

Novitas Solutions e-News

Volume VI Issue III

Novitas Solutions, Inc. A/B MAC Electronic Billing Newsletter

August 2017



Novitasphere User ID and Password Reminders

Inside This Issue

Part A & B

- 1 Novitasphere User ID and Password Reminders
- 2 Save Time with EDI's Self-Service Tools
- 3 Submitting Medical Documentation for Electronic Claims – Understanding the PWK Segment
- 5 Use PC-ACE to Submit Claims Online Through Novitasphere
- 6 Attention ABILITY | PC-ACE Customers: New PC-ACE Version 3.5 Upgrade Available
- 6 Reminder - EDI Form Signature Requirements – Authorized Official's Signatures on EDI Enrollment Forms
- 7 Medicare Learning Matters (MLN) Articles

All Novitasphere users are required to log in to Novitasphere AND change their password in Enterprise Identity Management (EIDM) at least once every 60 days to maintain access. Any user IDs that do not take both of these steps will be considered inactive, and the Novitasphere role will be removed. After a role is considered inactive and removed, you will be required to re-request the Novitasphere role in EIDM to re-gain access to Novitasphere.

All users are required to enroll for their **own** unique User ID in EIDM. Sharing of User IDs is prohibited. Users who share their ID will be disabled from using Novitasphere for two weeks. To regain access, the owner of the ID must contact the Novitasphere Help Desk.

EIDM recently implemented new password requirements. For existing customers, this requirement took effect upon their first password change after May 27, 2017.

The full password requirements are as follows:

- The password **must be changed at least every 60 days**.
- The password **must** be a minimum of eight (8) and a maximum of 20 characters long.
- The password **must** contain at least one number.
- The password **must** contain at least one lower case letter.
- The password **must** contain at least one upper case letter.
- The password **must** contain at least one special character.
- The password **must not** contain the User ID.
- The password **must not** contain the following special characters: ? <> () ' " \ / &
- The password must not contain any commonly used dictionary words of three (3) or more characters.
- The password must not contain any four (4) digits that could represent a year between 1900-2100.
- The password **must not** contain any easily guessed alpha/alphanumeric strings (e.g. abc123, 123123, 1111, qwerty).
- The password **must be different** from the previous six (6) passwords.

Novitas Solutions e-News is published by Novitas Solutions, Inc.'s EDI Services for providers, vendors, billing services, and clearinghouses. This bulletin should be shared with all health care practitioners and managerial members of the provider/supplier staff.

CPT codes, descriptors and other data only are copyright 2011 American Medical Association (or such other date of publication of CPT).

All Rights Reserved. Applicable FARS/DFARS apply.



Passwords will be considered “different” when at least one character has been changed from the previous password. Passwords may only be changed once per day.

Save Time with EDI’s Self-Service Tools

EDI offers several self-service tools which allow you to perform your tasks faster – without having to pick up the phone!

Check EDI Enrollment Status

The Form Status and Verification Inquiry Tool is a quick and easy way to check the status of EDI enrollment forms, or verify information prior to sending your form. This tool allows you to:

- Verify if provider is set up to send claims
- Verify if provider is set up for ERA
- Verify the data (PTAN, NPI, Address, Contract) before submitting a form
- Determine the reasons why a form was returned for corrections



Need to reset your Password? You can do it!

Part A Fiscal Intermediary Shared System (FISS) Password Reset

FISS users who access FISS via a TPX sign-on screen have the ability to reset their own password. Users may only reset their **own** RACF ID, and must know both the RACF ID and PIN to use this feature. More information is available on our website in the Provider Password Reset Guidelines.

Novitasphere Portal Password Reset

Novitasphere Portal Users have the ability to reset their own password using the [Enterprise Identity Management \(EIDM\) website](#) without calling the Novitasphere Help Desk. Users may only reset their **own** password, and must know the user ID and the answers to the security challenge questions. More information is available in the Novitasphere Portal Password Help, Under Novitasphere Password Resets.

Novitasphere – Save Time and Money!

Patient Eligibility

Novitasphere Portal allows registered users to check patient eligibility online. Once logged in, simply enter the patient’s first and last name, Patient Medicare Number, dates of service, and your National Provider Identifier (NPI). Results display immediately, and can be printed for your records. A full list of the eligibility data provided is available in the [Eligibility Guide](#).

Claim Status – Part B

Part B customers have the ability to check claim status through Novitasphere. Users can obtain status for claims up to one year from the claim's finalized date. Review the [Novitasphere Part B User Manual](#) for more details on how to use this beneficial feature.

Claim Corrections – Part B

Save your office time and money by performing your claim corrections online. With Novitasphere, customer can quickly locate a claim, make your corrections, and send it on its way. A written confirmation of the reopened claim is then delivered to the Novitasphere MailBox. Review our [Claims Correction Guide](#) for a full list of the types of corrections you can make.

Self-Service Tools Reference Materials:

EDI Form Status and Verification Inquiry Tool

- JH: <https://www.novitas-solutions.com/webcenter/portal/MedicareJH/page/pagebyid?contentId=00004524>
- JL: <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/page/pagebyid?contentId=00004524>

FISS Provider Password Reset Guidelines:

- JH: <https://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00004464>
- JL: <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00004464>

Novitasphere Portal Password Help

- JH: <https://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00084015>
- JL: <https://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00084015>

A B Submitting Medical Documentation for Electronic Claims – Understanding the PWK Segment

There are very few instances when it is necessary to submit medical documentation (hospital records, surgery notes, discharge summaries, etc.) for a Medicare claim. This holds true for electronic claims as well. The electronic format of a claim is created with fields (segments) that hold most information that is necessary in order to adjudicate a claim.

When must medical documentation be submitted?

- Unusual services that require further explanation

- Services that require documentation on a prepayment basis

When should medical documentation not be submitted?

- Not otherwise classified procedure codes: Enter the description of the code in the description field of the electronic claim (loop 2400 SV101-7)
- Medicare secondary claims: Enter the information from the primary insurer's explanation of benefits in the appropriate fields of the electronic claim. More information is available in Chapter 14 of the EDI Billing Guide.
- Name and dosage of a drug administered: Enter the information in the notes section of the electronic claim (loop 2400 NTE). This is only needed for drugs that do not already have a HCPCS code defined for the name and dosage administered.

How do I submit medical documentation for an electronic claim?

- **Step One:** Create your electronic claim and complete the PWK segment with the following items:
 - Attachment Report Type Code: Indicates what type of report is being submitted. (e.g., AS=Admission Summary, DS=Discharge Summary, OB=Operative note) 2300/2400 PWK01
 - Attachment Transmission Code: Indicates how the documentation is being submitted (BM=by mail, FX=fax) 2300/2400 PWK02
 - Identification Code Qualifier: AC is only option. 2300/2400 PWK05
 - Attachment Control Number: Is the identification number that is assigned by your software, or a number created by you. This number must match the same number reported on the fax cover sheet. 2300/2400 PWK06

For help with the PWK segment, please contact your software vendor or refer to the 837 implementation guides. Since you can attach documents to a paper claim, this segment does not match to a field on a paper 1500/UB04.

- **Step Two:** Submit the electronic claim.
- **Step Three:** Within seven (7) days **AFTER** submission of electronic claim, complete the Fax/Mail Cover Sheet for Medical Documentation linked below. Do not use the general EDI Fax Cover Sheet, as your documentation will be delayed in getting to the appropriate department.
- **Step Four:** Fax or mail the documentation to Novitas with the Fax Cover Sheet for Medical Documentation.

More information on submitting medical documentation is provided in Chapter 11 of the EDI Billing Guide. Please note, this form is **not** to be used for sending records in response to Additional Documentation Request (ADR) letters **or** when submitting a redetermination.

Reference Materials:

- [Fax Cover Sheet for Submitting Medical Documentation for EDI Claims for Medicare Part A](#)
- [Fax Cover Sheet for Submitting Medical Documentation for EDI Claims for Medicare Part B](#)
- [EDI Billing Guide JL](#)
- [EDI Billing Guide JH](#)
- [Washington Publishing Company](#) - Website for purchasing 837 Implementation guides

Use PC-ACE to Submit Claims Online Through Novitasphere

Would you like an efficient way to send your Medicare claims to Novitas Solutions? ABILITY | PC-ACE is a free software with the capability to enter claims, interpret status reports, and manage patient and provide data. Not a PC-ACE user? You can select to use the free PC-ACE software on your Novitasphere enrollment form.

When enrolling for Novitasphere, check the box to enroll or maintain your PC-ACE enrollment. Once your enrollment is complete, check out the PC-ACE User Quick Steps for instructions to update your submitter ID, and use PC-ACE in order to submit your claim files.

- JH: <http://www.novitas-solutions.com/webcenter/portal/MedicareJH/pagebyid?contentId=00027493>
- JL: <http://www.novitas-solutions.com/webcenter/portal/MedicareJL/pagebyid?contentId=00027493>

There are many advantages to using PC-ACE versus sending paper claims or using the Part B Direct Data Entry (DDE) feature in Novitasphere!

- Pre-built databases for diagnosis codes.
- Built-in edits that will valid information prior to submitting, giving you the ability to have clean claims the first time.
- Claims can be keyed prior to logging into Novitasphere to avoid timing out of the system.
- Claims are saved into the software, allowing you to edit them if necessary.
- Receive only one set of electronic confirmation reports for the while file, versus individual reports for each claim when using DDE.
- If you were previously submitting claims using dial-up, you can continue to submit for **free** by using PC-ACE to create your files and submit via Novitasphere!

A B Attention ABILITY | PC-ACE Customers: New PC-ACE Version 3.5 Upgrade Available

ABILITY | PC-ACE is a software program that enables electronic billing for both Medicare Part A and Part B claims in a Health Insurance Portability and Accountability Act (HIPAA)-compliant format. To provide the most up-to-date information within PC-ACE, the software program is updated quarterly. The most current upgrade, which is PC-ACE version 3.5, was released on **July 3, 2017. Please take time now to upgrade immediately.**

To streamline the distribution process for software program upgrades, the PC-ACE software program is available via Internet download from our Web page ([JL](#)) ([JH](#)).

IMPORTANT: An installation password is required to install or upgrade the PC-ACE software. This password was provided to you in the new enrollment notification letter. If you do not have this letter, please contact an EDI Analyst to obtain the password. Please call 1-877-235-8073 if you are a JL customer or 1-855-252-8782 for JH customers. The password is needed for each quarterly upgrade or new installation; therefore, please keep it in a safe place where it is readily available.

The Internet download is available free of charge for all new and existing PC-ACE customers. If ordering via CD-ROM, there is a non-refundable service fee of \$25 for postage and handling for each quarterly update totaling \$100 annually, paid annually. To save time and money for you and the Medicare program, we strongly encourage you to download this program via the Internet when enrolling or upgrading.

The [PC-ACE Release Newsletter](#) includes a summary of changes with this release.

If you would like more information about PC-ACE or would like to enroll to begin using this software program, please visit our Electronic Billing (EDI) Center on our [website](#).

A B Reminder - EDI Form Signature Requirements – Authorized Official's Signatures on EDI Enrollment Forms

As of September 1, 2016, Novitas Solutions EDI now requires that the Authorized Official or Delegated Official as listed on the CMS-855 sign the Electronic Data Interchange (EDI) enrollment form, Novitasphere Portal enrollment form, and other EDI provider forms.



Any EDI provider forms submitted that are not signed by an authorized or delegated official are being rejected, and a corrected form must be submitted. This is the number one reason forms are being rejected.

If you are unsure who your authorized or delegated official(s) on file are, this information can be verified in the [Provider Enrollment Chain](#)

[and Ownership System \(PECOS\)](#). This information can be located in the “Managing Control” section. More information about PECOS can be found on the [CMS PECOS Info site](#).

NOTE: No action is needed for existing customers who are not making a change.

For questions regarding EDI or Novitasphere enrollment, please contact an EDI Analyst at 1-855-252-8782 (JH) or 1-877-235-8073 (JL).

A B Medicare Learning Network (MLN) Matters Articles

Claim Status Category and Claim Status Codes Update	
MLN Matters Number: MM10043	Related Change Request (CR): CR10043
Related CR Release Date: May 26, 2017	Effective Date: October 1, 2017
Related CR Transmittal Number: R3782CP	Implementation Date: October 2, 2017
http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM10043.pdf	

Remittance Advice Remark and Claims Adjustment Reason Code (RARC and CARC) and Medicare Remit Easy Print and PC Print Update	
MLN Matters Number: MM10040	Related Change Request (CR): CR10040
Related CR Release Date: May 26, 2017	Effective Date: October 1, 2017
Related CR Transmittal Number: R3780CP	Implementation Date: October 2, 2017
http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM10040.pdf	