




**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Division of Medical Assistance**  
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**MassHealth**  
**All Provider Bulletin 122**  
**May 2003**

**TO:** All Providers Participating in MassHealth  
**FROM:** Douglas S. Brown, Acting Commissioner   
**RE:** Administrative Simplification: Remittance Advices

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**Introduction**

Effective for the first pay cycle of June 2003, the status of all claims for MassHealth members, including CommonHealth and clients of Massachusetts Commission for the Blind (MCB), will be combined on one remittance advice (RA). Currently, providers receive a separate RA for each of these, when applicable.

This change is being implemented to streamline the account reconciliation process, and applies to both paper and electronic remittance advices.

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**New Procedure**

The combined RA will be distributed by invoice type and sorted by claim status, as all RAs are now: paid claims will appear first, followed by denied and suspended claims.

When submitting claims, providers may want to use the patient account field to identify the program from which the member receives benefits. As always, the patient account information on a claim is created by the provider and subsequently appears on the RA.

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**Questions**

If you have any questions about this bulletin, please contact MassHealth Provider Services at 617-628-4141 or 1-800-325-5231.

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