



COMMISSIONER  
Adelaide Horn

June 29, 2007

To: Community Services Providers  
Nursing Facility Providers  
Therapy Providers

Subject: Texas Department of Aging and Disability Services  
Chief Financial Office  
Information Letter No. 07-31  
**Fiscal Year 2007 Year-end Closeout Processing**

September 1, 2007, starts a new state Fiscal Year (FY08). It is standard for there to be a period of time when new claims are not processed while accounts are being closed out at the end of the fiscal year.

This is an important notice that the FY07 cutoff for claim payments is earlier than usual this year due to DADS accounting system upgrades scheduled for the last two weeks of August. DADS also will not be able to draw federal funds to pay for FY07 LTC claims after August 22, 2007.

**It is important that, by August 20, providers have billed for all delivered services to ensure that as many claims as possible are paid before September 2007.** Please note the information provided below regarding DADS/Comptroller and Miscellaneous Claims cutoff dates.

#### DADS/Comptroller Cutoff Dates

**The dates below reflect planned schedules subject to change.**

**Please check [tmhp.com](http://tmhp.com) or the DADS website for online updates.**

Claim Type	Last Service Date to be Billed & Paid in FY07	Last FY07 Claim Submission Date	Payment Date (Warrant or Electronic Funds Transfer Available)
Paper	August 13, 2007	August 14, 2007 <i>Claim must be received at TMHP by 5:00 p.m.</i>	August 22, 2007
Electronic	August 19, 2007	5:00 p.m. August 20, 2007	August 22, 2007

- 5:00 p.m. Thursday, August 14 – Paper Submitters' Year-end Deadline. Paper claims for unbilled services should be mailed in time to be received at the Texas Medicaid & Healthcare Partnership (TMHP) no later than 5:00 p.m. Tuesday, August 14, 2007, for services delivered through August 13, 2007. Providers should give consideration to overnight delivery of paper claims to ensure timely receipt.
- 5:00 p.m. Monday, August 20 – Year-end Claims Cutoff for Electronic Submitters. The last day to file claims to be processed in FY07 is Monday, August 20, 2007, for services delivered through August 19, 2007. Claims submitted after August 20 will be processed by TMHP but cannot be processed by the DADS financial system (HHSAS) to be sent to the State Comptroller for processing until September 4, 2007, for payment on or after September 7, 2007.
- August 22 – Final FY07 Payment. Payment (via electronic funds transfer or warrant) for claims billed by August 20, 2007, can be expected on or after August 22, 2007, depending on your financial institution.
- September Payments Resume. Payments for claims billed after August 20, 2007, can be expected after DADS financial processing resumes in early September. Payments via electronic funds transfer or warrant will be available on or after September 7, 2007.

Providers should continue to enter claims as usual throughout this closeout period. TMHP will continue to process claims received after August 20, 2007, so they can be transmitted to the Comptroller on September 4, 2007, for payment on or after September 7, 2007. LTC Online Portal submittal of Forms 3618, 3619, and 3652-A is not affected by the FY07 cutoff.

### Miscellaneous Claims

Claims for services provided in Fiscal Year 2005 (September 1, 2004 – August 31, 2005) will become miscellaneous claims that TMHP cannot handle through the standard payment process after the following cutoff dates:

- 5:00 p.m. Thursday, August 9 – Paper Miscellaneous Claims Cutoff. Any paper LTC Claim Forms 1290 for services provided in Fiscal Year 2005 that are received by TMHP after 5:00 p.m. Thursday, August 9, 2007, will be processed as Miscellaneous Claims. DADS strongly encourages providers to consider using overnight delivery of paper claims to ensure receipt of FY05 claims prior to the August 9 deadline.
- Noon Wednesday, August 15 – Electronic Miscellaneous Claims Cutoff. Any electronic claims for services provided in FY05 that are submitted to TMHP after noon Wednesday, August 15, 2007, will be processed as Miscellaneous Claims.

Miscellaneous claims occur when the service dates on a claim are earlier than the current fiscal year plus the two prior fiscal years. Claims for services that are less than eight years old and/or those that total less than \$50,000 owed to a single legal entity are paid on a first-come, first-served basis using funds appropriated during each legislative session. Miscellaneous claims that total over \$50,000 and/or are for services more than eight years old cannot be paid except as a special line item in the State budget.

Also refer to the May 18, 2007, Information Letter No. 07-51, *Remittance and Status (R&S) Report Information*, for further information on avoiding miscellaneous claims.

### Claims for Different Fiscal Years – LTC Claim Form 1290

Providers **must not** combine in the same Long Term Care Claim Form 1290 any line item details for services provided in different state fiscal years. Thus, since September 1 marks the beginning of each state fiscal year, two (2) separate Forms 1290 are required to bill for services that were provided from August 20 through September 15, 2007, for example:

- The first Form 1290 should include only the services that were provided on or after August 20, 2007, through August 31, 2007
- A second Form 1290 should be prepared to include services that were provided on or after September 1, 2007, through September 15, 2007.

Note: All August and September line items combined in the same claim form will be denied.

**Important:** Providers should use the current (January 2007) version of the Form 1290. After July 30, 2007, TMHP can no longer accept outdated Forms 1290.

Please contact Provider Claims Services at 512-438-2200, option 1, with questions about this letter.

Sincerely,

*[signature on file]*

Gordon Taylor  
DADS Chief Financial Officer

GT: nmp