# **Electronic Billing Newsletter**

First Coast Service Options, Inc. A/B MAC Electronic Billing Newsletter

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This *Electronic Billing Newsletter* is published by First Coast Service Options Inc's Electronic Data Interchange (EDI) department for the electronic billing providers, vendors, billing services, and clearinghouses. This bulletin should be shared with all health care practitioners and managerial members of the provider/supplier staff.

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## **AB** Change Healthcare Cybersecurity Incident

Change Healthcare experienced a cybersecurity incident in February that impacted a large volume of Medicare providers. Those impacted were not able to submit electronic claims or receive their electronic reports, including the Electronic Remittance Advice (ERA) files through their normal method.

We provided the impacted providers with several different options for claim submission and remittance retrieval. Many submitted enrollment requests to make changes to their electronic setup. This created an atypical inventory level and **increased the timeframe for EDI enrollment form processing**. Please be patient while we work diligently to process the forms as quickly as possible. Do not send duplicate forms.

In the beginning of April, Change Healthcare successfully transitioned the impacted providers to a secure connection through the Optum clearinghouse. Providers who have not changed their electronic setup are now instructed to contact their clearinghouse representatives to discuss system updates and **resume electronic billing** right away.

First Coast also approved a temporary exception to Medicare's electronic submission requirements that would allow for impacted providers to submit paper claims. Now that the connection has been restored, paper claim submissions should be discontinued immediately.

To be prepared for any future disruptions, we encourage all electronic billers to have a backup billing solution. The combination of the free <u>PC-ACE</u> software and the SPOT portal is an excellent backup option. Visit the <u>how to register for SPOT</u> webpage for information on gaining access to SPOT. The PC-ACE software can be requested on the SPOT enrollment form.



# ABe SPOT account changes

Enrollment for SPOT is only required one time per provider office. Once you are enrolled, changes can be made to your existing account as indicated below.

**To add users** – Each new user will need to setup an account and request the FCSO - SPOT End User role in the identity management (IDM) system by following the <u>SPOT End User</u> <u>Instructions</u>. The office approver or backup approver would then need to follow the <u>SPOT</u> <u>approver instructions</u> to approve the end user request.

**To enroll additional providers –** Each provider office with a different group PTAN will need to complete the <u>SPOT enrollment form</u>. Complete all required fields. The type of request section of the SPOT enrollment form gives you the option to assign a new submitter ID for the additional provider or to add them to your existing portal submitter ID. You will be able to view the additional provider using your IDM account for either option. If a new submitter is assigned, you will need to request an additional role for the new submitter/organization. If they are linked to your existing portal submitter ID, the new provider will display for all users in your current organization.

**To change ERA to SPOT -** the <u>SPOT enrollment form</u> is needed with all required fields completed. Select the 'Assign ERA to an existing submitter/receiver ID' option in the ERA section and fill in your existing SPOT Submitter ID and name. This information can be found by clicking on "My IDM Account" while logged into SPOT.

**To enroll for PC-ACE software -** the <u>SPOT enrollment form</u> is needed with all required fields completed. Select the 'Add 837 claim submission' box in the Type of Request section and fill in your existing SPOT Submitter ID and name. This information can be found by clicking on "My IDM Account" while logged into SPOT. Then select yes from the dropdown box to enroll for the PC-ACE software in the PC-ACE section.



**To change OA/OBA** - the <u>SPOT update form for organizations</u> is needed with all required fields completed. Your Portal Submitter ID can be found by clicking on "My IDM Account" while logged into SPOT.

For information on other types of account updates, please refer to the <u>SPOT account updates</u> web page. See the <u>instructions for completing the EDI SPOT Enrollment Form</u> web page for detailed instructions.

If you are not familiar with SPOT, it is our free and secure online portal for providers, billing services, and clearinghouses. Access the <u>how to register for SPOT</u> webpage today for the link to the enrollment form and complete instructions to obtain access. To enroll for the PC-ACE software, simply select Yes from the PC-ACE dropdown on the <u>SPOT enrollment form</u>.

# ABerror PC-ACE Version 6.2 Upgrade

PC-ACE is a free software program that enables electronic billing for both Medicare Part A and Part B claims in a Health Insurance Portability and Accountability Act (HIPAA)-compliant format. To provide the most up-to-date information within PC-ACE, the software program is updated quarterly. The most current upgrade, which is PC-ACE version 6.2, was released **April 1, 2024.** 

To streamline the distribution process for software program upgrades, the PC-ACE software program is available via internet download from the <u>PC-ACE release notes webpage</u>. **Please take time to upgrade now.** The Centers for Medicare & Medicaid Services (CMS) requires you to use the most current version of the software program and to eliminate the use of prior versions within 90 days of receipt of this notification. Therefore, please install this software as soon as possible, but **no later than June 1st**, which is the required upgrade compliance date.



**IMPORTANT:** An installation password is required to install or upgrade the PC-ACE software. This password was provided in your EDI PC-ACE approval letter. If you do not have this letter, please contact the EDI Help Desk. The password is needed for each quarterly upgrade or new installation; therefore, please keep it in a safe place where it is readily available.

#### **Educational Events**

First Coast offers a variety of education events every month. The events shown below are the EDI-related topics that are available routinely.

- Submitting electronic claims using PC-ACE
- IDM and SPOT enrollment
- SPOT features Part A
- SPOT features Part B
- Enrolling for electronic billing

Access to our events is free with no required accounts to manage. Simply complete a few fields in our registration form and you are ready to participate. Continuing education units (CEUs) may be awarded for successfully completing events.

We encourage you to visit the <u>Events Calendar</u> often to review the upcoming events and register to attend.

# A Top Ten Electronic Billing Errors – Part A

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A8:562:128:85	This Claim is rejected for a relational field in error within the Billing Provider's National Provider Identifier (NPI) and Billing Provider's Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A7:480	Claim rejected for invalid information in the Other Carrier Claim filing indicator.	The Claim Filing Indicator for the other insurance cannot be MA.
A8:306	This Claim is rejected for a relational field in error for Service(s) Rendered.	Not Otherwise Classified (NOC) procedure codes require a detailed description of the service. NOC drug codes require the name and dosage of the drug. Enter the description in the 2400 SV101-7.
A8:496:85	Claim Rejected for relational field in error. Submitter not approved for electronic claim submissions on behalf of the Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing submitters will result in claim rejections.
A7:164:IL:188	This Claim is rejected for containing Invalid Subscriber's contract/member number per the Social Security Number Removal Initiative (SSNRI) transition period.	Verify the MBI is valid.
A7:510:188	This Claim is rejected for Invalid Information for the Future date within the Statement From-Through Date.	Verify the Statement From-Through Date is not a future date.
A7:455	This Claim is rejected for Invalid Information within the Revenue code for services rendered.	Verify that you are using valid revenue codes.
A7:513	This Claim is rejected for Invalid Information within the HIPPS Rate Code for services Rendered.	Verify the HIPPS Rate Code is valid.

# **B** Top Ten Electronic Billing Errors – Part B

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A8:496:85	This Claim is rejected for relational field due to Billing Provider's submitter not approved for electronic claim submissions on behalf of this Billing Provider.	Verify the providers NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing will result in claim rejections.
A7:164:IL	This Claim is rejected for Invalid Information for a Subscriber's contract/member number.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:562:82	This Claim is rejected for Invalid Information for a Rendering Provider's National Provider Identifier (NPI).	Verify the rendering NPI is correct and a member of the group NPI.
A8:562:128:85	This Claim is rejected for relational field in the Billing Provider's NPI (National Provider ID) and Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A7:562:85	This Claim is rejected for Invalid Information in the Billing Provider's NPI (National Provider ID).	Verify the Billing provider's NPI is correct prior to submitting claims.
A7:535	This Claim is rejected for Invalid Information within the Claim Frequency Code.	Verify that Loop 2300 CLM05-3 is a '1'. Medicare only accepts original claims.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:732:464	This Claim is rejected for Invalid Information within the Payer Assigned Claim Control Number Information submitted inconsistent with billing guidelines	Verify that the Payer Claim Control Number in 2300.REF with REF01=F8 is not present.
A8:306	This Claim is rejected for relational field Information within the Detailed description of service	Verify that a description is present when a non-specific procedure code is reported.

## ABe Subscribe to our Email Lists

Do you want to be the first to be notified about changes related to Electronic Data Interchange (EDI), SPOT announcements, and the EDI Newsletter? Join our email lists for the latest Medicare broadcasts from FCSO, delivered directly to your email inbox.



Signing up is simple:

- 1. Navigate to medicare.fcso.com.
- 2. Click the "Join eNews" link in the upper right.
- 3. Enter your email and NPI.
- 4. Select all appropriate mailing lists. We encourage all EDI billers to subscribe to the Electronic Data Interchange list.
- 5. Click Submit.

You can manage your subscription from any email you receive through this mailing list. Simply click on the "**Manage your Subscription**" link at the bottom of the message.

## **B**<sup>®</sup> Information Needed When Calling EDI

To ensure the privacy of our customer's protected information, we must verify certain criteria with every telephone call. When you call EDI Services or the SPOT Help Desk, please be sure to have your Provider Transaction Access Number (PTAN), National Provider Identifier (NPI), and the last five digits of the organization's Tax ID. Having all this information readily available will allow for us to assist with your inquiry more quickly and efficiently.

### AB: Contact Us

We are available at the times and numbers shown below. Please contact us with any questions related to information in this newsletter.

#### **JN EDI Help Desk**

1-888-670-0940 Monday-Friday, 8 a.m. – 5 p.m. ET/CT

**SPOT Help Desk** 1-855-416-4199 Monday-Friday, 8 a.m. – 5 p.m. ET/CT



#### Website Contact Information

FCSO EDI Contact information SPOT: Contact information medicare.fcso.com

### Thank you for reading our newsletter!