Dear Provider,

Even if you previously submitted a request for a weekly advance due to the Change Healthcare outage, you must submit your information once again to request an advance for the coming week. Please note the new required element in the list below.

If your pending Medicaid paper or electronic claims payments for the next remittance have resumed at a level consistent with your weekly payment request, your organization will not qualify for an advance payment in your 4/12/24 remittance advice.

DVHA is committed to offering weekly advance payments to providers for anticipated payments that would otherwise be billed through the Change Healthcare system. In order to receive an advance to be included in your 4/12/24 remittance advice, the information below must be submitted ASAP and no later than 4:00 p.m. on Thursday, 4/4/24. If you submitted a request in one of the prior weekly cycles, you must submit your information again for this weekly cycle.

If your organization has been impacted by the Change Healthcare outage and wishes to request an advance payment against future Medicaid claims, please email

AHS.DVHAChangeHealthcareServiceOutage@vermont.gov the following information:

- Organization Name:
- Medicaid Billing ID:
- NPI:
- Contact Name:
- Contact Phone Number:
- Contact Email Address:
- Change Healthcare product used to submit VT Medicaid claims:
- NEW—Brief responses to the following questions:
 - 1. What is your current process(es) for submitting Medicaid claims? (e.g., You are currently fully submitting on paper; Fully submitting electronically; etc.)
 - 2. Please provide an update on your organization's system restoration status and an anticipated timeline for full restoration. (e.g., Your electronic claims submissions are restored; You are working with a vendor on system transitions with an anticipated timeframe, etc.)
- Agreement to terms* of advance (Y/N):

^{*}Terms of Medicaid Advance Payments: Your organization is requesting an advance payment as a result of the inability to submit claims to Vermont Medicaid through your Change Healthcare claims processing system. These advances are emergency payments intended to help your organization withstand the current Change Healthcare system failure. You will be expected to pay any advances back within 60 days of the Change Healthcare system restoration. As indicated in prior communications, you will also be required to submit all claims

for services provided to Medicaid members during the emergency period within timely filing guidelines.



To Unsubscribe, click <u>here</u>.