



Automated Information System AIS telephone user guide



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Department of Human Services

Division of Medical Assistance Programs

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1-800-527-5772

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I. Introduction

What is AIS?



The Automated Information System (AIS) is a computer system that keeps information about a person's eligibility for services covered by the Division of Medical Assistance Programs (DMAP).

Providers call one toll-free number to access AIS on a touch-tone phone. Prompts and repeating messages guide the user through the main menu and its branches. AIS has been designed so that the caller can listen to the telephone messages, press keys, and follow further instructions.

AIS can tell you:

- ✓ If a person is eligible for services covered by DMAP.
- ✓ For which benefit package the person is eligible.
- ✓ The services that are covered in the person's benefit package.
- ✓ Whether the person is enrolled in a managed care plan (medical, dental, mental health, chemical dependency).
- ✓ What the recipient's ID number is.
- ✓ Whether the person has other insurance coverage (third party resources or TPR).
- ✓ If the person has a primary care manager.
- ✓ The date of the last vision exam and the date when vision materials were last provided.
- ✓ Procedure code and fee information.
- ✓ If the person is restricted to a specific pharmacy.
- ✓ If the person lives in a long-term care facility

NOTE: DMAP Administrative Rules are posted on DMAP's Web site: <www.dhs.state.or.us/policy/healthplan/guides/main.html>. If you have no Internet access, request hard copies by calling 1-800-527-5772 or (503) 945-5772 (Salem).

Do I have to use AIS?

No. AIS is an optional service that DMAP offers to help you verify eligibility for people who may qualify for DMAP benefits. See DMAP General Rule 410-120-1140 for other eligibility verification methods.

By using AIS you can make sure that the person is eligible for Medical Assistance Program coverage on the day you call, before you provide services. AIS can also provide you information on certain services with limitations, (e.g., glasses) and give you procedure codes and fee information DMAP cannot pay for services to ineligible people or services provided above benefit limits.

AIS can tell you whether a person was eligible on the date or dates of service up to one year before the current date. AIS can also give you eligibility information for up to a 31-day range of dates within the same calendar month. If eligibility or service coverage changes during the range of dates requested, AIS requests that you enter a specific date.

AIS cannot verify eligibility for future dates.

When can I use AIS?

Call AIS to verify eligibility, before you provide services.

AIS is available seven days a week:

Tuesday through Saturday	midnight to 11:00 p.m.
Sunday	midnight to 8:00 p.m.
Monday	3 a.m. to 11:00 p.m.

If you have questions about how to use the AIS system, customer service representatives at the First Health Technical Help Desk, at 1-800-884-3250, are available to guide you through the system 24 hours a day, seven days a week.

The Tech Desk staff, however, cannot answer DMAP eligibility questions.

What do I need to use AIS?

Since AIS is activated by the sound of the tones, you must have a touch-tone telephone line. Enter either your 6-digit DMAP provider number or your 10-digit National Provider Identifier (NPI) to get into AIS.

Some Division telephone systems have assigned specific functions to the asterisk (*) and pound (#) keys (e.g., speed calling, re-dial). If you are unable to access AIS because of this, you may need to contact the company that installed your telephone system about how to use your telephones with computerized information systems.



What do I do if I have a problem using AIS?

If you are having a problem using AIS, review the operating instructions in this manual or call the First Health Technical Help Desk, at 1-800-884-3250, for assistance.

What do I do if AIS is not working?

AIS will announce “System is unavailable at this time.” This does not mean the entire DMAP computer system is down. AIS may automatically disconnect the call if AIS becomes unavailable. Staff at DMAP and First Health will take action to correct the problem and get AIS back in service as soon as possible. Please be patient if this occurs.

If you are not able to verify eligibility or other information because AIS is not working and you cannot reach the local branch office listed on the DMAP Medical Care ID, call DMAP Provider Services at 1-800-336-6016. If all else fails, document **all** of the following:

- ✓ Date and time of your call to AIS
- ✓ Messages, if any, received from AIS
- ✓ Recipient ID number or name and date of birth
- ✓ Provider number used to access information

If a claim is rejected or denied because the person was ineligible, and your records indicate the person was eligible, resubmit the claim with the above documentation to:

DMAP Provider Services
500 Summer Street NE, E-44
Salem, OR 97301-1079

DMAP staff will verify your information with AIS records and the local branch office before DMAP makes a final decision regarding payment.

NOTE: AIS can handle many calls simultaneously. If you get a busy signal, or if AIS continues to ring, hang up and dial again; a line should be open.

II. How to Use AIS

AIS Telephone Symbols

Press pound key (#) only when AIS says to do so.

To leave the AIS menu at any time, hang up the telephone and the session is automatically ended.

Call AIS 1-800-522-2508

Lines are open Tuesday through Saturday midnight to 11:00 p.m.; Sunday midnight to 8:00 p.m. and Monday 3 a.m. to 11:00 p.m.

The automated inquiry process will take approximately 75 seconds.

AIS responds:

“Welcome to the DMAP Automated Information System.”

If the AIS is unavailable, it will respond:

“System is unavailable at this time.”

Let AIS complete its message before you enter any numbers. Failure to do so may cause invalid messages or a silent line.

Alpha to Numeric Conversion Chart

You will need to convert alpha characters to numbers. Use the following chart:

A = 21	J = 51	S = 73
B = 22	K = 52	T = 81
C = 23	L = 53	U = 82
D = 31	M = 61	V = 83
E = 32	N = 62	W = 91
F = 33	O = 63	X = 92
G = 41	P = 71	Y = 93
H = 42	Q = 11	Z = 12
I = 43	R = 72	

Enter Your DMAP Provider Number

AIS requires you to enter either your 6-digit provider number or your 10-digit NPI. AIS will verify your entry. You have three opportunities to enter the correct provider number.

If you enter this information incorrectly a third time, AIS will direct you to call DMAP Provider Enrollment, at 1-800-422-5047, during DMAP business hours (Monday through Friday, 8 a.m. to 5 p.m.). If you enter a valid and active provider number, AIS takes you to the main menu selections.

Main Menu Selections

The main menu includes:

Eligibility and TPR	Press 1
Procedure Code Coverage	Press 2
Vision Information	Press 3
Pharmacy Management Information	Press 4
User manuals and Web address	Press 9

NOTE: DMAP Administrative Rules are posted on DMAP's Web site: www.dhs.state.or.us/policy/healthplan/guides/main.html. If you have no Internet access, request hard copies by calling 1-800-527-5772 or (503) 945-5772 (Salem).

III. Eligibility and TPR (Press 1)

Eligibility Verification

If you press 1 in the main menu, you will be able to inquire about a person's DMAP eligibility, coverage and other resources for a given date.

You can access information in one of three ways:

- ✓ Recipient ID number listed on the Medical Care Identification
- ✓ Person's last name, first name and date of birth
- ✓ Person's Social Security number and date of birth.

Using Recipient ID Number

Enter the recipient ID number followed by the pound (#) key. Refer to the Conversion Chart on page 5 to convert letters to numbers.

If a match is found on the file, AIS will respond with the person's recipient ID number and name before prompting you for the date of service.

After three unsuccessful tries, AIS will direct you to call a Provider Services Representative, at 1-800-336-6016, for assistance during DMAP business hours (Monday through Friday, 8 a.m. to 5 p.m.).

Using a Recipient Last Name and First Name

AIS prompts you to enter the first five letters of the recipient's last name and the first three letters of the first name. Refer to the Conversion Chart on page 5 to convert letters to numbers.

If a last name is shorter than five letters, enter those characters and press the pound (#) key. Repeat the process for the first name, which requires three letters followed by the pound (#) key.

After three unsuccessful tries, AIS will direct you to call a Provider Services Representative, at 1-800-336-6016, for assistance during DMAP business hours (Monday through Friday, 8 a.m. to 5 p.m.).

Using a Person's Social Security Number

Enter the person's nine-digit Social Security number. After three unsuccessful tries, AIS will direct you to call a Provider Services Representative, at 1-800-336-6016, for assistance during DMAP business hours.

After you have correctly entered the person's Social Security number, AIS will prompt you for the date of birth. Enter the six-digit date of birth in month, day, and year format. For example, July 23, 1954, would be entered 072354.

If a match is found on the file, AIS will respond with the first five letters of the person's last name and first three letters of the first name, followed by the person's recipient ID number.

AIS will tell you if no match is found or an invalid entry is made. If more than one record for a person's name is found, AIS directs you to call DMAP Provider Services, at 1-800-336-6016, for assistance. If it takes you too long to respond, AIS will repeat the prompt.

Entering the Date of Service



After the patient has been found in the file, you will be asked to supply the six-digit date of service (DOS) or a twelve-digit range of dates. The date(s) must be in month, day and year format (e.g., January 15, 2007, is 011507). For a date range, enter the “from” DOS in month, day and year format, followed immediately by the “through” date in the same format. Press the pound (#) key when you are finished with your entry.

The following are invalid inquiries:

- ✓ Future dates
- ✓ Dates more than one year in the past
- ✓ Date ranges of more than 31 days
- ✓ Date ranges extending beyond one calendar month (e.g., Jan.15–Feb.15)
- ✓ Numbers which do not equal a true date (e.g., 131307)
- ✓ First date, or “from” date, is later than the second date, or “through” date.

After three invalid date entries, you are told to review this manual or AIS will direct you to call a Provider Services Representative, at 1-800-336-6016, for assistance during DMAP business hours.

After entering a valid date of service, you will hear one or more eligibility responses. AIS will then give you applicable client coverage information options. Such options may include benefit package information, managed care or third party insurance.

You may have the option to select all of this person's benefit packages or just one. If the person belongs to a managed care plan, that phone number may also be available to you. Regardless of whether you choose to hear any benefit package information, AIS identifies existing third party resources (TPR) if the person is not in a managed care plan.

Managed Care and Third Party Coverage

Once you enter the date of service, AIS tells you whether the person has managed care or third party resources (TPR). If the person does not have TPR coverage on file, and is not enrolled in a managed care plan, you may bill DMAP directly for covered services.

If third party coverage is indicated, you have the option to have AIS identify the third party resource. The AIS, in some cases, will identify the name of the carrier and, if applicable, the group and policy numbers. It will give a contact phone number, if one is available.

Requesting Vision Services Information

AIS prompts:

“For vision services information press 1.”

To bypass eligibility information and access only vision services information, press 3 at the main menu.

If you press 1, AIS checks to see if the person is enrolled in a managed care plan covering vision care. AIS will provide the date of the last vision examination provided by the plan, or it will instruct you to contact the plan for vision coverage information.

If the person is not enrolled in a managed care plan, AIS gives the date the person received vision services. AIS can also give the date of the person’s last fitting or dispensing of glasses.

In either case, information is based on the last payment for vision services. If services have been authorized and performed, but not yet been billed, AIS may not have the latest information.

IV. Procedure Code Coverage (Press 2)

Requesting Procedure Code Information

AIS prompts:

“For procedure code coverage press 2.”

*NOTE: The following information concerning DMAP reimbursement **does not assure payment**, but is intended to give payment criteria and DMAP payment amounts.*

Actual coverage depends on the Health Services Commission’s Prioritized List of Health Services and limitations of individual programs or benefit packages.

After pressing 2, AIS asks for the five digit CPT or HCPCS procedure code followed by the pound (#) key.

Next, AIS asks for the type of service code followed by the pound (#) key.

AIS then determines if the procedure and type of service (TOS) codes are valid. If they are valid, AIS will give the procedure code’s coverage and current reimbursement rate.

AIS will then ask for another procedure code or instruct you to press 2 to return to the main menu.

V. Vision Information (press 3)

Requesting Vision Services Information

AIS prompts:

“For vision services information press 3.”

If you press 3, AIS checks to see if the person is enrolled in a managed care plan covering vision care. If so, AIS will instruct you to contact the plan about vision services.

If the person is not in a managed care plan, AIS gives the date the person received vision services. AIS can also give the date of the person’s last fitting or dispensing of glasses. AIS vision information is based on the last known service date or payment by DMAP for this person. If services have not yet been billed, AIS may not have information about recent services , even though they were authorized or performed.



VI. DMAP Administrative Rules or Supplemental Info (Press 4)

AIS prompts:

“For user manuals and Web address, press 9.”

NOTE: DMAP Administrative Rules are posted on DMAP’s Web site: <www.dhs.state.or.us/policy/healthplan/guides/main.html>. If you have no Internet access, request hard copies by calling 1-800-527-5772 or (503) 945-5772 (Salem).

VII. Quick Reference

AIS Phone Number: 1-800-522-2508

To use AIS, you must first enter either your 6-digit DMAP provider number or your 10-digit NPI.

Alpha to Numeric Conversion Chart

When you need to enter alphabetic characters, use the following number combinations:

A = 21	J = 51	S = 73
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F = 33	O = 63	X = 92
G = 41	P = 71	Y = 93
H = 42	Q = 11	Z = 12
I = 43	R = 72	

AIS Telephone Symbols

Press pound key (#) only when AIS says to do so.

Exiting the System

To leave the AIS menu at any time, hang up the telephone and the session is automatically ended.

Uses

Call AIS if you have questions about:

- ✓ Patient eligibility
- ✓ Third Party Resources (TPR, *e.g.*, private insurance)

AIS is available:

Tuesday through Saturday midnight to 11:00 p.m.
Sunday midnight to 8:00 p.m.
Monday 3 a.m. to 11:00 p.m.

Pharmacy Managed Access Program (MAP) 1-800-344-9180

Physicians or licensed personnel may call the Pharmacy MAP to obtain prior authorization. See DMAP Pharmacy Administrative Rules (OAR 410 Division 121) for more information on prior authorization.



DMAP Benefit Registered Nurse Hotline 1-800-393-9855

Call the DMAP Benefit RN Hotline if you have questions about OHP diagnosis/treatment pairs.

Registered nurses staff this toll-free phone line. They will help providers determine whether a treatment is covered for a particular diagnosis.

If the patient is in a managed care plan and you have a question about whether the treatment is covered, call the patient's plan.

Providers who call the hotline regarding treatment for plan members will be referred to the plan.

DMAP Provider Services 1-800-336-6016

Contact a Provider Services Representative if you have questions about claims payment.

You may e-mail them at <DMAP.providerservices@state.or.us>.

DMAP Provider Services staff is available from 8 a.m. to 5 p.m. weekdays to answer your questions about billing DMAP.

