PROVIDER QUICK POINTS PROVIDER INFORMATION



July 24, 2019

Personal Care Assistant (PCA) Provider Claim Submission Reminders for 2019 Services

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) has been working to complete the transition to our new processing system for Blue Cross members enrolled in the following Minnesota Health Care Programs; Minnesota Senior Care Plus (MSC+) and Minnesota Senior Health Options (MSHO). This information is being published to provide PCA agencies with accurate claims submission guidelines.

PCA Claims Rejections Due to Provider Billing Identifiers

Claims submission identified errors:

- PCA providers are submitting multiple identifiers in the billing fields. Providers must not submit both an NPI (National Provider ID) and their DHS assigned UMPI to identify their billing entity.
- PCA providers are submitting claims using their unique Blue Cross contracting numbers. This number is not recognized by the new processing system. Providers must use either their NPI or their DHS assigned UMPI number when submitting claims to Blue Cross.

Claim submission options for billing provider:

- For providers assigned an NPI, the NPI should be submitted in box 33a of the CMS1500 professional claim form. If using an assigned NPI, box 33b must be blank.
- For providers that are not assigned an NPI, the DHS assigned UMPI number should be used for billing. Box 33b of the CMS1500 professional claim form must contain the 2-character qualifier value of G2 followed by the DHS assigned UMPI. In this case box 33a must be blank.

If the provider has received a reject letter for either of the reasons outlined above, a new claim must be submitted with the corrected fields. Providers are not able to submit replacement claims for these situations. These claims are not able to be adjusted by Blue Cross.

Submitting to BCBSMN Blue Plus Medicaid vs Bridgeview

State plan PCA claims and supervision (T1019 or T1019-UA) should be submitted to BCBSMN Blue Plus Medicaid using payer ID 00562.

Extended PCA services (any T1019 code that includes a UC modifier) and other elderly waiver services should be submitted to Bridgeview using payer ID FS802 as they were prior to the move to the new system for processing.

If a claim is submitted to the incorrect payer, the claim will be rejected. The remittance will contain the rejection code CO/109 which states "Claim not covered by this payer/contractor. You must send the claim to the correct payer/contractor."

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Instructions for Obtaining Provider Remittances

Providers must register with Availity under payer ID 00562 BCBSMN Blue Plus Medicaid to receive an electronic remittance. Providers that have not completed their registration should contact Availity. Availity is the Blue Cross clearinghouse responsible for the delivery of remittances to our providers. Registration may be completed on the Availity website at www.availity.com or via phone at **1-800-282-4548**.

Questions?

If you have questions, please contact provider services at 1-866-518-8448, 7:00 am to 7:00 pm.