

Electronic Billing Newsletter

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

November 2024



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This **Electronic Billing Newsletter** is published by Novitas Solutions, Inc.'s Electronic Data Interchange (EDI) department for the electronic billing providers, vendors, billing services, and clearinghouses. This bulletin should be shared with all health care practitioners and managerial members of the provider/supplier staff.

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Keep your EDI and Portal Billing Setup Accurate!

Did you know providers are required to notify Novitas Solutions of all changes made to their electronic billing setup? This notification of change includes initiating a new contract or terminating an existing contract with a clearinghouse or billing service. It is important to keep your EDI and Portal profile up to date and accurate so that third parties that you are no longer contracted with do not maintain access to your protected Medicare data. There are two easy ways to keep your EDI or Portal billing profile up to date and accurate.

- 1. The maintain block on the EDI and Portal Enrollment forms**
Providers should utilize this block if they need to maintain an EDI or Portal Submitter ID for a period of time. For example: If you are transitioning from one billing service to another and the contract dates with the billing services overlap. The provider would submit an enrollment form to link the new billing service to their Provider Transaction Access Number (PTAN) and would also key the Submitter ID for the outgoing billing service in the maintain block. This will allow the outgoing billing service to remain linked to the Provider's PTAN and will enable them to complete the billing for their contracted time. If the contract dates are not overlapping, the provider should leave the maintain block BLANK. Novitas will link the new Billing service and will remove the outgoing billing service or clearinghouse.
- 2. Request the update on Company Letterhead**
Providers always have the option to fax a request on company letterhead to have an outgoing billing service / clearinghouse removed. For example: If you maintained a submitter to finalize any remaining billing and the entity should no longer be linked, fax us a request on your company letter head requesting the removal. The letterhead should contain the following:
 - Group or Solo PTAN and National Provider Identifier (NPI)
 - Tax ID
 - Explanation of the request including Submitter ID
 - Signature and Printed Name
 - Title
 - Date of signature

Claim Counts in Electronic Files

Novitas Solutions has system limitations which control the size of the transmission they can receive. These system limitations are meant to help the translator to process the claims quicker.

Some submitters may have the capability to transmit larger files with thousands of claims contained in them. Novitas Solutions recommends that submitters limit the size of the transaction to a maximum of 5,000 claims per file.

Submitters also should be aware that sending large amounts of files with single claims causes delays in processing of the claims. Submitters should batch claims being sent daily into one file for submission.

Novitasphere Redesign Coming in December

Novitasphere is being redesigned to a more modern look and feel. The new format will be available for all existing users on December 9! The redesigned Novitasphere will include the same current [features and functionalities](#) as well as some great new enhancements!

We will provide you with more details including some sneak peek videos as the implementation date approaches. Please watch for more information in emails from us and on the [Novitasphere redesign](#) webpage for future information.

If you are not familiar with Novitasphere, please visit the [Novitasphere enrollment](#) web page to learn more about the requirements. All eligible offices are encouraged to enroll and experience the many benefits today. The [Novitasphere Enrollment eGuide](#) will walk you through the steps needed to gain access.

PC-ACE: New Installation and Setup Video

New providers often have questions when downloading and setting up the free Medicare billing software, PC-ACE. Novitas has many informational documents available on the Novitas Solutions website to assist new PC-ACE users on the installation and setup of the software.

The Provider Outreach department has created the PC-ACE New Installation and Setup video that provides steps on completion of the program. This video is available on the Novitas Solutions website ([JH](#))([JL](#)).

PC-ACE version 6.4 upgrade

PC-ACE is a free 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 6.4, was released **October 7, 2024**.

To streamline the distribution process for software program upgrades, the PC-ACE software program is available via internet download from our webpage ([JH](#)) ([JL](#)). **Please take time to upgrade now.** The Centers for Medicare & Medicaid Services (CMS) requires you to use the most current version of the software program and to eliminate the use of prior versions within 90 days of receipt of this notification. Therefore, please install this software as soon as possible, but **no later than December 1st**, which is the required upgrade compliance date.



IMPORTANT: An installation password is required to install or upgrade the PC-ACE software. This password was provided in your EDI/Novitasphere Welcome letter. If you do not have this letter, please contact the EDI Help Desk. The password is needed for each quarterly upgrade or new installation; therefore, please keep it in a safe place where it is readily available.

Download EDI Acknowledgement Reports

Novitas Solutions EDI generates multiple electronic reports to assist you in easily tracking your Medicare electronic claims. These EDI reports represent different rejection levels and are available to you as quickly as possible. The sooner you are aware of any errors, the sooner you can correct and resubmit your claims for processing and payment consideration.

Make it a routine to download these reports daily, as they are only available for 60 days. Claims rejected on the electronic reports (TA1, 999, and 277CA) will not be sent on for processing and payment consideration and will not be available for review in claim status tools or the Interactive Voice Response (IVR). Those rejected claims must be corrected and resubmitted.

Failure to download these reports will keep you from correcting, resubmitting claims timely, and are subject to failing timely filing limits if not corrected in time.

Submitters that do not download reports will also cause delays in the Medicare systems as large files remain in the mailboxes.

A Top Ten Electronic Billing Errors – Part A

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:496:85	Claim Rejected for relational field in error. Submitter not approved for electronic claim submissions on behalf of the Billing Provider.	<p>Verify the provider's NPI is registered with the Submitter ID prior to submitting claims.</p> <p>When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing submitters will result in claim rejections.</p>
A7:732:560:PR	Claim Returned as unprocessable. Information submitted inconsistent with billing guidelines in the Subscriber Additional/Secondary Identifier.	Do not report the value "SY" in the 2010BA.REF01
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A8:562:128:85	This Claim is rejected for a relational field in error within the Billing Provider's National Provider Identifier (NPI) and Billing Provider's Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A8:306	This Claim is rejected for a relational field in error for Service(s) Rendered.	Not Otherwise Classified (NOC) procedure codes require a detailed description of the service. NOC drug codes require the name and dosage of the drug. Enter the description in the 2400 SV101-7.
A7:500:77	This Claim is rejected for Invalid Information within the Service Location's Postal/Zip Code.	Verify the Postal/Zip Code matches the City and State reported for the facility.
A3:121	This Claim is rejected for the Service line number greater than maximum allowable for payer.	Verify the number of Service lines does not exceed 449.
A7:732:480:PR	Claim Rejected for Invalid Information submitted inconsistent with billing guidelines	Report the value "MA" in the Claim Filing Indicator Code 2000B.SBR09.
A7:228	This Claim is rejected for Invalid Information within the Type of bill for UB claim.	Verify the Type of Bill is valid prior to submitting the claim.

A7:562:DN	This Claim is rejected for an invalid Referring Provider's National Provider Identifier (NPI).	The first position of 2310F.NM109 must be a "1".
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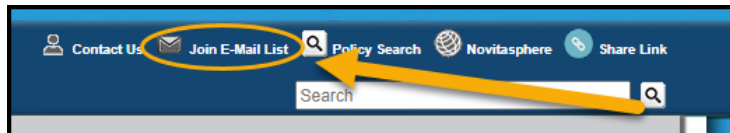
B Top Ten Electronic Billing Errors – Part B

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:496:85	This Claim is rejected for relational field due to Billing Provider's submitter not approved for electronic claim submissions on behalf of this Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. Failure to complete the Maintain Existing Submitter/Receiver ID block on the EDI enrollment form may result in previously setup IDs being removed.
A8:562:128:85	This Claim is rejected for relational field in the Billing Provider's NPI (National Provider ID) and Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A7:562:82	This Claim is rejected for Invalid Information for a Rendering Provider's National Provider Identifier (NPI).	A valid NPI must be reported in 2310B.NM109.
A7:562:85	This Claim is rejected for Invalid Information in the Billing Provider's NPI.	Verify the billing provider's NPI is correct prior to submitting claims.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:507	This Claim is rejected for relational field Information within the Healthcare Common Procedure Coding System (HCPCS).	Verify that the HCPCS code is valid for Medicare.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A8:663:732:IL	This Claim is rejected for relational field in the subscriber's Group Name information submitted is inconsistent with billing guidelines	Do not report Group name in the 2000B SBR04 for Medicare.
A7:732:464	This Claim is rejected for Invalid Information within the Payer Assigned Claim Control Number Information submitted inconsistent with billing guidelines.	The only valid value for CLM05-3 (Claim Frequency Type Code) for Part B claims is '1' (ORIGINAL).

A8:746:40	This file rejected due to duplicate ST/SE submission	Verify the file was not already sent prior to submitting.
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Subscribe to our Email Lists

Join our email lists for the latest Medicare broadcasts from Novitas Solutions, delivered directly to your email inbox. Follow these simple steps to join:



1. Navigate to www.novitas-solutions.com and select the applicable Medicare jurisdiction.
2. Click the “Join E-Mail List” link in the upper right of the dark blue menu.
3. Enter your email, first name, and last name.
4. Select all appropriate mailing lists. We encourage all EDI billers to subscribe to the EDI list and all Novitasphere users to subscribe to both the EDI and Novitasphere lists.
5. Click Subscribe. You will then be sent a verification email.

Information Needed When Calling EDI

To ensure the privacy of our customer’s protected information, we must verify certain criteria with every telephone call. When you call EDI Services or the Novitasphere Help Desk, please be sure to have your Provider Transaction Access Number (PTAN), National Provider Identifier (NPI), and the last five digits of the organization’s Tax ID. Having all this information readily available will allow for us to assist with your inquiry more quickly and efficiently.

Contact Us

We are available at the times and numbers shown below. Please contact us with any questions related to information in this newsletter.

JH EDI Help Desk

1-855-252-8782, Option 3
Monday-Friday, 8 a.m. – 4 p.m. ET/CT

JL EDI Help Desk

1-877-235-7083, Option 3
Monday-Friday, 8 a.m. – 4 p.m. ET/CT



Novitasphere Help Desk

1-855-880-8424
Monday-Friday, 8 a.m. – 5 p.m. ET/CT

Website Contact Information

([JH](#)) ([JL](#))
www.novitas-solutions.com

Thank you for reading our newsletter!
