

Important Changes Impacting Claims Submissions for BCBSOK Medicare Advantage Plans, Effective Jan. 1, 2017

Effective January 1, 2017, changes affecting claims submission for Blue Cross Medicare Advantage Plans will assist in streamlining claims processing and improve efficiencies of claims routing to our primary claims adjudicator. **The changes are as follows:**

New Payer ID

- The Payer ID for the Blue Cross Medicare Advantage plans will change to 66006 for claims submitted on and after **January 1, 2017**. Providers that are not registered with Experian Health should contact their clearinghouse to confirm the new Payer ID for this plan - as other clearinghouses may assign their own unique number.

Please note that the Blue Cross Medicare Advantage member ID cards will contain the following applicable state alpha prefix:

State	PPO	HMO
Oklahoma	YUX	YUB
Illinois	XOD	XOJ
New Mexico	YID	YIJ
Texas	YUX	YUB
Montana	YDJ	YDL

- The above state alpha prefix must be submitted using the new Payer ID **66006**, even for members who seek services from you when out of state. **You will no longer use the commercial payer IDs for out of state members with these prefixes.** Claims with these prefixes will be rejected if submitted to the commercial payer ID.

Electronic Inquiry Submission Updates

- Effective for services rendered on and after Jan. 1, 2017 Blue Cross Medicare Advantage eligibility and benefit and claim status inquiry transactions will be available for registered Experian Health users.
- Blue Cross Medicare Advantage claim status inquiries (HIPAA 276 transactions) can be conducted through Experian Health.

Payment Cycle

Payment cycles continue to be weekly. Blue Cross Medicare Advantage will make payments each Monday.

- The paper claim mailbox address and fax number will change to:
Blue Cross Medicare Advantage
P.O. Box 3686
Scranton, PA. 18505
Fax Number: (855) 674-9192
- Effective Feb. 1, 2017, claims received at the old BCBSOK P.O. Box will be rejected with a letter informing providers to resubmit to the above P.O. Box.

Continue to next page

New Processes

- New format for payments:
 - EFT trace number:
 - Blue Cross Medicare Advantage Plans will start with a source code of “M” instead of “C”
- A new process will be implemented for claims overpayment recovery:
 - Request for refund letters will be sent by mail for all providers.
 - Providers may submit requested and voluntary refunds to the new lockbox listed below.
- New lockbox address for provider overpayments
Health Care Service Claims Overpayment
29068 Network Place
Chicago, IL 60673-1290

Electronic Remittance Advice (835 ERA)

- 835 ERA files will be distributed to the address associated with the billing provider’s Tax ID and National Provider Identifier (NPI), rather than being distributed to multiple locations.
- EPS (Electronic Payment Summary) will not be available for Blue Cross Medicare Advantage; however for ERA and non-ERA receivers, the Provider Claim Summary’s (PCS) will be sent by mail.
- If the provider is a current ERA receiver for Blue Cross Medicare Advantage, they will not need to re-enroll under the new Payer ID for Blue Cross Medicare Advantage.
- The Payer ID on the 835 ERA will now match the Payer ID that is submitted on the claim. When submitting Blue Cross Medicare Advantage claims using 66006 then the ERA Payer ID will also reflect 66006.

Experian Health Electronic Remittance Advice (835 ERA) Changes

- ERA files for claims submitted with payer ID 66006 will be posted with a new file append name of HCSCMAPD, and will be identified within eCARE and OneSource with payer name Blue Cross Medicare Advantage Prescription Drug Plan.

We appreciate your patience during this transition. BCBSOK will be providing additional information and educational webinars on these changes in the coming months. Please watch for further information on the BCBSOK website at bcbsok.com/provider and in the **Blue Review** provider newsletter.