# Electronic Claims HIPAA File and Provider Online Service Center (POSC) Updates

February 17, 2021

Executive Office of Health & Human Services

#  Agenda

* [Overview](#_Toc66449206)
* [Operating Physician](#_Toc66449207)
* [Service Facility Location Address](#_Toc66449208)
* [Supervising Physician](#_Toc66449209)
* [Resources](#_Toc66449210)

## Overview

On March 14, 2021, MassHealth will implement modifications to the submission requirements related to operating physician, service facility location, and supervising physician information submitted on 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 that is not actively participating/enrolled with MassHealth.

* The changes will impact both 837 batch claims transactions and the Provider Online Service Center (POSC) Direct Data Entry (DDE) claims transactions. To support these minor changes, the companion and billing guides have been updated.
* MassHealth began conducting general information sessions for providers, trading partners, and vendors in January 2021. Registration can be completed at [www.mass.gov/service-details/trading-partner-education.](http://www.mass.gov/service-details/trading-partner-education)
* It is highly recommended for providers, trading partners, and vendors to participate in **each** of the information sessions available as they will include updates as released.
* Testing
	+ MassHealth providers may submit DDE test claims using their existing POSC login credentials on the MMIS Test Portal link below between March 1, 2021 – March 12, 2021 MMIS Test Portal.
	+ Providers who would like to submit an 837 test file must contact MassHealth’s EDI department at edi@mahealth.net to arrange the test.

## Operating Physician

**Operating Physician**

If a surgical procedure code and/or an Other Operating Physician is entered, an Operating Physician with a valid NPI is required on the claim and should be actively participating/ enrolled with MassHealth at least as a nonbilling provider.

These requirements apply to **837I** and **Institutional DDE** claim submissions. The loops and segments for Operating Physician and Other Operating Physician (837I) are:

* Operation Physician Name Loop (2310B) Segment (NM1)
* Other Operating Physician Name Loop (2310C) Segment (NM1)

The Operating and Other Operating Physician fields can be found in the **Billing and Service** tab on the POSC

**Operating Physician**

#### POSC Warning and Error Messages

**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:

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

*If a claim with a surgical procedure code is submitted without an Operating Physician, the claim will adjudicate with one or more edits (listed on the next slide).*

**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**

*The claim will* ***not*** *proceed to adjudication if this requirement is not met.*

6

**Operating Physician**

### Edit Codes and CARCs/RARCs

Below are the Edit Codes, 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.

These edits 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. | THE OPERATING PHYSICIAN IS LISTED:WITH AN INVALID NPI / PID/SL |
| **1053** – DETAIL FIRST OTHER PHYSICIAN ID NUMBER NOT ON FILE | **Remark Code(s):**N270 - MISSING/INCOMPLETE/INVALID OTHER PROVIDER PRIMARY IDENTIFIER. | **OR**THERE IS NO NPI / PID/SL SUBMITTED |

**Operating Physician**

**Edit Codes and CARCs/RARCs *(con’t****)*

| **Edit Code** | **CARC/RARC** | **Description** |
| --- | --- | --- |
| **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 TO BE 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 TO BE 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 |

## Service Facility Location Address

**Service Facility Location Address**

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.

These requirements apply to **Institutional and Professional DDE** claim submissions.

The fields will be added to the **Extended Services** tab of the POSC for both institutional and Professional claim templates.


### Error Messages

If the Service Facility Name field is entered but the Service Facility Location Address is not entered or is incomplete, the POSC will display one or more of the following error messages:

| **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 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*** |

If the Service Facility Location Address is but the Service Facility Name is not entered, the POSC will display the following error message:

| **Error Message** | **Corrective Action** |
| --- | --- |
| 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*** 11 |

## Supervising Physician

12

**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.

These requirements apply to **837P** and **Professional DDE** claim submissions. The loop and segment for Supervising Physician is: Loop (2310D) Segment (NM1).

**Billing and Service**

**Procedure**

The Supervising Physician fields can be found in the Billing and Service tab (header of the claim) and the Procedure tab (detail of the claim) on the POSC.

*\*Note: The Supervising Physician fields already exist in the Billing and Service tab. The search function to add the Supervising Physician on the claim will be added to the Procedure tab on the implementation date, 03/14/2021.*

**Supervising Physician**

### Edit Codes and CARCs/RARCs

Below are the Edit Codes, Claim 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.

These edits 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** |
| --- | --- | --- |
| **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 IS NO NPI SUBMITTED |
| **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 |

**Supervising Physician**

**Edit Codes and CARCs/RARCs *(con’t****)*

| **Edit Code** | **CARC/RARC** | **Description** |
| --- | --- | --- |
| **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  |

**Resources**

## Resources

* + **Information about the upcoming changes and session registration link**
		- [www.mass.gov/service-details/trading-partner-education](http://www.mass.gov/service-details/trading-partner-education)
	+ **Link for updated Companion Guides**
		- [www.mass.gov/lists/masshealth-hipaa-companion-guides](http://www.mass.gov/lists/masshealth-hipaa-companion-guides)
	+ **Testing**
		- MassHealth providers may submit DDE test claims using their existing POSC login credentials on the MMIS Test Portal link below between March 1 – March 12, 2021.

 mmis-portal-tptest.ehs.state.ma.us/EHSProviderPortal/providerLanding/providerLanding.jsf

* + - Providers who would like to submit an 837 test file must contact MassHealth’s EDI department at edi@mahealth.net to arrange the test.
	+ **Provider Email Alerts**
		- To sign up to receive email alerts when MassHealth issues new bulletins and transmittal letters, send a blank email to join- masshealth-provider-pubs@listserv.state.ma.us. No text in the body or subject line is needed.
	+ **MassHealth Customer Service**

| **Contact** | **Long-Term Services and Supports Providers** | **All Other Provider Types** |
| --- | --- | --- |
| **Phone** | (844) 368-5184 (toll free) | (800) 841-2900; TTY: (800) 497-4648 |
| **Email** | support@masshealthltss.com | providersupport@mahealth.net |
| **Fax** | (888) 832-3006 | (617) 988-8974 |

### Information Sessions

MassHealth is conducting three general information sessions between January – March 2021 for providers, trading partners, and vendors. The final Information session will be hosted post implementation to recap and check in with providers.

| **Date** | **Details** |
| --- | --- |
|  **January 27, 2021** | High-level overview of the upcoming changes |
|  **February 17, 2021** | Contains detailed information about the upcoming changes (screenshots, billing instruction & Companion Guide updates) |
|  **March 17, 2021** | Recap and check in post go live. |

For more information regarding these changes and registration details, please visit: https://[www.mass.gov/service-details/trading-partner-education](http://www.mass.gov/service-details/trading-partner-education)

### Questions?