

MEDICAID PROVIDER BULLETIN

April 2017

IMPORTANT: claim edits for *Ordering, Referring, Prescribing and Attending Providers* — educational webinars available

Summary: Effective June 1, 2017, in accordance with federal regulation *42 CFR § 455.410 — Enrollment and Screening of Providers* and under the guidance of the Department for Medicaid Services (DMS), Anthem Blue Cross and Blue Shield Medicaid (Anthem) is implementing claim edits to validate that the ordering, referring, prescribing and/or attending provider submitted on every claim, as applicable, is enrolled with the Kentucky Medicaid program. Claims submitted with dates of service on or after April 1, 2017, will be subject to the validation process.

Please take note of the billing requirements as outlined below:

- Validation of the ordering or referring provider is **required** on the claim.
 - Applies to **all** claim types (*UB04/CMS1450* and *CMS1500*) when billed by the DMS billing provider types (PT) identified below.
 - Ordering or referring provider must be enrolled and active with DMS.
 - Ordering or referring provider NPI must be submitted.
 - Ordering or referring provider must be an individual and not a group.
 - DMS assigns a PT to the provider during the Kentucky Medicaid application process. The provider's NPI/taxonomy combination identifies the provider's Medicaid ID and PT within the DMS system.
 - Ordering or referring provider **must** be submitted when billed by the DMS billing PT below:
 - PT 18 — Private Duty Nurse
 - PT 36 — Ambulatory Surgery Center
 - PT 37 — Independent Lab
 - PT 50 — Hearing Aid Dealer
 - PT 52 — Optician
 - PT 54 — Pharmacy: All Xover services billed
 - PT 70 — Audiologist
 - PT 76 — Multi-therapy Agency
 - PT 79 — Speech Language Pathologist
 - PT 86 — X-Ray/Miscellaneous Supplier
 - PT 87 — Physical Therapist
 - PT 88 — Occupational Therapist
 - PT 90 — DME
 - Ordering or referring provider **must** be one of the following DMS PT:
 - PT 60 — Dentist
 - PT 64 — Physician Individual
 - PT 74 — Certified Registered Nurse Anesthetist
 - PT 77 — Optometrist
 - PT 78 — Certified Nurse Practitioner
 - PT 80 — Podiatrist
 - PT 85 — Chiropractor
 - PT 95 — Physician Assistant

<https://mediproviders.anthem.com/ky>

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AKYPEC-1184-17 April 2017

- Validation of prescribing provider is **required** on pharmacy claims only.
- Validation of attending provider is **required** on all *UB04/CMS1450* claims.
 - Applies to **all** DMS billing PT.
 - Attending provider must be enrolled and active with DMS.
 - Attending provider must be an individual and not a group.
 - Attending provider NPI and taxonomy must be submitted.
 - DMS assigns a PT to the provider during the Kentucky Medicaid application process. The provider's NPI/taxonomy combination identifies the provider's Medicaid ID and PT within the DMS system.
 - Attending provider **must** be one of the following DMS PT:
 - PT 60 — Dentist
 - PT 64 — Physician Individual
 - PT 74 — Certified Registered Nurse Anesthetist
 - PT 77 — Optometrist
 - PT 78 — Certified Nurse Practitioner
 - PT 80 — Podiatrist
 - PT 85 — Chiropractor
 - PT 95 — Physician Assistant

Claim form	Attending provider	Ordering provider	Referring provider	Prescribing provider
CMS 1500	Not applicable	<p>Paper claim: Box 17 — name Box 17B** — NPI **If multiple providers, then enter using the following order: 1. Referring provider 2. Ordering provider</p> <p>Electronic claim: Loop: 2420E Segment: NM1 Use qualifier: DK — ordering</p>	<p>Paper claim: Box 17 — name Box 17B** - NPI **If multiple providers, then enter using the following order: 1. Referring provider 2. Ordering provider</p> <p>Electronic claim: Loop: 2310A Segment: NM1 Use qualifier: DN — referring</p>	Only for pharmacy claims
UB04/ CMS1450	<p>Paper claim: Box 76 — name /NPI/ taxonomy:</p> <p>Electronic claim: Loop: 2310A Segment: NM1 Use qualifier: 71 — attending Taxonomy: Loop: 2310A Segment: PRV</p>	Not applicable	<p>Paper claim: Box 78 or 79 — name /NPI/ taxonomy:</p> <p>Electronic claim: Loop: 2310F Segment: NM1 Use qualifier: DN — referring</p>	Only for pharmacy claims

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Educational webinar information:

Anthem invites a representative from your office to one of the following educational webinars. The Anthem staff will provide additional education and billing guidance on the *Ordering, Referring, Prescribing and Attending* provider claim edits. Space is limited, so please submit the attached registration form as soon as possible.

May 16, 2017

11:30 a.m. to 12:30 p.m. ET

May 17, 2017

11:30 a.m. to 12:30 p.m. ET

May 16, 2017

2 p.m. to 3 p.m. ET

May 17, 2017

2 p.m. to 3 p.m. ET

Provider action:

Please share this information with your office and billing staff.

Questions:

If you have questions about this communication, please contact your Provider Relations representative or the Provider Services department at **1-855-661-2028**.

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AKYPEC-1184-17 April 2017

You are invited!



Claim edits for *Ordering, Referring, Prescribing and Attending Providers*

Anthem Blue Cross and Blue Shield Medicaid (Anthem) cordially invites a representative from your office to attend one of the following webinars. Anthem staff will provide additional education and billing guidance on the *Ordering, Referring, Prescribing and Attending Provider* claim edits.

May 16, 2017	May 16, 2017	May 17, 2017	May 17, 2017
11:30 a.m.-12:30 p.m.	2 p.m.-3 p.m.	11:30 a.m.-12:30 p.m.	2 p.m.-3 p.m. ET

The seminar is at no cost to participants. Space is limited, so please register by faxing this registration form to our office. Spaces will be filled in the order the registrations are received as the webinars will have a limited capacity of 200 attendees per session.

RSVP by circling the above session date and time you prefer, completing this form and faxing it to Margo Marchman at **1-855-384-4872**.

Participant name: _____

Number of attendees: _____

Provider name: _____

Provider tax ID: _____

Contact number: _____

Email: _____

**If you have questions, please call
Margo Marchman at 502-619-6800,
ext. 26774 or email to
margo.marchman@anthem.com.**