

Government Programs Claims Handling and Post-adjudication Process Changes, Effective Jan. 1, 2017

A number of changes will be implemented as of January 1, 2017, to help improve efficiencies in routing, handling and post-adjudication processes for government programs claims. A preview of the changes and related reminders is included below. **Additional information will be published in the coming months.** Please watch the *Blue Review* and News and Updates section of our website at bcbsmt.com/provider.

BLUE CROSS MEDICARE ADVANTAGESM

The following changes will apply to claims submitted for Blue Cross Medicare Advantage PPOSM and Blue Cross Medicare Advantage HMOSM members (alpha prefixes YDJ, YDL):

- **New Payer ID (66006)** – Beginning Jan. 1, 2017, Payer ID 66006 must be included on electronic claims received for Blue Cross Medicare Advantage PPO and Blue Cross Medicare Advantage HMO members. Blue Cross Medicare Advantage claims received with the commercial Payer ID (BCBS) will not be accepted.*

Please note that the Blue Cross Medicare Advantage member ID cards will contain the following applicable state alpha prefix:

State	PPO	HMO
Montana	YDJ	YDL
Illinois	XOD	XOJ
Texas	ZGD	ZGJ
New Mexico	YID	YIJ
Oklahoma	YUX	YUB

The above state alpha prefix must be submitted using the new Payer ID 66006, even for members who seek services from you when out of state. **You will no longer use the commercial payer IDs for out of state members with these prefixes.** Claims with these prefixes will be rejected if submitted to the commercial payer ID.

- **Website Updates**
 - Government specific webpages will be updated with the relevant information.
- **Provider Guides**
 - Information will be updated in the Provider Manuals for each state as well as the 835 Companion Guide
- **Electronic Remittance Advice (835 ERA)**
 - 835 ERA files will be distributed to the address associated with the billing provider's Tax ID and NPI, rather than being distributed to multiple locations.
 - EPS (Electronic Payment Summary) will not be available for MAPD (all states) and IL Medicaid providers post 1/1/17; however, for ERA and non-ERA receivers the Provider Claim Summary's (PCS) will be sent by mail.
 - If the provider is a current ERA receiver for MAPD (all states), they will not need to re-enroll under the new Payer ID for MAPD (all states).
 - The Payer ID on the 835 ERA will now match the Payer ID that is submitted on the claim, (if submitting MAPD claims using 66006 then the ERA Payer ID will also reflect 66006).

- **Paper Claim Mailing Address and Fax**
 - Effective Jan. 1, 2017, the mailing address and fax number for paper claims for **non-delegated providers** will be:
 - Blue Cross Medicare Advantage
 - P.O. Box 3686
 - Scranton, PA 18505
 - Fax:** (855) 674-9192
 - Effective 2/1/17, claims received at the old BCBSMT mailbox will be rejected with a letter informing providers to resubmit to the above correct mailbox.
- **New EFT Payment Cycle**
 - Effective Jan. 1, 2017, Blue Cross Medicare Advantage claim payments will be sent on a weekly basis (currently MT is on a bi-weekly payment cycle).
- **New processes**
 - New format for payments:
 - EFT trace number:
 - MAPD will start with a source code of “M” instead of “C”
 - A new process will be implemented for claims overpayment recovery:
 - ERM (Electronic Refund Management) claims refund and inquiry process post 1/1/17 will not be available through ERM.
 - Request for refund letters will be sent by mail for all providers
 - Providers may submit requested and voluntary refunds to the new lockbox listed below
 - New lockbox address for provider overpayments
 - Health Care Service Claims Overpayment
 - 29068 Network Place
 - Chicago, IL 60673-1290

*If you utilize a practice management/hospital information system or billing service, and/or a clearinghouse other than Availity™ or HeW for electronic claim submission, please contact your vendor to confirm they are using the new Payer ID for the alpha prefixes referenced above, rather than assigning their own unique number.

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