

PROVIDER ALERT

CLAIMS: UPDATE ON 183 DENIALS, CBRS SAME DATE BILLING, TRAINING OPPORTUNITY AND CHECKWRITE FREQUENCY

October 2, 2013

Update:183 Denials – Rendering, Supervising and Billing Provider Information

On Friday, September 27th, we issued a Provider Alert containing important information impacting claims payment. Today, in alignment with our 60 day transition period and to support you, we are relaxing the edits impacting the "183" denials related to information required in boxes 24J and 31 and will process claims using information supplied through box 33 and 33a. You do not need to resubmit claims for services through the transition period (ending October 30, 2013) related to 183 denials but should work now to complete all claims going forward as outlined in the initial September alert. From October 31 forward, you will need to submit all required information including boxes 24J and 31.

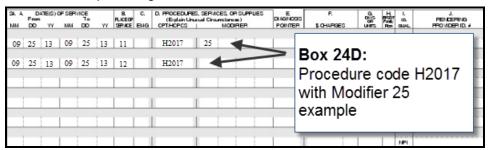
CBRS: Billing for the Same Service on the Same Date

In order to accurately process claims, include a procedure code modifier to denote when CBRS services are offered in multiple locations on the same date of service.

On the CMS claim form, Box 24D:

- Use procedure code H2017
- Use modifier code 25 or 76

The use of a modifier does not have an impact on your reimbursement rate. The medical record should reflect the multiple place of service on the same date of service indicating the need for the modifier. The image below provides an example using Modifier Code 25.



Claims Training

Optum Idaho is offering a webinar addressing inclusion of required claim elements (rendering, supervising, billing provider information and use of modifiers) and giving an overview of the Provider Express claim entry process. These will be offered Wednesday through Friday, October 2-4, 2013 at 11:00 a.m. Mountain Standard Time. To register, go to: www.optumidaho.com > Providers > Training > Please Register.

Update: Checkwrite Frequency

Effective immediately, Optum Idaho will use a checkwrite process two times per week to ensure network providers experience timely receipt of reimbursement for services rendered.