



November 7, 2011

UPDATE REGARDING 2011 GNOCHC CLAIMS FILING

Submittal Date

The Funding and Reimbursement Protocol approved by the Centers for Medicaid & Medicare Services (CMS) for the Greater New Orleans Community Health Connection (GNOCHC) Demonstration waiver program states:

“In order to be considered within the adjustment described in Section II. B. 1., eligible providers must submit encounter reports for dates for service applicable to the Demonstration Year no later than 45 days following the end of the Demonstration Year regardless if the encounter is reported in Excel format to the Department or on the CMS 1500 to the fiscal agent as described in Exhibit 11.”

The Greater New Orleans Community Health Connection Provider Manual further states:

“Providers must report encounter data for dates of service applicable to the demonstration year no later than:

Demonstration Year	Deadline for Reporting
October 1, 2010 – September 30, 2011	November 14, 2011
October 1, 2011 – September 30, 2012	November 14, 2012
October 1, 2012 – September 30, 2013	November 14, 2013
October 1, 2013 – December 31, 2013	February 14, 2014”

Any GNOCHC services billed on the paper CMS-1500 form and received by Molina with a postmark date of November 14, 2011 will meet the November 14, 2011 reporting deadline. Molina receives thousands of envelopes daily. Further, November 14, 2011 is the first business day following the Veteran’s Day holiday, so volume will be extraordinarily high. **In order to ensure the GNOCHC claims are easily identifiable you must use a 9 x 12 brown envelope labeled “GNOCHC” in large bold print.** This is particularly important for claims that may not reach Molina until after the November 14, 2011 deadline. Claims received after November 14, 2011 that Molina cannot identify as GNOCHC claims will be stamped with the actual receipt date and therefore will not meet the reporting deadline. In addition to regular postal mail you have the option to overnight claims or send them certified to the address below.

Molina Medicaid-GNOCHC Claims
ATTN: Claims Department
8591 United Plaza Blvd., Suite 100
Baton Rouge, LA 70809

Certification of Form GNOCHC-1 Submissions

Signature by the rendering provider for the encounter line is not necessary for claims for services billed on GNOCHC Form-1 and submitted electronically provided that a Form GNOCHC-5 *Certification of Electronically-Submitted GNOCHC Claims* is also submitted.

Form GNOCHC-5 can be found on www.lamedicaid.com on the Forms/Files/User Manuals link. A scanned copy of Form GNOCHC-5 must be submitted electronically together with the Form GNOCHC-1 claim. The original Form GNOCHC-5 must be mailed to the address provided at the bottom of the form.