

Memo

To: Non-Institutional Providers and Suppliers
From: Keli Orellana, AVP Claims Administration
Date: May 14, 2007
Re: CMS-1500 Claim Submission Requirement

Effective July 1, 2007, only the new version of the CMS-1500 (08-05) will be accepted for claim submission. In the event the old version of the CMS-1500 (12-90) form is received, the entire claim will be rejected and returned to the provider for resubmission on the new version.

Please be advised that the new version of the CMS-1500 claim form has been updated to accommodate the mandated National Provider Identifiers (NPIs). The NPI field must be populated on the CMS 1500 claim form and is mandatory beginning May 23, 2007. You may apply on line by accessing the NPI website at <http://nppes.cms.hhs.gov> or by contacting the National Provider Identifier Enumerator Call Center at 800-465-3203.

As a reminder the following information must be submitted on the CMS 1500 claim form to ensure timely and accurate processing of each claim:

- **Complete Member Eligibility**
- **Date of Service**
- **Valid Diagnosis Codes (ICD-9)** – must be submitted with the highest level of specificity
- **Valid CPT or HCPCS**
- **Valid Modifiers** – when applicable
- **Billed Amount**
- **Days and Units**
- **Place of Service Code**
- **Rendering Facility**
- **Referring Physician Name and NPI**
- **Rendering Physician Name and NPI**
- **Provider Demographic Information** (including Tax ID#)

Failure to submit claims on the new version of the CMS-1500 with the appropriate and required information on or after July 1, 2007 will result in the delay of processing and closure of claim due to insufficient information provided to render claim determination.