NOVITAS SOLUTIONS

# Electronic Billing Newsletter

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

May 2026

## Inside this issue



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.



CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

## A B PC-ACE and Novitasphere

Novitasphere is a free online portal with many benefits (JH)(JL) including a connection for submitting electronic claim files. PC-ACE is free software for creating electronic Medicare claim files. Combining Novitasphere with PC-ACE provides a no-cost solution for billing your Medicare claims electronically.

Learn more about Novitasphere and PC-ACE by reviewing the resources available on our website:

- Novitasphere Enrollment eGuide (PDF)
- Novitasphere reference materials (JH)(JL)
- PC-ACE reference materials and new user information (JH)(JL)
- PC-ACE training module for use with Novitasphere portal (PDF)

Enrolling for Novitasphere is the first step to getting started with this no-cost solution. Carefully follow the enrollment instructions (JH)(JL) and be sure to select the option to request PC-ACE software on the enrollment form.

## A B PC-ACE version 7.0 upgrade

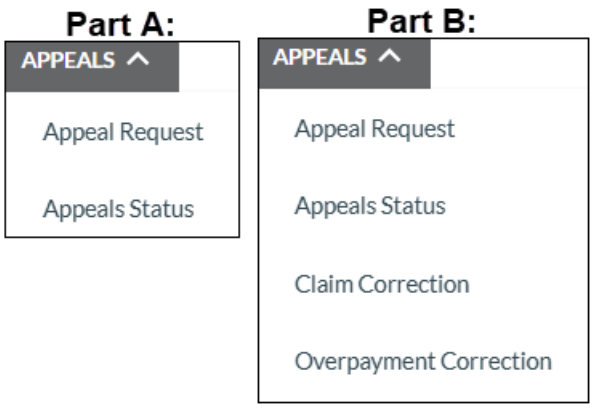
To provide the most up-to-date information, the PC-ACE electronic claim file creation software is updated quarterly. The current upgrade was released **April 6, 2026** and is available via internet download from our webpage (JH)(JL). **Please take time to upgrade now.** CMS requires you to upgrade within 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. When calling, be prepared to provide your submitter ID.

# Novitasphere Feature Highlight

## AB Appeals

The appeal features in Novitasphere provide the ability to submit appeal requests, check appeal status, view appeal development letters, and obtain copies of Medicare redetermination notices.




The appeal request feature allows various actions based on the claim details. Action options include initial redetermination requests, level two reconsideration requests, additional documentation submission, and decision letter downloads. Remember, these action options are based on claim details – if the option is not showing or not available, it is not applicable to the claim you are reviewing.

This smart technology allows Novitasphere to assist you with determining what action is needed when an error is found with a claim. Some errors can be corrected and the claim reopened, some need to be corrected and then the claim needs to be resubmitted, and others require an appeal request (first or second level). The appeal request feature and the claim status feature in Novitasphere will only allow access to the action icons that apply to the claim.

Detailed instructions and screen images of all features are available in the Novitasphere User Guide (JH)(JL). If you are not yet experiencing the many benefits of Novitasphere, access the Novitasphere Enrollment eGuide and begin the enrollment process today.

# Ⓐ 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. | Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. |
| A8:746:40 | Rejected due to duplicate ST/SE submission. | Verify the file was not already sent prior to submitting. |
| 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. |
| 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 SV202-7. |
| A7:455 | This Claim is rejected for Invalid Information within the Revenue code for services rendered. | Verify the revenue code is valid. |
| 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. |
| 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. |
| 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. |
| A7:228 | This Claim is rejected for Invalid Information within the Type of bill for UB claim. | Verify the Type of Bill is valid. |
| 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). |

# Ⓑ 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. |
| A8:562:128:85 | 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. | Only submit claims once the provider is linked to the submitter ID. |
| A7:562:85 | This Claim is rejected for Invalid Information in the Billing Provider's NPI (National Provider ID). | Verify the billing provider's NPI is correct prior to submitting claims. |
| 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. |
| A8:746:40 | This file rejected due to duplicate ST/SE submission. | Verify the file was not already sent prior to submitting. |
| 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). |
| 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. |
| A7:512:712 | This Claim is rejected for Invalid Information within the Obstetric Additional Units; Length invalid for receiver's application system. | Verify the number of units reported in the 2400QTY segment are valid. |

## 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 envelope icon 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!***

---