180 Day	180 Reason							
000005518	ISSUED	2201040140	20230130	0	Υ	0001	Submit Attachments						
Step 3: Upload a	applicable PDF	documents with	the ACN cover s	sheet form as the	first page. U	Jpload up to 30	pages in PDF format. If there ar	re more than 30 p	ages, mail the docu	ments and the AC	CN cover sheet to	the address on the ACN Form.	
	To vie	w and print the A	CN form, you	will need to insta	II the Acro	bat Reader so	ftware:						
			Adot	Ger Reader									

• Providers can select the 'Submit Attachments' button and the Upload Instructions section opens.







	Claim Attachment N est an ACN or search for an existing	. 100	
- Criteria			
NPI		Are you requesting an exception to the 180-day timely filing rule?	Yes v
		There was a delay Reason:	0001 - There was a delay in County Assistance Office (CAO) determining Medical Assistance (MA) eligibility V
Provider ID	1000025630043	Attachment Control Number	
Recipient ID	2201040140	000005518	
AddiConf	tional PDF files for this Attach firm that the PDF files you add the "Upload Attachments" bu	arch and select a PDF file for this At ment Control # by repeating Step 1 led relate to this specific recipient a tton to upload your attachments	(up to a maximum of 3 PDF files each up to 5MB).
		ADD Request(Search ACN	

- 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.







Units:	1		
Billed Amount:			
Emergency:	No V		
Family Planning:	V		
EPSDT:	V		
Contract Type:	V		
Contract Code:			
Contract Version:			
Service Adjustments for	Service Line 1:		
Add Adjustment			

Claim Status Information Claim Status Suspended Claim ICN 2722003055175 Paid Amount 0.00 Paid Date Allowed Amount Copay Amount 0.00 Hdr/Dtl Disposition ESC Description Detail 1 - 1 4032 PROCEDURE CODE NOT ON FILE Denied Detail 1 - 2 224 DIAGNOSIS POINTER REQUIRED Denied BILLED AMOUNT MISSING Denied Detail 1 - 4 4021 RECIPIENT NOT ELIGIBLE FOR SERVICE PROVIDED Denied Detail 1 - 5 1010 REND PROV NOT MEMBER OF GROUP OR REND NOT=BILLING Denied Header - 1 270 TOTAL BILLED AMOUNT MISSING Pay Header - 2 2002 RECIPIENT ELIG EFF DT > THE DOS ON THE CLAIM Suspended





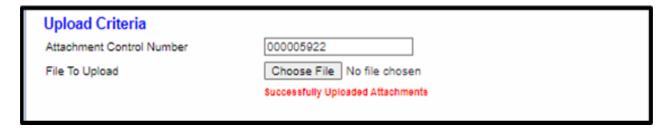


Screen print of the Upload Criteria section showing the 1 file is ready to be uploaded.



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, <u>55 Pa.</u>
<u>Code § 1101.68. Invoicing for services. (pacodeandbulletin.gov)</u>) and as
specified in MA Provider Handbooks (see <u>PROMISe Handbooks (pa.gov)</u>). 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 <u>MUST</u> 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 <u>over 365 days</u> 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 <u>PROMISe Provider Education & Training</u> (<u>pa.gov</u>). 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.

