TO: Early Intervention Providers & Payees

FROM: Ann M. Freiburg, Chief
Bureau of Early Intervention

DATE: October 11, 2017

SUBJECT: Affordable Care Act (ACA) Compliance with Phase III CORE 370 Electronic Fund Transfer (EFT) & Electronic Remittance Advice (ERA) Reassociation (CCD+/835) Rule

The Bureau of Early Intervention (EI) was notified by the federal Centers for Medicare & Medicaid Services that we were noncompliant with the Phase III CORE 370 EFT & ERA Reassociation Rule due to not matching the requirement of one payment per one explanation of benefits. Therefore, effective November 1, 2017, payments will match the requirement by sending one payment (electronic fund transfer or paper check) per Provider Claim Summary (PCS).

To accomplish this, the EI Central Billing Office (CBO) will process weekly claims submissions using the following guidelines:

**Physician/Practitioner submissions** submitted by hospitals, etc. will be considered one submission per method of submission (filed electronically or by paper) each week. For each Payee, the PCS will indicate the individual rendering service physician/practitioner in order by assigned tax id with suffix. Denials would be listed first with approvals following – all within a single PCS (based on submission method). The summary amount of the PCS will indicate the total payment for each weekly processing (by submission method of electronic or paper) and one payment (electronic fund transfer or paper check) will be sent. If a hospital submits some claims electronically and some claims by paper that are all processed within a single weekly voucher cycle, the Payee will receive two PCSs sent respective to the method of submission.

**Electronic submissions** will be considered one submission, regardless of the number of individual claims submitted, in a processing week. A single electronic PCS (835 file) for all electronic claims processed in a single weekly voucher cycle will be issued. For each Payee, the electronic PCS will indicate individual rendering service providers in order by assigned tax id with suffix. Denials would be listed first with approvals following – all within a single electronic PCS. Most importantly, the summary amount of the electronic PCS will indicate the total payment for each electronic processing and a single payment (electronic fund transfer or paper check) for all electronic claims will be issued accordingly. A paper PCS listing all electronic claims processed will be received as well, unless the Payee is on “mail hold” status or previously elected to no longer receive paper PCSs.
Paper submissions will be considered one submission, regardless of the number of individual claims submitted in a single voucher cycle. A single paper PCS for all paper claims per site submitted will be issued. For each Payee, the paper PCS will indicate individual rendering service providers in order by assigned tax id with suffix. Denials would be listed first with approvals following – all within a single paper PCS per site submitted. Most importantly, the summary amount of the paper PCS will indicate the total payment for each paper submission and a single payment (electronic fund transfer or paper check) for all paper claims will be issued accordingly.

Electronic and Paper submissions will be separated out per weekly voucher cycle. Payees will receive separate PCSs per the above guidelines.

Each Payee is hereby notified that it will be their responsibility to read and process all electronic and paper PCSs accordingly to ensure 1) all services submitted are accounted for on the weekly voucher submission and 2) the summary amount matches the newly designed electronic or paper PCS. Any discrepancies should be identified immediately upon receipt of the electronic or paper PCS and corrected appropriately to ensure timely submission requirements. A Payee should not wait to receive payment to adjudicate submissions. Payment delivery is subject to availability of funds so practices should be in place upon receipt to track matching electronic and paper PCS-approved amounts with payment amounts.

An example PCS will be posted on the “Provider” tab as soon as possible for further clarification. Questions regarding the new process should be directed to the CBO at 1-800-634-8540.

Thank you.