



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid, Health Safety Net
100 Hancock Street, 6th Floor
Quincy, Massachusetts 02171



CHARLES D. BAKER
Governor

KARYN E. POLITO
Lieutenant Governor

MARYLOU SUDDERS
Secretary
December 2017

DANIEL TSAI
Assistant Secretary for
MassHealth

www.mass.gov/eohhs

*****Important Health Safety Net Billing Updates*****

MassHealth Carrier Codes: Health Safety Net will be utilizing the MassHealth Appendix C Third-Party-Liability Codes for all secondary/tertiary claims. The start date of January 1, 2018 has been delayed; however, providers should begin now to plan for this transition. Once implemented, failure to use the correct carrier codes on claim will result in a denial at HSN. More detailed information on using these codes, MassHealth and CMSP codes and the effective implementation date will be sent to providers in the future.

Regulation Update: Effective October 1, 2017 the HSN regulation 614.00 update was adopted. One of the important updates is that HSN will no longer pay for vaccines when performed on the same day as a medical visit. As of this date, vaccines administered during the medical visit will be included in the fee paid for the medical visit.

Occupational Therapy Codes: Acute Outpatient Hospital Providers that submitted the new OT codes 97165, 97166, 97167, and received a denial at MMIS, should submit these denied claims as new original claims.

Reminders!

Span Dates on Claims: In keeping with MassHealth guidance, HSN would like to remind hospital providers that HSN will accept span dates of service on one claim, effective for dates of service 12/1/2016 forward (effective same date as MassHealth guidance). If submitting span dates on one claim, providers must be sure that each date is indicated for services at the line level.

CLARIFICATION - Reporting Patient Paid Amounts on claims: When reporting patient paid amounts, providers are reminded that the patient paid amount should be captured in the "AMT F5" segment of the claim on 837P (CHC) claims, however for *837I claims patient paid amounts should be reported using the Value Code FC.*



Billing Intermediaries: Providers are reminded that when using a **new BI**, or if **changing the BI** the facility is using, Providers **MUST *notify HSN prior to submitting claims using the new BI.*** Failure to report these changes to Health Safety Net may result in claims not being processed correctly by HSN, and no payments will be received by the provider for these claims. Providers **MUST** contact both HSN and MassHealth with the new or changed BI information.

HSN Waiver Request: HSN has started to follow the process that MassHealth uses for billing waiver requests. HSN will no longer consider any 3 year billing waiver requests. Providers requesting 1 year, or 90 day requests, should contact HSN Manager of Operations Angela Gizzi for instructions on requesting and processing of claims. (Angela.Gizzi@state.ma.us)

90 Day Waiver Requests: Providers are reminded that when requesting a 90 day waiver, due to a prior payer, that all EOB information must be complete and submitted along with any additional documentation to EHSNSN@state.ma.us

Please contact Health Safety Net for any questions or concerns. 800-609-7232 or HSNHelpdesk@state.ma.us