Electronic Health Care Claims

How to Submit Claims: Claims may be electronically submitted to a Medicare carrier, Durable Medical Equ Medicare Administrative Contractor (DME MAC), or a fiscal intermediary (FI) from a provider's office using a with software that meets electronic filing requirements as established by the HIPAA claim standard and by CMS requirements contained in the provider enrollment & certification category area of this web site and the Enrollment page in this section of the web site. Providers that bill FIs are also permitted to submit claims e via direct data entry screens.

Providers can purchase software from a vendor, contract with a billing service or clearinghouse that will prov or programming support, or use HIPAA compliant free billing software that is supplied by Medicare carriers, DME MACs and FIs. Medicare contractors are allowed to collect a fee to recoup their costs up to $25 if a p requests a Medicare contractor to mail an initial disk or update disks for this free software. Medicare contra maintain a list on their providers' web page that contains the name of vendors whose software is currently b successfully to submit HIPAA compliant claims to Medicare. This is done for the benefit of providers interes purchasing electronic billing software for the first time or in changing their current software.

How Electronic Claims Submission Works: The claim is electronically transmitted in data "packets" from th computer modem to the Medicare contractor's modem over a telephone line. Medicare contractors perform edits. The initial edits are to determine if the claims in a batch meet the basic requirements of the HIPAA s errors are detected at this level, the entire batch of claims would be rejected for correction and resubmissio that pass these initial edits, commonly known as front-end edits or pre-edits, are then edited against impler guide requirements in those HIPAA claim standards. If errors are detected at this level, only the individual c included those errors would be rejected for correction and resubmission. Once the first two levels of edits a each claim is edited for compliance with Medicare coverage and payment policy requirements. Edits at this result in rejection of individual claims for correction, or denial of individual claims. In each case, the submitt batch or of the individual claims is sent a response that indicates the error to be corrected or the reason for After successful transmission, an acknowledgement report is generated and is either transmitted back to th of each claim, or placed in an electronic mailbox for downloading by that submitter.

Electronic claims must meet the requirements in the following claim implementation guides adopted as nat standard under HIPAA:

- Providers billing an FI must comply with the ASC X12N 837 Institutional Guide (004010X096A1).
- Providers billing a Carrier or DME MAC (for other than prescription drugs furnished by retail pharmacies) m with the ASC X12N 837 Professional guide (004010X098A1).
- Providers billing a B DME MAC for prescription drugs furnished by a retail pharmacy must comply with the Council for Prescription Drug Programs (NCPDP) Telecommunications Standard 5.1 and Batch Standard V

For more information please contact your local Carrier, DME MAC or FI (link below) or refer to the Medicare Processing Manual (Pub.100-04), Chapter 24.

Downloads

Part A Flat-File [ZIP, 89 KB]

Part A Edits Document [ZIP, 122 KB]

Part A Companion Document [PDF, 101 KB]

Part B Flat-File [ZIP, 120 KB]

Part B Flat-File [ZIP, 120 KB]

Part B Companion Document [PDF, 116 KB]

NCPDP 5.1/1.1 Inbound NPI Companion Document [PDF, 271 KB]

NCPDP 5.1/1.1 COB NPI Companion Document [PDF, 305 KB]

NCPDP Flat-File [PDF, 2000 KB]

Related Links Inside CMS

Manuals

Electronic Data Interchange (EDI) Performance Statistics

Related Links Outside CMS

X12N 837 version 4010A1 implementation guides

National Council for Prescription Drug Programs Telecommunications Standard version 5.1 and Batch Stan 1.1 implementation guide Note: NCPDP charges non-memebers of that organization for copies of this imple guide.

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