

New Payer ID for Blue Cross Medicare Advantage

Effective **Jan. 1, 2017,** changes affecting claims submissions for Blue Cross Medicare Advantage Plans will assist in streamlining claims processing and improve efficiencies of claims routing to our primary claims adjudicator. The changes are as follows:

New Payer ID

• The Payer ID for the Blue Cross Medicare Advantage plans will change to 66006 for claims submitted on and after **Jan. 1, 2017**. Providers that are not registered with Availity and Experian Health (ecare online) should contact their clearinghouse to confirm the new Payer ID for this plan - as other clearinghouses may assign their own unique number.

Please note that the Blue Cross Medicare Advantage member ID cards will contain the following applicable state alpha prefix:

State	PPO	НМО
Oklahoma	YUX	YUB
Illinois	XOD	XOJ
Texas	ZGD	ZGJ
New Mexico	YID	YIJ
Montana	YDJ	YDL

• The above state alpha prefix must be submitted using the new Payer ID 66006, even for members who seek services from you when out of state. You will no longer use the commercial payer IDs for out of state members with these prefixes. Claims with these prefixes will be rejected if submitted to the commercial payer ID.

Electronic Inquiry Submission Updates

- Effective for services rendered on and after Jan 1, 2017 –Blue Cross Medicare Advantage eligibility and benefit and claim status inquiry transactions will have a new drop down with payer options available within the Availity Web portal.
 - Blue Cross Medicare Advantage
- Blue Cross Medicare Advantage providers will no longer have access to the Claim Research Tool on Availity. Claim status can be obtained through Availity or your current web vendor via the electronic 276 claim status inquiry process.

Payment Cycle

Payment cycles continue to be weekly. Blue Cross Medicare Advantage will make payments each Monday.

• The paper claim mailbox address and fax number will change to:

Blue Cross Medicare Advantage P.O. Box 3686 Scranton, Pa. 18505 Fax Number: (855) 674-9192

• Effective Feb. 1, 2017, claims received at the old BCBSOK P.O. Box will be rejected with a letter informing providers to resubmit to the above P.O. Box.

New processes

- New format for payments:
 - EFT trace number:
 - Blue Cross Medicare Advantage will start with a source code of "M" instead of "C"
- A new process will be implemented for claims overpayment recovery:
 - ERM (Electronic Refund Management), claims refund and inquiry process post 1/1/17 will not be available through ERM.
 - Request for refund letters will be sent by mail for all providers
 - Providers may submit requested and voluntary refunds to the new lockbox listed below
 - HCSC will have a new lockbox address for provider overpayments Health Care Service Claims Overpayment 29068 Network Place Chicago, IL 60673-1290

Electronic Remittance Advice (835 ERA)

- 835 ERA files will be distributed to the address associated with the billing provider's Tax ID and NPI, rather than being distributed to multiple locations.
- EPS (Electronic Payment Summary) will not be available for Blue Cross Medicare Advantage (however for ERA and non-ERA receivers the Provider Claim Summary's (PCS) will be sent by mail.
- If the provider is a current ERA receiver for Blue Cross Medicare Advantage, they will not need to re-enroll under the new Payer ID for Blue Cross Medicare Advantage.
- The Payer ID on the 835 ERA will now match the Payer ID that is submitted on the claim. When submitting Blue Cross Medicare Advantage claims using 66006 the ERA Payer ID will also reflect 66006.

We appreciate your patience during this transition. BCBSOK will be providing additional information and educational webinars on these changes in the coming months. Please watch for further information on the BCBSOK website at <u>bcbsok.com/provider</u> and in the *Blue Review* provider newsletter.