

MediChat Newsletter

For your **Medisoft Patient Accounting Program**

May 2008

From: Integrated Health Care

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If you use the Availity (AVAP) Electronic Claim Module in Medisoft read below:

NPI AND AVAILITY ELECTRONIC CLAIM SUBMISSIONS

As of May 23rd, the NPI deadline date –

Availity has been updating their payer listing as to what is required: NPI only or NPI and Legacy ID's.

Availity has a NPI Readiness document at the following link:

<http://www.availity.com/documents/npireadiness.pdf>

Type this into your internet browser or go to www.availity.com

Press NPI on the left margin, press NPI again- on the right hand side of this page

[Press the NPI Readiness List](#)

This is a 6 page document listing the status of their connected payers.

There are 4 options that each Payer has selected at this point in time.

Option 3 is NPI only and no Legacy numbers are being allowed.

Currently:

BCBS of IL: is at Option 3 meaning only the NPI must be on the claims.

IL Medicaid: is at Option 1 meaning include the NPI and the Legacy number on claims. Do not remove any Medicaid legacy id numbers at this point in time.

WPS/Medicare: is at Option 4 meaning NPI is required and the Legacy id is allowed

Please review this list for the other payers and how they have elected to receive the provider number information.

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NEW REJECTION: Beginning on Friday May 23rd, the following error has been occurring on Medicare claim submissions:

*The legacy identifier, Employer's Identification Number, may not be used for this payer after the National Provider ID (NPI) is mandated for use.
Please correct and resubmit. Loop 2310B Ref 01 Element 01.*

THE FIX:

For Versions 12 & 14: please go to our website www.ihctech.com
Download then install the Electronic Claim Module update 12.10 for Version 12 users
- or - 14.04 for Version 14 users.

*** Also, Under the documentation section - download and **print the NPI Instructions**
this will tell you what to do in your Medisoft program.

VERSION 11 USERS:

There will not be an edi update patch for this issue.
We are not aware of any other work around for the above error at this time.
You may need to upgrade your Medisoft program - please contact Lee Fugett for more details.

VERSION 14 USERS - New Feature in Version 14:

Click on File - Program options:
Go to the "Data Entry" tab, under the section "EDI" –
Uncheck "Automatically calculate pin qualifiers"

If you uncheck this option and leave the insurance qualifiers blank, the program will not populate the insurance qualifiers in the electronic claims file

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Taxonomy Code for Paper Claims

In the May Blue Review for BCBS of IL – there is an article that states for paper claims, the taxonomy code needs to be in field 17a, 24j and 33b.

The article does not state claims will be denied- it states to avoid delays.

To accommodate this in your Medisoft program:

Paper submitters only:

- Edit your BCBS insurance
- Go to the PIN's tab
- Enter your taxonomy code in the pin column
- Enter **ZZ** in the Qualifier column
- Do the same in the Group ID and Qualifier column

This information will enter ZZ and your taxonomy code into boxes 24j and 33b using the CMS 1500 Primary w/Form.

Edit your Referring Provider- on the pins tab next to BCBS insurances;
Put **their** taxonomy code and ZZ as the qualifier. This will put fill in box 17a.

Electronic submitters only:

Edit your BCBS insurances - in the practice ID field- enter **NPI**:
This is a trigger to exclude the pins tab information when sending claims electronically;
but the paper format will still pull the information

Follow the same steps as above for paper submitters.

** Please note: We have not tested this as of yet.

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This newsletter is from:

Integrated Health Care

15545 S 71st Court, Suite 101

Orland Park, IL 60462

Phone: 708-468-4070

toll free 866-442-6334

Fax: 708-468-4073

Support: 708-468-4072

email: info@ihctech.com



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