# Direct Data Entry (DDE) Testing

# Information Sheets

## Background Information

On March 14, 2021, MassHealth will implement the following modifications to the submission requirements related to Operating Physician, Service Facility location, and Supervising Physician information submitted on claims transactions. The changes will impact both 837 batch claims transactions and the Provider Online Service Center (POSC) Direct Data Entry (DDE) claims transactions.

Additionally, any Operating, Supervising, or Attending physician entered on a claim should be actively participating/enrolled with MassHealth, at least as a nonbilling provider. Informational edits will be issued for any claim that includes an Operating, Supervising, or Attending Physician who is not actively participating/enrolled with MassHealth.

MassHealth providers may submit DDE test claims to test the changes outlined below, by using their existing POSC login credentials on the MMIS Test Portal link below between March 1 – March 12, 2021.

<https://mmis-portal-tptest.ehs.state.ma.us/EHSProviderPortal/providerLanding/providerLanding.jsf>

**Operating Physician** (Institutional Claims)

If a surgical code and/or if an Other Operating Physician is listed on the claim, an Operating Physician must be listed with a valid NPI. These fields already exist in the Billing and Service tab of the POSC.

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***Note****: The POSC will display a warning message if a surgical code is entered but an Operating Physician is not entered. This will not prevent the claim from proceeding to adjudication. However, an Error Message will display if an Other Operating Physician is entered on the claim, an Operating Physician must be entered, or the claim will not proceed to adjudication.*

**Service Facility Location Address** (Institutional and Professional Claims)

The Service Facility Location Address (Address 1, City, State and Zip Code) and Service Facility Name are both required if either of those fields are entered. The fields will be added to the Extended Services tab of the POSC.



***Note****: The POSC will display Error Messages if the required Service Facility Address fields are not entered or are incomplete when a Service Facility Provider Name is entered, or vice versa. The claim will not proceed to adjudication if these requirements are not met.*

**Supervising Physician** (Professional Claims)

A Supervising Physician should be enrolled with MassHealth if entered on the claim. The fields already exist in the Billing and Service tab



but will also be available in the Procedure tab



## Testing Criteria: Use the criteria below to determine if your test claim has passed testing.

**Operating Physician**

Any Operating Physician entered on a claim should be actively participating/enrolled with MassHealth, at least as a nonbilling provider. Informational edits will be issued for any claim that includes an Operating, Supervising, or Attending Physician who is not actively participating/enrolled with MassHealth. View the relevant warning and error messages below.

**Entering a Surgical Procedure Code**

When entering a surgical procedure code on a claim on the POSC, the following **Warning Message** will display to remind providers of the Operating Physician requirement:

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**An Operating Physician should be entered when entering a Surgical Procedure**

**Adding an Other Physician**

If the provider enters the Other Operating Physician information on the claim without entering the Operating Physician information, the following Error Message will display:



**An Operating Physician is required when listing an Other Operating Physician**

Below are the Edit Codes and Claim Adjustment Reason Codes (CARCs)/Remittance Advice Remark Codes (RARCs) the provider may receive for a claim submitted with Operating Physician information requirements, along with their descriptions. All edits outlined within this document will temporarily be informational only. MassHealth will issue further guidance with advance notice before implementing denials for these specific edits.

| **Edit Code** | **CARC/RARC** | **Description** |
| --- | --- | --- |
| **383** – FIRST OPERATING PHYSICIAN ID INVALID | **Adjustment Reason Code:** 16 - CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).**Remark Code(s):** N270 - MISSING/INCOMPLETE/INVALID OTHER PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN IS SUBMITTED ON THE CLAIM BUT THE NPI IS NOT EXACTLY 10 NUMERIC DIGITS |
| **477** – DETAIL FIRST OPERATING PHYSICIAN ID INVALID | **Adjustment Reason Code:** 16 - CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).**Remark Code(s):** N270 - MISSING/INCOMPLETE/INVALID OTHER PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN IS SUBMITTED ON THE CLAIM BUT THE NPI IS NOT EXACTLY 10 NUMERIC DIGITS |
| **1021** – FIRST OPERATING PHYSICIAN ID NOT ON FILE | **Adjustment Reason Code:** 208 - NATIONAL PROVIDER IDENTIFIER - NOT MATCHED. **Remark Code(s):**  N270 - MISSING/INCOMPLETE/INVALID OTHER  PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN IS LISTED:WITH AN INVALID NPI / PID/SL**OR** THERE IS NO NPI / PID/SL SUBMITTED |
| **1053** – DETAIL FIRST OTHER PHYSICIAN ID NUMBER NOT ON FILE | **Adjustment Reason Code:** 208 - NATIONAL PROVIDER IDENTIFIER - NOT MATCHED. **Remark Code(s):**  N270 - MISSING/INCOMPLETE/INVALID OTHER  PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN IS LISTED:WITH AN INVALID NPI / PID/SL**OR** THERE IS NO NPI / PID/SL SUBMITTED |
| **1028** – NPI REQUIRED FOR OPERATING PHYSICIAN | **Adjustment Reason Code:** 206 – NATIONAL PROVIDER IDENTIFIER - MISSING**Remark Code(s):** N262 - MISSING/INCOMPLETE/INVALID OPERATING PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN WAS SUBMITTED ON THE CLAIM WITH A PID/SL BUT THERE IS NO NPI SUBMITTED |
| **1030** – NPI REQUIRED FOR DETAIL OPERATING PHYSICIAN | **Adjustment Reason Code:** 206 – NATIONAL PROVIDER IDENTIFIER - MISSING**Remark Code(s):** N262 - MISSING/INCOMPLETE/INVALID OPERATING PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN WAS SUBMITTED ON THE CLAIM WITH A PID/SL BUT THERE IS NO NPI SUBMITTED |
| **1025** – OPERATING PHYSICIAN REQUIRED FOR SURGICAL PROC | **Adjustment Reason Code:** 206 – NATIONAL PROVIDER IDENTIFIER - MISSING**Remark Code(s):** N262 - MISSING/INCOMPLETE/INVALID OPERATING PROVIDER PRIMARY IDENTIFIER. | THE OPERATING PHYSICIAN WAS SUBMITTED ON THE CLAIM WITH A PID/SL BUT THERE IS NO NPI SUBMITTED |
| **1029** – OPERATING PHYSICIAN IS NOT ELIGIBLE | **Adjustment Reason Code:** B7 - THIS PROVIDER WAS NOT CERTIFIED/ELIGIBLE TOBE PAID FOR THIS PROCEDURE/SERVICE ON THIS DATE OF SERVICE**Remark Code(s):** N262 - MISSING/INCOMPLETE/INVALID OPERATING PROVIDER PRIMARY IDENTIFIER | THE OPERATING PHYSICIAN WAS SUBMITTED ON THE CLAIM BUT THERE IS NO RECORD FOUND FOR THE PROVIDER **OR** THE PROVIDER IS NOT ACTIVE ON THE DOS  |
| **1031** – DETAIL OPERATING PHYSICIAN IS NOT ELIGIBLE | **Adjustment Reason Code:** B7 - THIS PROVIDER WAS NOT CERTIFIED/ELIGIBLE TOBE PAID FOR THIS PROCEDURE/SERVICE ON THIS DATE OF SERVICE**Remark Code(s):** N262 - MISSING/INCOMPLETE/INVALID OPERATING PROVIDER PRIMARY IDENTIFIER | THE OPERATING PHYSICIAN WAS SUBMITTED ON THE CLAIM BUT THERE IS NO RECORD FOUND FOR THE PROVIDER **OR** THE PROVIDER IS NOT ACTIVE ON THE DOS  |

**PASS CRITERIA:**

**Operating Physician**

The warning message “An operating physician should be entered when entering a surgical procedure” is resolved, and the claim is submitted. If the warning message is not resolved and the claim is submitted, the provider may receive the following informational error messages: 383, 477, 1025, 1028, 1030. If you receive any of these specific messages, please correct the claim and resubmit it.

Providers may validate that the NPI of the operating physician was entered during DDE for a surgery claim.

**Other Operating Physician**

The error message “An operating physician is required when listing an other operating physician” is resolved, and the claim is submitted.

Providers may validate that the NPI of the other operating physician was entered during DDE for a surgery claim.

In general, if the NPI or PIDSL of the Operating Physician or Other Operating Physician entered during DDE is invalid, not on file or the provider is not actively participating/enrolled with MassHealth the above edits would appear in the claim detail panel and can be validated by viewing the ICN related to the test claim entered in claim history.

**Service Facility Location Address**

When entering the data, the following error messages must be resolved if encountered when the Service Facility Location Name and Address are required:

| **Error Message** | **Corrective Action** |
| --- | --- |
| The Service Facility Address is incomplete. Please enter and submit. | Complete the required fields for the Service Facility Location Address (address 1, city, state, zip code)\**The claim will not proceed to adjudication if this requirement is not met.* |
| The Service Facility Address is required. Please enter and submit. | Complete the required fields for the Service Facility Location Address (address 1, city, state, zip code)\**The claim will not proceed to adjudication if this requirement is not met.* |
| The Service Facility Name is required. Please enter and submit.  | Complete the field for the Service Facility Name. *\*The claim will not proceed to adjudication if this requirement is not met.* |

**PASS CRITERIA:**

The error messages noted above are resolved, and the claim is submitted.

**Supervising Physician**

If entered on the claim, the Supervising Physician should be actively participating/enrolled with MassHealth at least as a nonbilling provider and the NPI submitted must be valid.

Below are the Edit Codes and Adjustment Reason Codes (CARCs)/Remittance Advice Remark Codes (RARCs) the provider may receive for a claim submitted with Supervising Physician information requirements along with their descriptions.

| **Edit Code** | **CARC/RARC** | **Description** |
| --- | --- | --- |
| **1042** – SUPERVISING PHYSICIAN ID INVALID | **Adjustment Reason Code:** 16 - CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).**Remark Code(s):** MA102 - MISSING/INCOMPLETE/INVALID NAME OR PROVIDER IDENTIFIER FOR THE RENDERING/REFERRING/ ORDERING/ SUPERVISING PROVIDER. | A SUPERVISING PHYSICIAN WAS SUBMITTED ON THE CLAIM BUT THE NPI IS NOT EXACTLY 10 NUMERIC DIGITS |
| **1046** – DETAIL SUPERVISING PHYSICIAN ID INVALID  | **Adjustment Reason Code:** 16 - CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).**Remark Code(s):** MA102 - MISSING/INCOMPLETE/INVALID NAME OR PROVIDER IDENTIFIER FOR THE RENDERING/REFERRING/ ORDERING/ SUPERVISING PROVIDER. | A SUPERVISING PHYSICIAN WAS SUBMITTED ON THE CLAIM BUT THE NPI IS NOT EXACTLY 10 NUMERIC DIGITS |
| **1044** – SUPERVISING PHYSICIAN ID NOT ON FILE | **Adjustment Reason Code:** 208 - NATIONAL PROVIDER IDENTIFIER - NOT MATCHED.**Remark Code(s):** N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | THERE IS NO RECORD ON FILE FOR THE SUPERVISING PHYSICIAN SUBMITTED |
| **1048** – DETAIL SUPERVISING PHYSICIAN NOT ON FILE | **Adjustment Reason Code:** 208 - NATIONAL PROVIDER IDENTIFIER - NOT MATCHED.**Remark Code(s):** N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | THERE IS NO RECORD ON FILE FOR THE SUPERVISING PHYSICIAN SUBMITTED |
| **1043** – NPI REQUIRED FOR SUPERVISING PHYSICIAN | Adjustment Reason Code: 16 – CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).Remark Code(s): N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | THE SUPERVISING PHYSICIAN IS SUBMITTED ON THE CLAIM WITH A PID/SL BUT THERE IS NO NPI SUBMITTED |
| **1047** – NPI REQUIRED FOR DETAIL SUPERVISING PHYSICIAN | Adjustment Reason Code: 16 – CLAIM/SERVICE LACKS INFORMATION OR HAS SUBMISSION/BILLING ERROR(S).Remark Code(s): N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | THE SUPERVISING PHYSICIAN IS SUBMITTED ON THE CLAIM WITH A PID/SL BUT THERE IS NO NPI SUBMITTED |
| **1045** – SUPERVISING PHYSICIAN IS NOT ELIGIBLE | **Adjustment Reason Code:** B7 - THIS PROVIDER WAS NOT CERTIFIED/ELIGIBLE TO BE PAID FOR THIS PROCEDURE/SERVICE ON THIS DATE OF SERVICE.**Remark Code(s):** N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | A SUPERVISING PHYSICIAN IS SUBMITTED BUT IS NOT ACTIVE FOR THE DOS |
| **1049** – DETAIL SUPERVISING PHYSICIAN IS NOT ELIGIBLE | **Adjustment Reason Code:** B7 - THIS PROVIDER WAS NOT CERTIFIED/ELIGIBLE TO BE PAID FOR THIS PROCEDURE/SERVICE ON THIS DATE OF SERVICE.**Remark Code(s):** N297 - MISSING/INCOMPLETE/INVALID SUPERVISING PROVIDER PRIMARY IDENTIFIER. | A SUPERVISING PHYSICIAN IS SUBMITTED BUT IS NOT ACTIVE FOR THE DOS |

**PASS CRITERIA:**

The claim adjudicates, and you do NOT receive any of the following informational error messages: 1042, 1043, 1046, 1047. If you receive any of these specific messages please correct the errors and resubmit the claim.

Providers may validate that the NPI or PIDSL entered during DDE appears in MMIS by viewing the ICN related to the test claim entered in claim history. If the NPI or PIDSL is invalid, not on file or the provider is not actively participating/enrolled with MassHealth the above edits would appear in the claim detail panel.

Upon completion of your tests, please notify MassHealth that you have successfully tested your claims:

**Non-LTSS Providers:** Masshealthprovidertraining@maximus.com

**LTSS Providers:** support@masshealthltss.com

For any questions or concerns about DDE testing, please contact MassHealth Customer Service for assistance:

**Non-LTSS Providers:** (P) (800) 841-2900; (E)providersupport@mahealth.net

**LTSS Providers:** (P) (844) 368-5184; (E) support@masshealthltss.com