

PROVIDER QUICK POINTS

PROVIDER INFORMATION



October 2, 2015

New Operating System Provider Transaction Differences

On November 1, 2015, Blue Cross and Blue Shield of Minnesota (Blue Cross) will begin migrating subscribers from our legacy operating system to our new operating system. Subscriber migration will continue over the next few years with the goal of having all subscribers migrated to the new operating system by the end of 2018.

Subscribers who have migrated to the new operating system can be identified by a group number that is eight digits with no alpha character or dashes (an example is: 10051065). Subscribers who have not migrated to the new operating system will have a group number consisting of alpha and numerical characters (an example is: YE508-00).

This Quick Point is being published to provide a summary of differences that have been identified related to Provider Transactions.

- Claim numbers (ICNs) on the new operating system are 11 digits in length. ICNs on our legacy system are 13 digits in length.
- The EFT # on our legacy operating system has a prefix consisting of “EFT” plus the date (i.e., EFT20150908), the EFT # on the new operating system is all numeric and does not include the date.
- There may be different CARC and RARC ANSI code combinations for the same denial type depending on the operating system on which the claim processed.
- The criteria used to determine if a claim is rejected on a 277CA is different between the two operating systems. For example, depending on which operating system the claim processes on the same claim scenario could reject in one system on a 277CA and deny on an 835 on the other system.
- Remits (835s) for inpatient claims priced with either APR-DRG or MS-DRG methodology will only show processing at the claim level for claims processed in the new operating system. 835s for these claims processed on our legacy operating system will continue to show the correct claim level processing, but also will continue to show the processing incorrectly distributed at the line level.
- If a provider submits an 837 file that includes claims for subscribers on both the legacy operating system and the new operating system, the provider will receive 277CAs from each operating system, separate 835s from each operating system, and separate payments (EFTs or checks).
- If a professional claim is submitted for a date range during which the subscriber migrates from the legacy operating system to the new operating system, the claim will be split. The claim will first process on our legacy operating system for the dates of service prior to the change. The claim lines for the dates of service after the change will be denied on the 835 with RARC MA15 (Your claim has been separated to expedite handling. You will receive a separate notice for the other services reported). The denied claim lines will then be internally forwarded to the new operating system to process and a second 835 will be created to show the processing.
- If an institutional claim is submitted for a date range during which the subscriber migrates from the legacy operating system to the new operating system, the claim will process on the appropriate system based on the “statement from date”.
- Providers who have submitted claims for subscribers on both operating systems will receive two 1099s at the end of the year, one from each operating system.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.

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