Reminder: Effective February 1, 2015, Institutional Claims Submitted Via EDI Must Have All Required Field Information

Information posted January 16, 2015

Effective February 1, 2015, Long Term Care Institutional claims will receive warning messages for claims submitted without the following required information. Providers submitting claim transactions to TMHP on or after February 1, 2015, via Electronic Data Interchange (EDI) will receive a warning message, and EDI claim transactions may be rejected if these required fields are not provided at the time the claim transaction is submitted. It is the responsibility of providers to familiarize themselves with the changes discussed in the notification that was posted to the EDI Home Page of www.tmhp.com on December 18, 2014, and ensure that their method of submitting electronic claims and managing warning messages is sufficient prior to the February 1, 2015, implementation date to ensure all applicable transactions are successful.

New Warning Edits:

- Missing Attending Provider (required)
- Missing Principal Diagnosis (required)
- Missing Admitting Diagnosis (conditionally required)
- Missing Admitting Date/Time (conditionally required)
- Missing Discharge Hour (conditionally required)
- Missing Other Insurance Coverage Information (conditionally required)

The EDI Companion Guide has been updated with the changes for Long Term Care 837I transactions and is now available on the following website: EDI Companion Guides Web Page.

Additional Changes for Nursing Facilities (NFs)

- Taxonomy (Nursing Facility institutional claims only):

  This field is required on all claims submitted to TexMedConnect for Nursing Facility services and captures the taxonomy code which best describes the service being billed. The dropdown options include 314000000X, 313M00000X and Other. 314000000X is commonly used for skilled Nursing Facility services. 313M00000X is used for other nursing services. If the rendered service does not correspond with one of these options, select Other. You must then enter a valid Taxonomy code in the field labeled Other Taxonomy. More information related to Taxonomy may be found at www.cms.gov.

- Revenue Code for Medicare Skilled (use 0101 for dates of service on or after February 1, 2015)

- Revenue Code for NF Daily Care Claims (continue to use 0100)

- Additional modifiers being added to Bill Code Crosswalk for add-on services (effective February 1, 2015)

For further details on the upcoming changes to Nursing Facility claims, see the Department of Aging and Disability Services (DADS) Information Letter 14-68, Nursing Facility Changes to the Medicaid Claims Submission Process – Revised, Information Letter 14-82, Upcoming Updates to Institutional Claim Submission for TexMedConnect and Electronic Data Interchange Transactions, and Information Letter 14-83, Upcoming Updates to Institutional Claim Submission for TexMedConnect and Electronic Data Interchange Transactions.