Louisiana Department of Health and Hospitals
Health Plan Advisory 15-8
March 6, 2015

Early Elective Deliveries Data Receipt and Use by Bayou Health Shared Savings Plans (UHC and CHS)

Effective with dates of service Sep. 1, 2014, DHH no longer reimburses non-medically necessary elective deliveries prior to 39 weeks of gestation. This HPA applies to Shared Plans for deliveries with dates of services from Sep. 9, 2014 through Jan. 31, 2015. It is incumbent upon providers (Institutional and Professional) to input and certify accurate and timely birth information into the Louisiana Electronic Event Registration System (LEERS). DHH will use the data from the LEERS system to validate either that the delivery was not prior to 39 weeks or if it was prior to 39 weeks, that it was medically necessary.

The gestation worksheet showing inclusion and exclusion criteria for births below 39 weeks is located at: http://new.dhh.louisiana.gov/assets/oph/Center-RS/vitalrec/leers/Birth/Below39WeeksWorksheet.pdf .

On a weekly basis, a file is sent from LEERS to Molina. Molina will match LEERS data to the Medicaid ID number or the social security number of the birth mother, and send a file to each Plan which contains only their members. These files are intended to assist Plans in identifying claims that potentially do not meet medical necessity guidelines.

This file will be available every Friday on Molina's secure FTP site.

The filename is: **DHH_LEERS_FILE_<DAILY8>.TXT. <DAILY8> is in the format of YYYYMMDD**.

Each weekly file will be a new file with new birth data. This weekly file only reflects newly added data for the week and does not contain any update to previously submitted data.

For Legacy and Shared Plan claims, all delivery associated claims (institutional and professional) are pended in Molina's systems for a period not to exceed 30 days (four check writes) from the date of receipt. On a weekly basis, Molina validates pended claims against the LEERS file. If a match is found, the claim will be adjudicated (paid or denied). If the claim is denied, it will contain error code 496 – LEERS Data Conflict.

Once the original LEERS information is completed, if a provider wishes to amend any of the information, they may do so by accessing the LEERS 39 Week Birth Data Amendment Form located on the Office of Public Health website (http://www.oph.dhh.louisiana.gov)**.** Any updates posted to the LEERS file are not transmitted to

Molina. The confirmation of the update is to be submitted to the plan by the provider with their reconsideration/med review request so that the plan can determine if changes to the data now confirm medical necessity. The provider also may submit medical documentation for review. This is explained to the provider in Informational Bulletin 15-1.

Claims Adjudication

Molina adjudicates claims for Shared Plans; however, the Plan must review reconsideration requests to determine medical necessity. Based on this review, Shared Plans may:

- Upfront deny the claim if documentation does not justify medical necessity.
- Submit a claim to Molina electronically indicating a '3' in the media code and authorize the service by including a PA number.