

Dear Medicaid Provider:

Please review the information below in full, as it relates to the recent Attendant Care rate change. **This information only applies to claims entered through AuthentiCare – it does not apply to claims submitted through the MMIS.**

The MMIS will adjust Attendant Care claims back to January 1, 2021 and will bypass the timely filing edit. The claims will be adjusted regardless of what was billed by you as the provider, up to the maximum for the new rate. **No action is required from you.** These adjustments will occur automatically.

The tentative plan to adjust the AuthentiCare originated claims is as follows:

Week of 6/6/2022

- 6/7/2022: January 2021 claims processed
- 6/9/2022: mass adjustment verification
- 6/10/2022: MMIS financial cycle runs, and the provider receives their normal RA from the MMIS
- 6/11/2022: Remittance Advice (835 transaction) processed by Fiserv (AuthentiCare)

Week of 6/13/2022

- 6/14/2022: February 2021 claims processed
- 6/16/2022: mass adjustment verification
- 6/17/2022: MMIS financial cycle runs, and the provider receives their normal RA from the MMIS
- 6/18/2022: Remittance Advice (835 transaction) processed by Fiserv (AuthentiCare)

The MMIS will continue to process a single month of claims per week until the January 2022 claim set is finished. Based on this schedule, the process would tentatively complete at the end of the week of 8/29/2022. This is when the last set of claims (January 2022) are currently scheduled to be processed.

Thank you for your patience as the State works closely with the EVV and MMIS vendors to process through the volume of claims as accurately and efficiently as possible. Any changes or updates to the schedule will be communicated via email and verbally in the weekly Wednesday provider and third-party vendor meeting.

If you have questions, please contact Sharon Donovan at Sharon.Donovan@dhs.arkansas.gov.