MMAP Claims Submission Job Aid

January 22, 2024
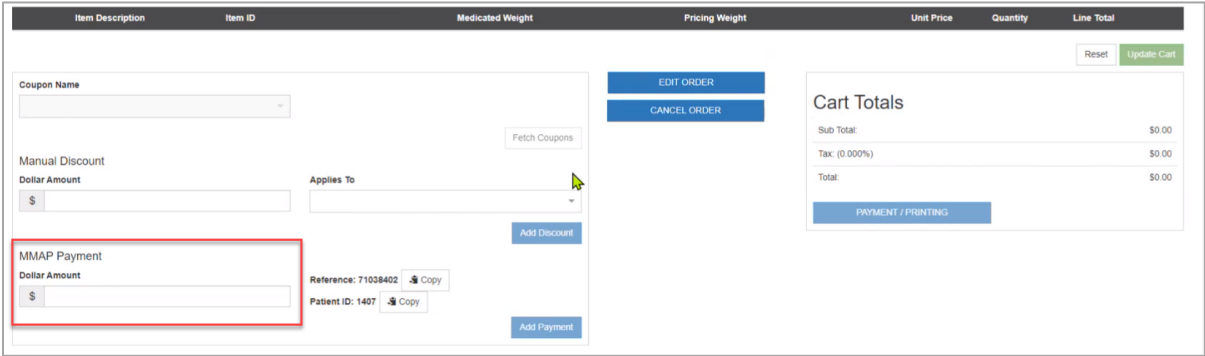
This job aid contains the following topics:

Submit a Claim

Complete the following steps to submit a claim for medical marijuana using the MJ Freeway point-of-sale system and Magellan's Web Claims submission.
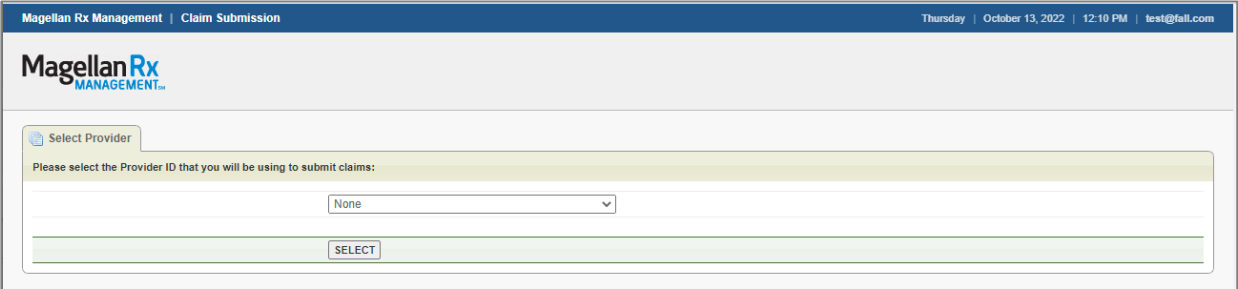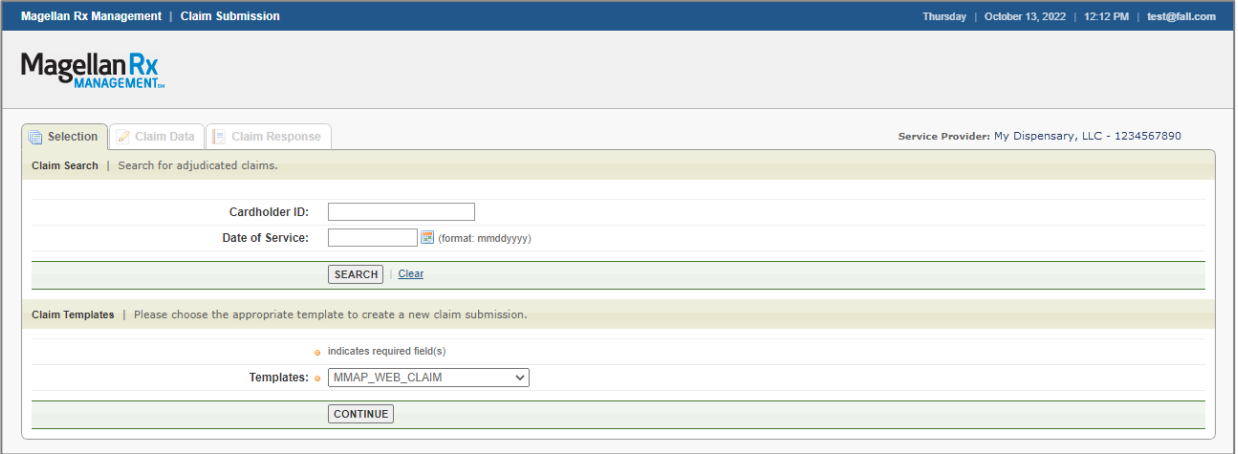
Note: The Web Claims Submission process produces a response that provides information you must enter in the MJ Freeway system in order to complete the sale and determine any out of pocket due from the client. You must obtain the claim response prior to finalizing the sale.
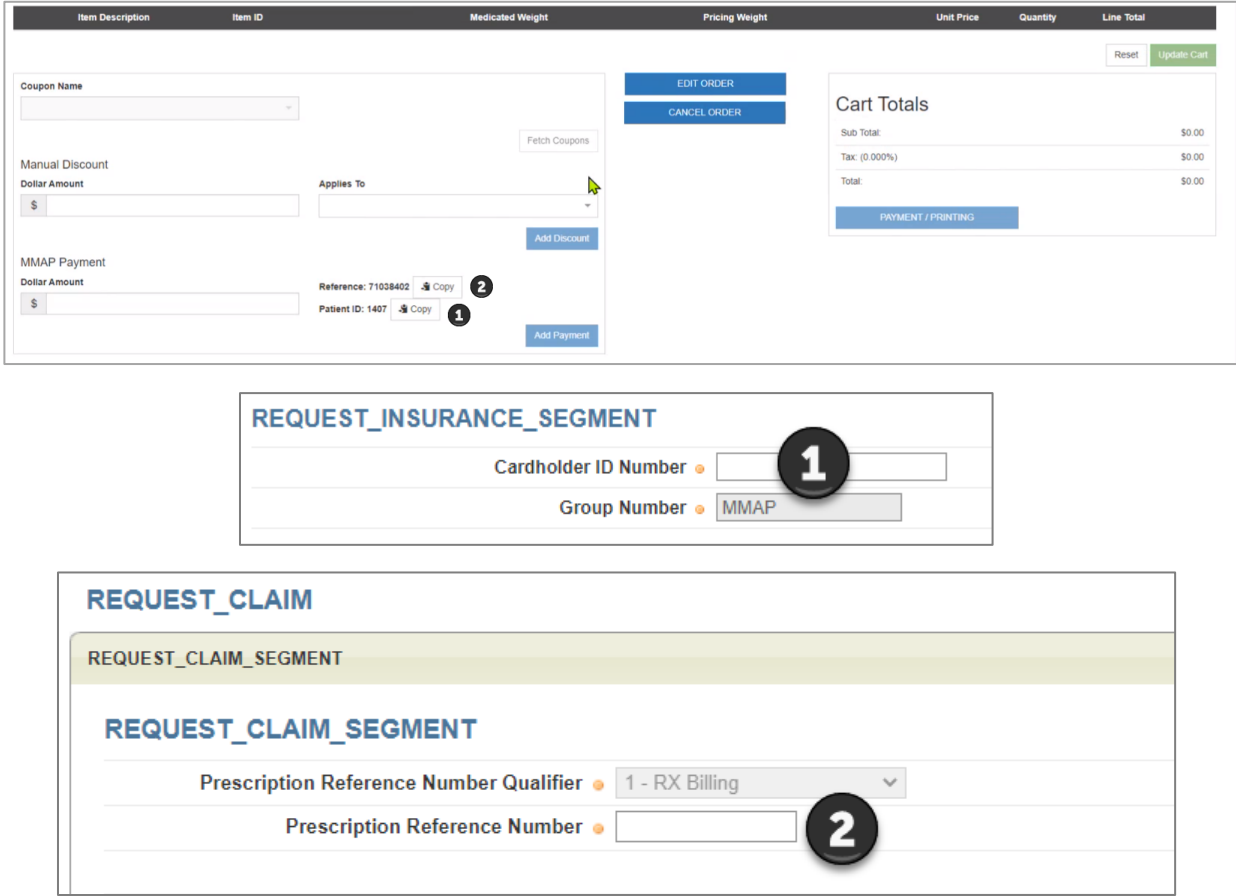
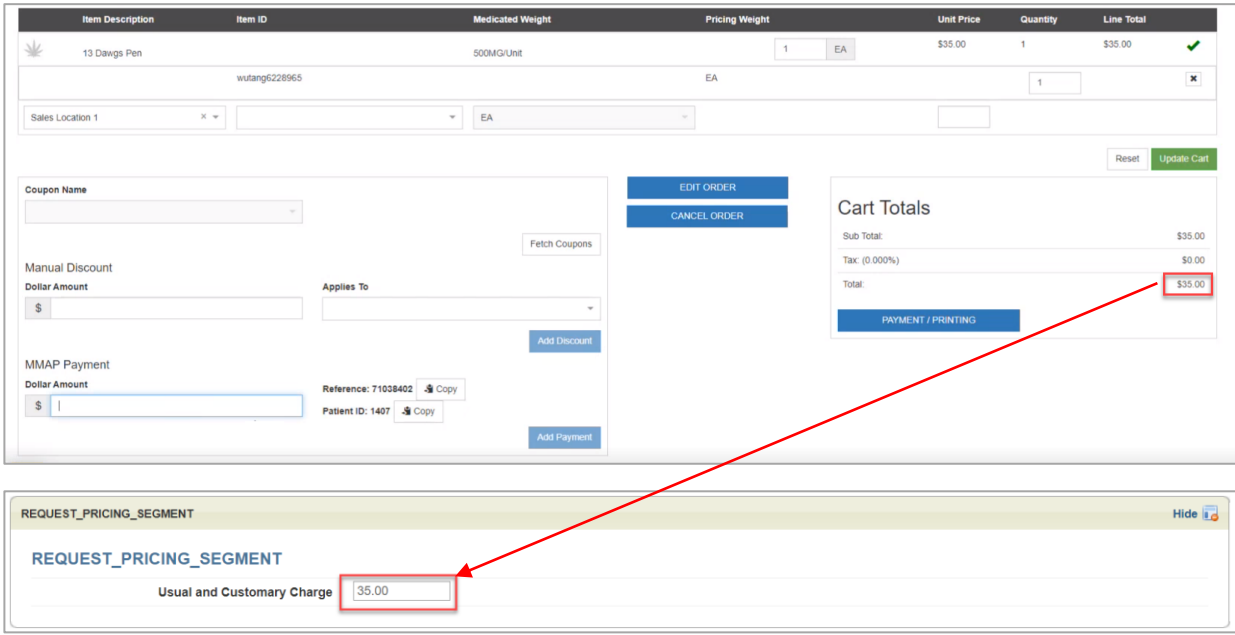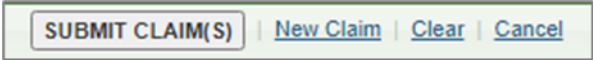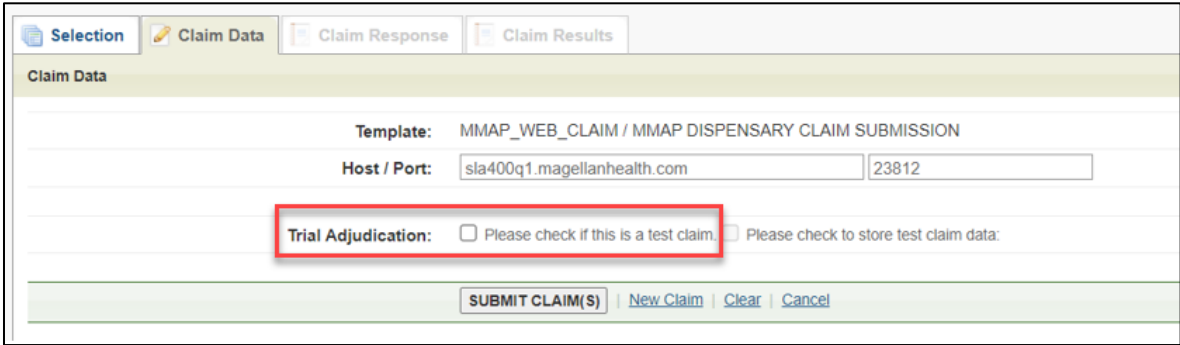| Step	Action
1.	Scan the patient's card and enter the order as normal including all discounts and coupons.
2.	A separate **MMAP Payment** field will appear for patients enrolled in MMAP.
3.	Open the Dispensary Portal (https://papaceportal.magellanhealth.com). Click **Launch** next to **Web Claims Submission**.

Step	Action
	Note: You must be logged in to see the **Web Claims Submission** option.
4.	Select your Dispensary from the provider list drop-down. Magellan Rx Management | Claim Submission Thursday | October 13, 2022 | 12:10 PM | test@fall.com **Magellan Rx** MANAGEMENT. Select Provider Please select the Provider ID that you will be using to submit claims: None ▾ SELECT
5.	Select the **MMAP_WEB_CLAIM** template from the **Templates** drop-down. Click **Continue**. Magellan Rx Management | Claim Submission Thursday | October 13, 2022 | 12:12 PM | test@fall.com **Magellan Rx** MANAGEMENT. Selection Claim Data Claim Response Service Provider: My Dispensary, LLC - 1234567890 Claim Search | Search for adjudicated claims. Cardholder ID: Date of Service: (format: mmddyyyy) SEARCH | Clear Claim Templates | Please choose the appropriate template to create a new claim submission. ● indicates required field(s) Templates: ● MMAP_WEB_CLAIM ▾ CONTINUE
6.	Complete the following fields on the **Claim Data** tab: - Date Filled – must be the current date - Date of Birth – must match the DOB in the Magellan system - Patient First Name – must match on the first character of demographics data in the Magellan system. - Patient Last Name – must match on the first three characters of demographics data in the Magellan system. Notes: - Click the calendar icon (⊞) to select the current date; this prevents keying errors. - Many required fields are prefilled.

Step	Action
7.	Copy the following information from the MJ Freeway system. Click the **Copy** button next to each field to paste the value in the claims submission template. • Cardholder ID • Prescription Reference Number

Step	Action
8.	Enter the **Usual and Customary Charge**. This is the total purchase price. **Note:** MMAP benefits are to be applied after all other discounts or points have been applied.
9.	Click **Submit** to submit the claim. **Note:** The Trial Adjudication check box allows you to submit a test claim. You will go through all the steps above and submit the claim. Although you will receive a determination, the claim will not be recorded. Once you are ready to submit a claim and want it to be recorded, clear the Trial Adjudication check box and click New Claim and repeat the process.
10.	The **Claim Response** tab displays, showing the **Response Status (Header)** as **A-Accepted**, indicating the claim processed properly. **Note:** If the **Response Status (Header)** is **R – Claim Rejected**, see Rejected Claims below for more information on the cause of the error. Return to the Claim Data tab to correct the issue.

Step	Action
11.	Manually enter the benefit returned in the Magellan tool (called **Total Amount Paid**) in the **Dollar Amount** field to reflect the MMAP payment.
12.	If patient doesn't have enough MMAP funds to cover total cost of purchase, the Claim Response tab will display the Amount of Coinsurance, or the amount the patient must pay out of pocket. The scenario occurs when the patient has no MMAP funds available and must pay the entire amount out of pocket; or the patient has some MMAP funds available but those funds don't cover the entire purchase so the patient must pay some out of pocket. In this example, the total cost of the purchase is $160, the patient had $150 in MMAP funds available toward the purchase. The patient needed to pay $10 out of pocket.
13.	Click **Add Payment** to apply the MMAP Payment to the Cart Totals.

Step	Action
14.	Collect the remaining amount (if any) from the patient in cash.
15.	Notify the patient of the remaining MMAP balance available to them after this sale is completed.

> **Note:** If the patient's remaining balance is $0. The RESP_BENEFIT_STAGE_COUNT_SEG, containing the **Spending Account Amount Remaining** field, does not display.

Return to top

Rejected Claims

The **Claim Response** tab shows the status of the claim once submitted. If the claim did not "pay," the Reject Code(s) and descriptions are listed on the **Claim Response** window.

The following table describes the reasons a claim may reject at the point-of-sale.

Reject Code	Information
CA – M/I Patient first name	FIRST NAME: FIRST CHARACTER MUST MATCH Example: You enter Ryan, but the Patients' name is Bryan
CB – M/I Patient last name	LAST NAME: FIRST 3 CHARACTERS MUST MATCH Example: You enter **Rot**hermel, but the patient's last name is spelled **Roe**thermel
09 – M/I Birthdate	DATE OF BIRTH MUST MATCH Example: You enter 12/12/1944 or 12/21/1934, but the patient's DOB is 12/21/1944
52 – Non-matched cardholder id	PATIENT ID DOES NOT MATCH OUR SYSTEM Example: You enter the patient's ID number for another program. **Note:** Use MJ Freeway system **Copy** button to prevent this error.
81 – Claim too old	CLAIM MUST BE SUBMITTED ON CURRENT DATE

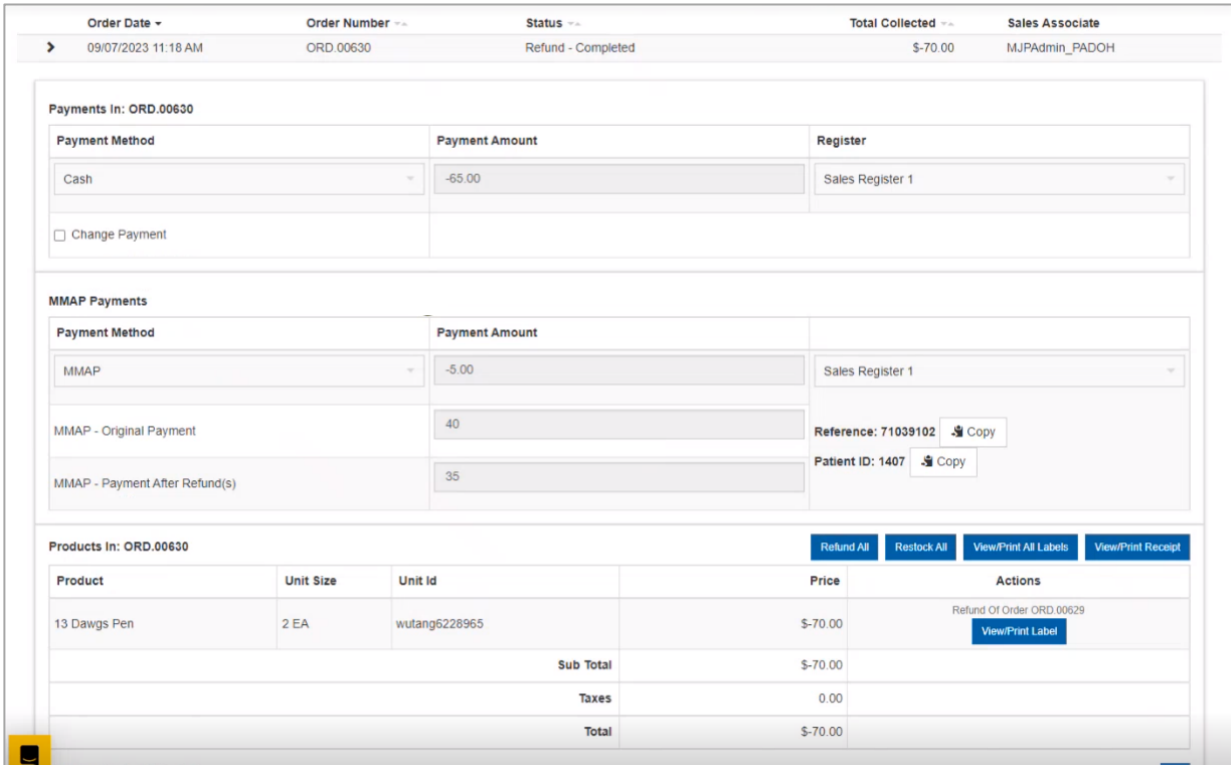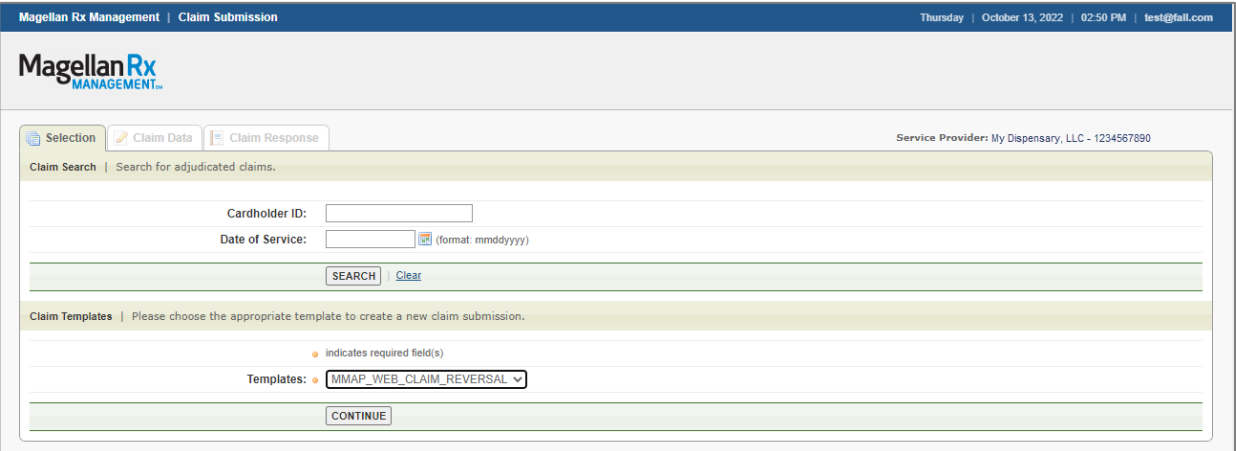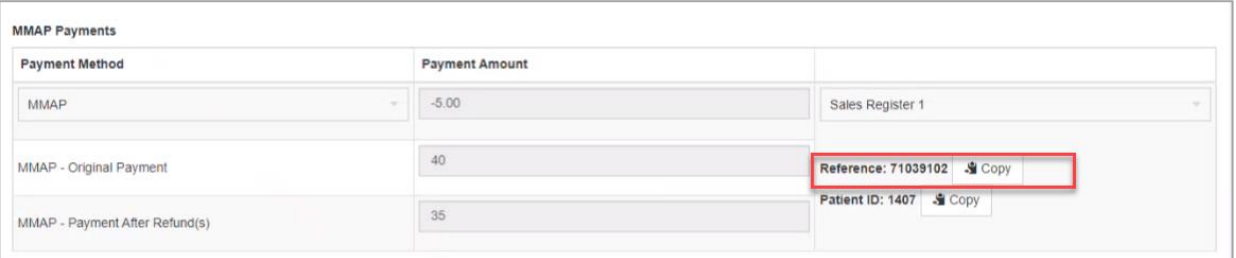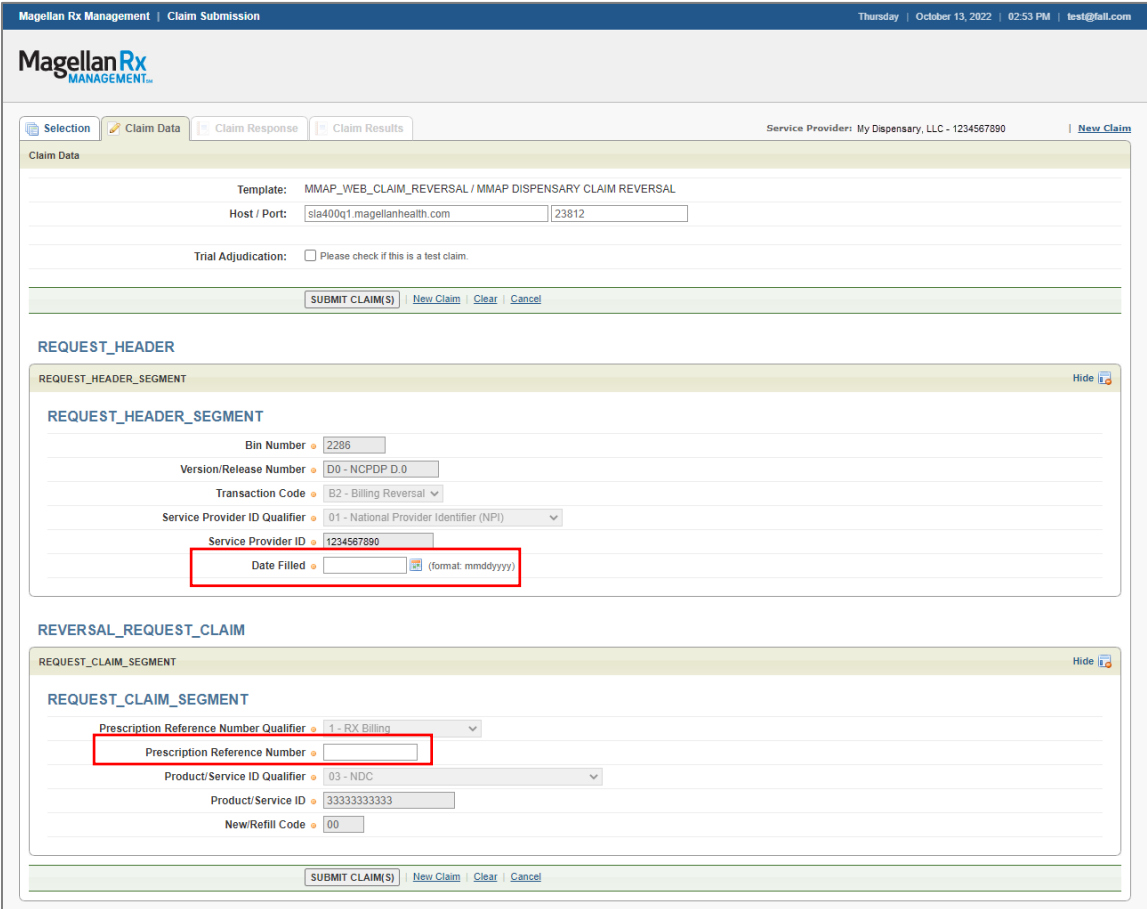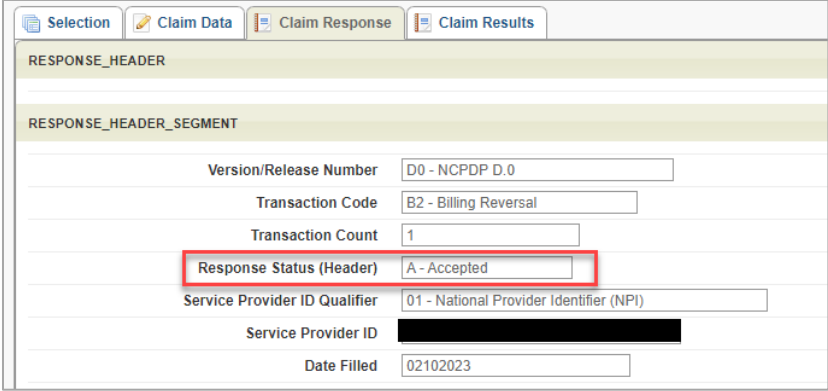| Reject Code	Information
	Example: Date of service is 11/27/2022 but you enter 11/17/2022 **Note:** Use the calendar icon to select a date to prevent keying errors. The calendar offers the option **Today** to allow you to choose the current date.
DQ – M/I Usual And Customary Charge	USUAL AND CUSTOMARY VALUE CANNOT BE $0.00 (THIS SHOULD BE THE VALUE THE PATIENT WOULD BE CHARGED AFTER ALL DISCOUNTS AND SALES ARE APPLIED).
87 – Reversal not processed	REVERSAL NOT PROCESSED (EITHER THE PRESCRIPTION REFERENCE NUMBER OR THE DATE OF SERVICE DOES NOT MATCH A PAID CLAIM).

Processing Refunds

The following steps are to be completed when an item is returned to a Dispensary. Each step is detailed below:

> **Note:** If MMAP funds were not used, no action is required in Web Claims Submission.

- Process the refund/return in the MJ Freeway point-of-sale system
- Reverse the claim in Magellan's Web Claims Submission, if applicable
- Submit a new claim for the non-refunded/non-returned items in Magellan's Web Claims Submission, if applicable

Step	Action
1.	Select the appropriate order from the patient's order history and complete the refund transaction in the MJ Freeway point-of-sale system. If the refund results in a negative MMAP Payment Amount, continue to Step 2.
2.	Reverse the original claim in Magellan's Web Claims Submission. **Note:** Only **Paid** claims can be reversed. Select the **MMAP_WEB_CLAIM_REVERSAL** template from the **Templates** drop-down. Click **Continue**.

Step	Action
3.	Complete the required fields on the **Claim Data** tab. The unique combination of the **Date Filled** and **Prescription Reference Number** for this specified **Service Provider ID** identify the claim to be reversed. • The **Prescription Reference Number** is found in the MMAP Payments section of the refund order. Click **Copy** to copy the number and paste it in the Web Claims Submission form. • The **Date of Service** is the date of the *last* claim submitted for this order.

Step	Action
4.	Click **Submit Claim(s)**.
5.	The **Claim Response** tab displays, showing the **Response Status (Header)** as **A-Accepted**, indicating the reversal processed properly. **Note:** If the claim is not successfully reversed, reject code 87 – Reversal not processed sets. See Rejected Claims above for more information on this code.
6.	Submit a new claim for any non-refunded/non-returned items. This step must be performed when a dollar value appears in the **MMAP – Payment After Refund(s)** field.

Step	Action
	Note: If MMAP funds were not used on the original claim, a new claim is not required.
7.	Follow the steps defined above, using the following information from the refund/restock screen to complete the Web Claims Submission form. **①** **Reference** – Click Copy and paste this number in the **Prescription Reference Number** field. **②** **Patient ID** – Click Copy and paste this number in the **Cardholder ID Number** field. **③** **MMAP – Payment After Refund(s)** – enter this amount in the **Usual and Customary Charge** field on the Web Claims Submission form.

Duplicate Billing

A Response Status of **D – Duplicate billing** alerts you to the fact that an exact duplicate of an already-submitted claim has been submitted. This can happen if:

- you don't successfully reverse a claim and then submit a new claim or
- if you mistakenly submit a claim more than once (i.e., you missed the response that the claim was successfully submitted and submitted it again).

> - If an exact duplicate of a paid claim is submitted, the Response tab will display a Response Status of **D – Duplicate Billing**.
> - The Response Status (Header) will display as **A-Accepted**.
> - A unique Authorization Number is assigned to the Duplicate.

RESPONSE_STATUS_SEGMENT	
Response Status	D - Duplicate Billing
Authorization Number(20 bytes)	00022030770901

Return to top

Key Points

- Patients cannot request partial payment. The patient has the option to pay out of pocket ONLY if it's to cover the difference of the amount that the MMAP funds do not cover.
    - o EXAMPLE: The patient's bill is $100. They have $75 available in MMAP funds. All $75 must be applied to the $100 total. The patient cannot opt to spend $50 now and leave $25 in the account.
- The claim on the Magellan Portal should be submitted first, prior to the order in MJ Freeway being completed because the Magellan Claim Response will indicate the amount MMAP was able to cover. THAT amount is what should be indicated in the **MMAP Payment** field on MJ Freeway.
- MMAP is *not* a discount; it is a type of payment.

Return to top