NOVITAS SOLUTIONS

Electronic Billing Newsletter

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

May 2025

Inside this issue

🅐🅑🌐 Use Novitasphere instead of the IVR

Eligibility, claim status, appeal status, and financial information are all currently available in Novitasphere and the Novitas Interactive Voice Response (IVR) telephone system. We **strongly encourage** all providers to use Novitasphere as your sole source to obtain this information rather than the IVR. Soon, the option to use the IVR for some of these inquiries will not be available.

Once your access is established for Novitasphere, follow these steps to obtain the patient and/or claim information you need:

1. Access Novitasphere.
2. Select the feature from the top menu options.
3. Complete the required search fields.

Novitasphere is available 24 hours a day, 7 days a week (excluding holidays and maintenance periods). The Novitasphere User Guide (JH)(JL) provides step-by-step instructions with screen images for accessing the portal and using each feature.

Each office staff member responsible for obtaining Medicare information will need their own Novitasphere account ID. To setup additional user access, view the Novitasphere: IDM instructions > Registration for all other staff Enrollment Steps for End Users (JH)(JL).

If your office does not currently have access, we encourage you to enroll today. Refer to the Novitasphere Enrollment eGuide for complete enrollment instructions.

Novitasphere 🌐

| ELIGIBILITY ⌄ | MBI LOOKUP | CLAIMS ⌄ | APPEALS ⌄ |
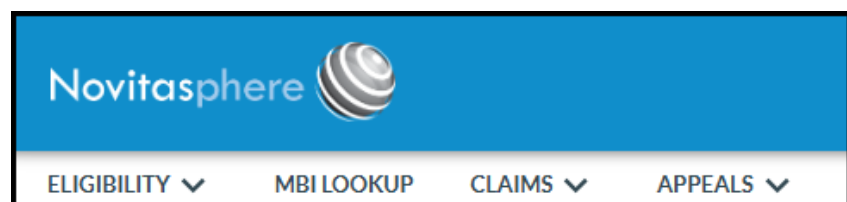
Ⓐ Ⓑ 🌐 Novitasphere Feature Highlight:
ELIGIBILITY

Novitasphere interfaces with the CMS HIPAA Eligibility Transaction System (HETS) to obtain eligibility information. HETS is considered the authoritative source for beneficiary information. **All providers should obtain eligibility information via the portal as the IVR option will not be available in the future** and some MACs have already disabled the IVR option.

The display and accessibility of specific Eligibility tab submenu options are contingent upon the availability of active data directly associated with the beneficiary and each submenu option. When no active data is available, the submenu option will appear lighter in color to indicate it is not relevant. The image below shows all submenu options and is an example of a patient without any MSP or QMB information available.

The eligibility information provided in Novitasphere is organized into different sections:

- **Inquiry** - subscriber information and date of service entered in search criteria
- **Beneficiary** - subscriber name, address, date of birth, Medicare #, date of death, and the date of service range used in the search criteria
- **Eligibility** – entitlement reason, Part A/Part B effective and termination dates, inactive periods, ESRDS, and Acupuncture benefits
- **Deductibles/CAPS** – Year Part A/B remaining deductible amounts, free services, blood deductible, therapy CAP, and rehabilitation sessions
- **Preventative** – COVID-19 immunizations, smoking cessation session info, MDPP usage, preventive services, and cognitive services
- **MSP** – type code, effective and termination date, diagnosis code, policy number, group number, patient relationship, ORM indicator, insurer name, and address
- **MAP** – contract name, contractor #, plan number, plan name, plan type, MA bill opt code, effective date, term date, address, and telephone number
- **Hospice/Home Health Care** – home health certification details, HHEH start and end date, DOEBA and DOLBA dates, patient status code, notice of admission indicator, provider number, contract name, contract number, and hospice information
- **Inpatient** – hospital stay information, hospital data, skilled nursing facility data, and psychiatric information
- **QMB** – QMB Medicaid enrollment dates/type, QMB deductible info, QMB inpatient spell dates, QMB hospital information, and QMB SNF information
- **PBID** – effective and termination dates

More details on the Eligibility feature are available in the Novitasphere User Guide, Section 3 (JH)(JL). If you do not currently have access, we recommend getting setup today to access all the great features including claim submission, claim status, and patient eligibility. Refer to the Novitasphere Enrollment eGuide for complete enrollment instructions.

Ⓐ Ⓑ 🌐 PC-ACE Version 6.6 Upgrade

To provide the most up-to-date information, the PC-ACE electronic claim file creation software is updated quarterly. The current upgrade was released **April 7, 2025** and is available via internet download from our webpage ([JH](#))([JL](#)). **Please take time to upgrade now.** CMS requires you to upgrade within 90 days. Therefore, this upgrade should be installed **no later than June 30th**.

IMPORTANT: An installation password is required. This password was provided in your EDI/Novitasphere Welcome letter. If you do not have this password, please contact the EDI Help Desk.

🌐 Novitasphere Account Updates

Novitasphere account updates

IDM

Resetting and changing passwords

Existing IDM users adding the Novitasphere application

Adding Novitasphere roles

Deleting organizations or roles

Regaining access after inactivity removal

Adding end users

Terminating end user access

Updating email address

Updating security questions

Updating organization information

Updating MFA

Novitasphere enrollment

Changing office approvers and organization information

Adding providers

Removing providers

Changing ERA

Requesting PC-ACE

Instructions are available on our website for many different types of Novitasphere account updates ([JH](#))([JL](#)). As time passes, changes may be needed to your existing portal setup. There are account changes that need to be made in the Identity Management (IDM) system and others that would require enrollment forms. The Novitasphere account updates web page is organized into two different sections shown on the image of the index provided here.

The most common IDM changes include adding or removing Novitasphere roles, password changes, and updating email address. To make these changes, you will need to sign into the IDM system. Step-by-step instructions, with the system link, are provided on the Novitasphere account update web page.

Novitasphere enrollment changes will need an enrollment form to be completed and sent to Novitas. Examples include changing the office approver or office backup approver for your organization, adding or removing providers, and requesting the PC-ACE electronic claim file creation software.

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🅐 Top Ten Electronic Billing Errors – Part A

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
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.
A8:496:85	Claim Rejected for relational field in error. Submitter not approved for electronic claim submissions on behalf of the Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. 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.
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
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.
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.
A7:500:77	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.
A6:745:562:82	This Claim is rejected for Missing Information due to Identifier Qualifier within the Rendering Provider's National Provider Identifier (NPI).	Report Identifier Qualifier "XX" in loop 2420C NM108 for the Rendering Provider's National Provider Identifier (NPI).
A8:163:732:IL	Claim Rejected for relational field in error.	Do not report the Insured group or policy number in the 2000B loop NM103.
A7:480:PR	Claim rejected for invalid information in the Other Carrier Claim filing indicator.	Do not report "MA" or "MB" in Loop 2320 SBR09 when Medicare is secondary.
A7:500:GB	This Claim is rejected for Invalid Information within the Other Insured's Postal/Zip Code.	Verify the zip code for the Other Insured.

Ⓑ 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.
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.
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.
A7:562:85	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.
A7:732:464	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).
A8:306	This Claim is rejected for relational field Information within the Detailed description of service.	Report a description of the services performed when using a non-specific procedure code.
A8:746:40	This file rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A7:535	This Claim is rejected for Invalid Information within the Claim Frequency Code.	Verify the Claim Frequency Code reported is a "1." 1 is the only valid code for Part B.

Ⓐ Ⓑ 🌐 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!