

MotionMD Early Warning List available for Officecare Accounts

Aetna Billing Channel Switch

Description	Will alert users that any Patient Agreement with an Aetna payor needs to be submitted to the respective local biller.
EW Wording	PAs with Aetna payor need to be submitted to local billing entity. Update Billing Channel accordingly.
Trigger	Payor name includes 'Aetna'
Displays / Dismissal	On Aetna Payment Method. No dismissal.
Notes	Currently only turned on for NY accounts.

Cigna Medicare

Description	Will alert users that when a Patient Agreement has an affected HCPCS code and Cigna Medicare Advantage payor that Prior Authorization is required.
EW Wording	Cigna Medicare Advantage plans require Prior Auth for this Product/HCPCS code. Please complete and submit the PA to billing as soon as possible.
Trigger	Payment Method is Commercial, payor name includes 'Cigna' Policy Number starts with a digit, and a HCPCS code that requires Prior Auth (this includes most HCPCS codes).
Displays / Dismissal	On Cigna Payment Method. No dismissal.

CT Medicaid Length of Need Required

Description	Will alert users that Length of Need (LON) is required when the payor is Medicaid CT.
EW Wording	Length of Need is incomplete.
Trigger	Payor name matches 'Medicaid CT' exactly and no Length of Need has been added to the PA.
Displays / Dismissal	On Medical Information section of the Patient Agreement. EW is dismissed if Length of Need is added.

Custom OTS Products

Description	Will alert users to email OfficeCare Logistics for the Custom OTS Product.
EW Wording	To process an order for a Custom measured OTS product, the Custom Measurement form and Shipping details need to be emailed to OfficeCareLogistics@enovis.com to process the request.
Trigger	A custom TOS product was added to the Patient Agreement.
Displays / Dismissal	On the Product section of the Patient Agreement. No dismissal.

Duplicate HCPCS for Commercial Payors

Description	Will alert users when another Patient Agreement exists for the same patient and same HCPCS and Commercial Payor as the Payment Method.
EW Wording	Another Patient Agreement exists for this patient and HCPC for Commercial Payor.
Trigger	Another existing PA in MotionMD with the same patient and HCPCS code.
Displays / Dismissal	On the Product section of the Patient Agreement. No dismissal.

Duplicate Medicare

Description	Will alert users when another Patient Agreement exists for the same patient and same HCPCS and Medicare as the Payment Method.
EW Wording	Another Patient Agreement exists for this patient and HCPC for Medicare.
Trigger	Another existing PA in MotionMD with the same patient and HCPCS code.
Displays / Dismissal	On the Product section of the Patient Agreement. No dismissal.

Fitting & Adjustment Form Warning

Description	Will alert users when a Patient Agreement requires the completion of either an appropriate form and/or documentation describing the adjustments made to this product.
EW Wording	This PA requires the completion of either an appropriate form and/or documentation describing the adjustments made to this product.
Trigger	Payment Method is Medicare and product has a Fitting & Adjustment HCPCS Code: L0113, L0140, L0150, L0180, L0190, L0200, L0458, L0460, L0462, L0464, L0470, L0472, L0488, L0490, L0491, L0492, L0635, L0810, L0820, L0830, L1001, L1005, L1600, L1610, L1620, L1650, L1652, L1660, L1690, L1820, L1831, L1910, L1930, L1932, L1951, L1971, L2035, L2112, L2114, L2116, L2132, L2134, L2136, L3931, L3960, L3962, L3980, L3981, L3982, L3984.
Displays / Dismissal	On the Product section of the Patient Agreement. EW is dismissed when a Custom Form has been added to the Patient Agreement.

Front-Wheeled Walkers Coverage

Description	This alerts users of non-coverage when front-wheeled walkers are added to a Patient Agreement and payor Cigna.
EW Wording	Please note Cigna does not cover front-wheeled walkers.
Trigger	Payment Method is Commercial, payor name includes 'Cigna,' and HCPCS E0143 is on the Patient Agreement.
Displays / Dismissal	On Cigna Payment Method. No dismissal.

Jump Ball Code

Description	Will let users know they need to send Jump Ball HCPCS code claims to OfficeCare if the product was dispensed at the time of service.
EW Wording	If this product was dispensed to the patient, click the below button to update the billing channel to submit the PA to OfficeCare.
Trigger	If a product with one of the following HCPCS codes is added to the Patient Agreement: L0627, L0642, L1832, L1833, L3760, L3761 and the Billing Channel is set to Specialty Bracing.
Displays / Dismissal	On the Product section of the Patient Agreement. EW is dismissed once the button on the EW is selected.

Massachusetts Medicaid Coverage

Description	Will alert users when a Patient Agreement has Medicaid or a set of Massachusetts Medicaids that DME is not covered.
EW Wording	The following Masshealth plans do not provide DME coverage and patient will be responsible for the self-pay price for any product dispensed. Masshealth Health Safety Net, Masshealth Partial Health Safety Net, Masshealth Connectorcare + HSN or Partial HSN, Masshealth Premium Assistance, Masshealth Emerg Aid to Elderly, Disabled and Children, Masshealth Children's Medical Security Plan.
Trigger	Payment Method is Medicaid or 'Masshealth' is in the payor name.
Displays / Dismissal	On Medicaid or Masshealth Payment Method. No dismissal.

Medicare ABN

Description	Will alert users when a Patient Agreement with Medicare as the Payor that an ABN may be required.
EW Wording	ABN may be required for Medicare patients if coverage criteria are not met.
Trigger	Payment Method is Medicare.
Displays / Dismissal	On the Product section of the Patient Agreement. ABN is added.

Medicaid Authorization

Description	Will show users a warning when an Authorization (Auth) is required for Medicaid Payor.
EW Wording	Medicaid may require an Authorization (Auth) for this product/patient
Trigger	Payment Method is Medicaid.
Displays / Dismissal	On the Medicaid Payment Method. No dismissal.

Medicare Pre-Authorization

Description	Will alert users that a Product on the Patient Agreement requires Pre-Authorization with Medicare prior to dispense.
EW Wording	[Product Name] requires authorization from Medicare PRIOR to dispensing the product to the patient.
Trigger	Payment Method is Medicare and Product HCPCS includes one of the following: L0648, L0650, L1832, L1851.
Displays / Dismissal	On the Medicaid Payment Method. No dismissal.

Non-Billable Diagnoses

Description	Will show users an alert when the diagnosis is not specific enough to be billable.
EW Wording	A more specific ICD-10 code exists for [ICD-10 Code]. This may not be billable.
Trigger	An ICD-10 code that is considered non-billable by CMS is added to the Patient Agreement.
Displays / Dismissal	On the diagnosis section of the Patient Agreement. EW is dismissed when a more specific Diagnosis Code is added.

Non-Covered Medicare Code

Description	Will alert users when a product with a HCPCS code commonly deemed "non-covered" by Medicare is added to the Patient Agreement.
EW Wording	The HCPCS code associated with the product [PRODUCT NAME] you selected is commonly deemed as 'non-covered' by Medicare and may not be a covered.
Trigger	Payment Method is Medicare and a typically non-covered product HCPCS code including: A4466, A4467, A4490, A4500, A4510, A4565, A4530, A6534, A6535, A6536, A6537, A6538, A6540, A6541, A6542, A6543, A6544, A6549, A9270, A9300, E0191, E0218, L0210, L1800, L1815, L1825, L1901, L2999, L3100, L3260, L3265, L3485, L3651, L3652, L3700, L3909, L3911, L3999.
Displays / Dismissal	On the Product section of the Patient Agreement. No dismissal.

Orientation Mismatch

Description	Will alert users when there is a body side discrepancy between the diagnoses code(s) and product(s) added to the Patient Agreement.
EW Wording	A body side discrepancy exists in the diagnoses and/or products.
Trigger	Any conflicting Right/Left orientation mismatch from the Diagnosis Code name, Product name, Inventory Item Attribute, or Body Side.
Displays / Dismissal	On the Product section of the Patient Agreement. When the right/left orientations match.

Same or Similar Check Reminder

Description	Will remind a user to perform a Same or Similar check if the Payment Method is Medicare and the HCPCS code is billable per CMS.
EW Wording	Same or Similar Check may be indicated for Medicare Patients.
Trigger	Payment Method of Medicare, a product with a billable HCPCS code, and the Same or Similar check has not been completed.
Displays / Dismissal	On the Payment Method section of the Patient Agreement. EW is dismissed when Same and Similar check is completed.

Same or Similar Fail ABN

Description	Will alert users that an ABN is needed due to a Same or Similar check Fail response.
EW Wording	MotionMD's Same or Similar check determined this patient has received a Same or Similar product(s) within the applicable Reasonable Useful Lifetime. An ABN should be obtained for the affected product. ABN can be found on the Product section of the PA.
Trigger	Same or Similar Fail.
Displays / Dismissal	On the Payment Method section of the PA. EW is dismissed when an ABN is added to the Patient Agreement.

Unguaranteed Coverage

Description	Will alert users when the payer is Humana that certain products might not be covered depending on the plan.
EW Wording	Some Humana policies may not cover the item(s) being dispensed. This does not apply to: Humana Gold, Tricare/Military, Caresource, Integrated Care or Medicare Adv. Plan.
Trigger	Payor includes the word "Humana."
Displays / Dismissal	On the Payment Method section of the Patient Agreement. No Dismissal.

Unprinted ABN

Description	Will alert users that the ABN needs to be printed and provided to the patient.
EW Wording	Per CMS, a printed copy of the signed ABN for [Product] must be given to the patient.
Trigger	An ABN has been completed but the “Print ABN” option has not been selected.
Displays / Dismissal	On the Product section of the Patient Agreement. EW is dismissed when the Print ABN option is selected.

WC/Auto Date of Injury

Description	Will alert users that a Date of Injury is required when a Payment Method of WC/Auto is added to the Patient Agreement.
EW Wording	A Date of Injury (DOI) is required for Workers Comp and/or Auto claims. Please remember to add in the Medical Information section of the PA.
Trigger	Payment Method is Work Comp or Auto, and No Date of Injury is added.
Displays / Dismissal	On Medical Information section of the Patient Agreement. EW is switched when the Date of Injury is added.