

# Electronic Billing Newsletter

Novitas Solutions, Inc. A/B MAC Electronic Billing Newsletter

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This **Electronic Billing Newsletter** is published by Novitas Solutions, Inc's Electronic Data Interchange (EDI) department for the electronic billing providers, vendors, billing services, and clearinghouses. This bulletin should be shared with all health care practitioners and managerial members of the provider/supplier staff.

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## A FISS Logon ID Email Requirements

In accordance with the CMS security policy, each person who utilizes the Fiscal Intermediary Shared System (FISS) must enroll for their own unique Logon ID (RACF ID). RACF IDs should never be used by anyone other than the person that the ID has been assigned to and they should never be shared with anyone – including supervisors, managers, or third party billers.

All users enrolling for a RACF ID must meet the following email requirements to ensure the security of the RACF ID:

- The email address provided on your FISS Enrollment form must be your business email address.
- The email address must identify your name. (e.g. Jane.Doe@Hospital.org, j.doe@HospitalName.org)
- The email address must identify your company/organization. (e.g. Jane.Doe@HospitalName.org)
- The email address CANNOT be a SHARED emailed address. (e.g. BillingOfficeManagers@Hospital.org)
- The email address CANNOT belong to a supervisor/manager. (e.g., MySupervisorsName@Hospital.org)
- The email address CANNOT be a private email address. (Gmail, Yahoo, Verizon, AOL etc.)

The email address not meeting these requirement is one of our top return reasons for FISS access requests. If you cannot meet these email requirements, please provide a detailed explanation in the Processing Details block of the FISS enrollment form.





## Novitasphere Feature Highlight:



# CLAIMS SUBMISSION/ERA

One of the many useful features within the Novitasphere portal is Claims Submission/ERA. Everyone with access to Novitasphere can submit electronic claim files (837 transactions) free and retrieve the electronic response reports through the secure online Novitasphere portal. The claim file must first be created in a different software program. Novitas Solutions provides a free option, PC-ACE ([JH](#)) ([JL](#)), or you may obtain software from any approved software vendor ([JH](#)) ([JL](#)).

There are many resources available on the Novitasphere reference materials page ([JH](#)) ([JL](#)) that provide clear instructions for the use of the claims submission feature and a link to the training modules for understanding the electronic reports.

If you are not familiar with Novitasphere, it is our free online portal for providers, billing services, and clearinghouses. The [Novitasphere Enrollment eGuide](#) will walk you through the steps needed to gain access.

## PC-ACE Version 6.1 Upgrade

PC-ACE is a free software program that enables electronic billing for both Medicare Part A and Part B claims in a Health Insurance Portability and Accountability Act (HIPAA)-compliant format. To provide the most up-to-date information within PC-ACE, the software program is updated quarterly. The most current upgrade, which is PC-ACE version 6.1, was released **January 2, 2024**.

To streamline the distribution process for software program upgrades, the PC-ACE software program is available via internet download from our webpage ([JH](#)) ([JL](#)). **Please take time to upgrade now.** The Centers for Medicare & Medicaid Services (CMS) requires you to use the most current version of the software program and to eliminate the use of prior versions within 90 days of receipt of this notification. Therefore, please install this software as soon as possible, but **no later than March 1st**, which is the required upgrade compliance date.



**IMPORTANT:** An installation password is required to install or upgrade the PC-ACE software. This password was provided in your EDI/Novitasphere Welcome letter. If you do not have this letter, please contact the EDI Help Desk. The password is needed for each quarterly upgrade or new installation; therefore, please keep it in a safe place where it is readily available.

## A Top Ten Electronic Billing Errors – Part A

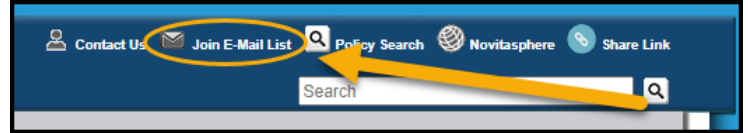
Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:562:128:85	This Claim is rejected for a relational field in error within the Billing Provider's National Provider Identifier (NPI) and Billing Provider's Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A7:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A8:496:85	Claim Rejected for relational field in error. Submitter not approved for electronic claim submissions on behalf of the Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing submitters will result in claim rejections.
A3:121	This Claim is rejected for the Service line number greater than maximum allowable for payer.	Verify the number of Service lines does not exceed 449.
A7:725	This Claim is rejected for Invalid Information within the National Uniform Billing Committee (NUBC) Value Code(s) and/or Amount(s).	Verify the Value code is correct before submitting the claim.
A7:480	Claim rejected for invalid information in the Other Carrier Claim filing indicator.	The Claim Filing Indicator for the other insurance cannot be MA.
A8:306	This Claim is rejected for a relational field in error for Service(s) Rendered.	Not Otherwise Classified (NOC) procedure codes require a detailed description of the service. NOC drug codes require the name and dosage of the drug. Enter the description in the 2400 SV101-7.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:500:286:PR	This Claim is rejected for Invalid Information within the Other payer's Explanation of Benefits/payment information's Postal/Zip Code.	Verify the other payer's zip code is valid prior to submitting the claim.
A7:228	This Claim is rejected for Invalid Information within the Type of bill for UB claim.	Verify the Type of Bill is valid.

## B Top Ten Electronic Billing Errors – Part B

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:496:85	This Claim is rejected for relational field due to Billing Provider's submitter not approved for electronic claim submissions on behalf of this Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing submitters will result in claim rejections.
A8:562:82	This Claim is rejected for Invalid Information for a Rendering Provider's National Provider Identifier (NPI).	Verify the rendering NPI is correct and a member of the group NPI.
A8:562:128:85	This Claim is rejected for relational field in the Billing Provider's NPI (National Provider ID) and Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A7:562:85	This Claim is rejected for Invalid Information in the Billing Provider's NPI (National Provider ID).	Verify the billing provider's NPI is correct prior to submitting claims.
A7:507	This Claim is rejected for relational field Information within the Healthcare Common Procedure Coding System (HCPCS).	Verify that the HCPCS code is valid for Medicare.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:732:464	This Claim is rejected for Invalid Information within the Payer Assigned Claim Control Number Information submitted inconsistent with billing guidelines.	The only valid value for CLM05-3 (Claim Frequency Type Code) for Part B claims is '1' (ORIGINAL). When other values are reported the claim looks for the Payer Assigned Claim Control number to be reported in the 2300 REF. This number should not be reported for Medicare Part B.
A7:535	This Claim is rejected for Invalid Information within the Claim Frequency Code	Verify the Claim Frequency Code reported is a "1." 1 is the only valid code for Part B.

## **Subscribe to our Email Lists**

Join our email lists for the latest Medicare broadcasts from Novitas Solutions, delivered directly to your email inbox. Follow these simple steps to join:



1. Navigate to [www.novitas-solutions.com](http://www.novitas-solutions.com) and select the applicable Medicare jurisdiction.
2. Click the “Join E-Mail List” link in the upper right of the dark blue menu.
3. Enter your email, first name, and last name.
4. Select all appropriate mailing lists. We encourage all EDI billers to subscribe to the EDI list and all Novitasphere users to subscribe to both the EDI and Novitasphere lists.
5. Click Subscribe. You will then be sent a verification email.

## **Information Needed When Calling EDI**

To ensure the privacy of our customer’s protected information, we must verify certain criteria with every telephone call. When you call EDI Services or the Novitasphere Help Desk, please be sure to have your Provider Transaction Access Number (PTAN), National Provider Identifier (NPI), and the last five digits of the organization’s Tax ID. Having all this information readily available will allow for us to assist with your inquiry more quickly and efficiently.

## **Contact Us**

We are available at the times and numbers shown below. Please contact us with any questions related to information in this newsletter.

### **JH EDI Help Desk**

1-855-252-8782, Option 3  
Monday-Friday, 8 a.m. – 4 p.m. ET/CT

### **JL EDI Help Desk**

1-877-235-7083, Option 3  
Monday-Friday, 8 a.m. – 4 p.m. ET/CT



### **Novitasphere Help Desk**

1-855-880-8424  
Monday-Friday, 8 a.m. – 5 p.m. ET/CT

### **Website Contact Information**

([JH](#)) ([JL](#))  
[www.novitas-solutions.com](http://www.novitas-solutions.com)

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***Thank you for reading our newsletter!***

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