Provider Bulletin 16-05

The Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) Community Behavioral Health (CBH)

Changes to Claims Edits for HIPAA Transaction for Valid 5+4 Zip Code October 7, 2016

The purpose of this bulletin is to inform our provider organizations that an additional claim processing edit will be enforced as of November 7, 2016 for 5010 HIPAA Transactions.

The edit listed below will be in effect on November 7, 2016 and will result in the rejection of claims before the adjudication process. Please understand that those up-front rejected claims will not be submitted for adjudication, because the submitted invalid data is not acceptable. It is the provider's responsibility to ensure that the data submitted is correct. When a data error is made, a rejection will occur prior to adjudication of a claim and an acknowledgement called a 277ca will be generated by the claims system and made available to the provider via our electronic system.

All claims submitted to CBH must contain a valid 5+4 digit zip code for the billing provider and or facility (if required). This change will affect all 837 Professional and 837 Institutional claims. The 5+4 zip code is a HIPAA 5010 requirement; therefore, this modification should be transparent unless the vendor your organization is using is currently sending invalid claims data.

The 5+4 zip code is located as follows for the associated transactions. Please refer to the appropriate claim implementation guide (TR3) for further information.

837 Professional

Billing

Loop 2010AA - N4 Segment - N403 element

Facility

Loop 2310C - N4 Segment - N403 element (Header)

Loop 2420C - N4 Segment - N403 element (Detail)

837 Institutional

Billing

Loop 2010AA - N4 Segment - N403 element

Facility

Loop 2310E - N4 Segment - N403 element (Header)

Questions regarding this bulletin can be directed to the Claims Hot-Line at (215) 413-7125.