



Provider Newsflash

January 2016

Medicare Advantage Member Billing Requirements

Purpose of this communication

- To remind home health providers of some of the billing requirements for patients with Medicare Advantage coverage (Medicare Advantage Members) and that Medicare Advantage Member claims that do not adhere to these requirements will be rejected.

What do I need to know?

- All home health claims for services provided to Medicare Advantage Members must be billed using the institutional (837i) format.
- All home health claims for services provided to Medicare Advantage Members must include a CMS HIPPS code.
- Do NOT include a HIPPS code on claims for services provided to patients who are NOT covered by a Medicare Advantage plan.
- For BlueCard Medicare Advantage Members only:
 - In addition to the HIPPS code, include both the Treatment Authorization Code (TAC) and Value Code '61' with the Core-Based Statistical Area (CBSA) code
 - Include the TAC in box 63 and remove all authorization numbers from this field when a TAC is present
 - Include the Value Code in box 39. For Value Code 61, include the CBSA codes

What do I need to do?

- If you submit electronic claims to CareCentrix, contact your clearinghouse to ensure you are registered to bill CareCentrix using the 837i format
- If you submit paper claims to CareCentrix, ensure that you bill using the institutional format
- If you submit electronic claims to CareCentrix, review all 277 reports for rejections and re-submit a clean claim within timely filing guidelines
- If you submit paper claims to CareCentrix, review all paper rejection notices for rejections and re-submit a clean claim within timely filing guidelines
- Review the CareCentrix Provider Manual posted at our Provider Portal for more information regarding billing requirements.

Is there anything else I need to know?

- If you have any questions, please contact your assigned Provider Management representative for further assistance. For a complete listing of Provider Management contacts, please reference the CareCentrix Provider Manual.

Thank you in advance for your cooperation and continued partnership.