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www.mass.gov/eohhs

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Reporting of Primary Payer(s)

This HSN billing update affects all providers who submit 837I & 837P

Reporting of correct Primary Payer Carrier Code on HSN Secondary Claims

Effective for HSN claims submitted on or after August 15th 2018, HSN has implemented a new reporting requirement as it relates to HSN Claims where HSN is not the primary payer.

For any HSN Secondary Claims submitted on or after August 15th 2018, regardless of if the date of service on the claim is prior to date, providers are required to report the seven-digit carrier code that defines the prior payer(s) on all claims in the appropriate data element within the claim file for prior payer identification. This is the same listing of carrier codes that providers currently report on MassHealth claims.

IMPORTANT: you can submit Carrier Codes on your HSN claims using this guidance immediately. It will not impact your claim processing or your payments. Providers are highly encouraged to implement carrier code updates in your system as soon as possible.

Failure to report a carrier code on any HSN Secondary Claim will result in claim denials that will need to be voided (TOB frequency code xx8) and replaced (TOB xx7) in order to be considered for an HSN payment.

It is required that the provider report the correct and appropriate carrier code that coincides with the actual coverage provided by carrier name and plan. As an example: Medicare A = 0084000 vs. Medicare B = 0085000; each represent a different set of claims/charges being sent to Medicare.

A complete listing of the carrier codes is provided by MassHealth in the All Provider Manual under Transmittal Letter ALL-213 dated 11/01/2014; see Section II, page C-2.

http://www.mass.gov/eohhs/docs/masshealth/providermanual/appx-c-all.pdf

If a primary payer is not represented within the Transmittal Letter, providers are advised to submit a Third Party Carrier Code Request form to MassHealth via Fax: 617-886-8134

https://www.mass.gov/files/documents/2017/11/24/tpccr.pdf



Reporting of MassHealth or Children's Medical Security Plan (CMSP) as a Primary Payer on HSN Secondary Claims

Effective for HSN claims submitted on or after August 15th 2018, HSN has implemented a new reporting requirement as it relates to HSN Claims where HSN is secondary to MassHealth claims (including MassHealth Limited and Children's Medical Security Plan (CMSP).

For HSN claims submitted on or after August 15th 2018, regardless of if the date of service on the claim is prior to date, providers are required to report the new seven-digit Carrier Code of **DMA7384** to HSN on any claim where MassHealth or CMSP is the Prior Payer.

Providers may use this new MassHealth/CMSP Carrier Code in addition to the previously defined 0007001 during the transition period prior to August 15th or replace it immediately with no change in HSN adjudication process.

Failure to report DMA7384 after August 15th 2018, on any HSN Secondary Claim where MassHealth or CMSP is reported as the Primary Payer will result in claim denials that will need to go through the Replacement Claim process in order to correct the claim to be considered for an HSN payment.