




**MassHealth**  
**All Provider Bulletin 246**  
**June 2014**

**TO:** All Providers Participating in MassHealth

**FROM:** Kristin L. Thorn, Medicaid Director 

**RE:** **MassHealth Claims Involving Casualty Payer Payments**

### **Background**

All Provider Bulletin 225 (April 2012) advised providers that some MassHealth claims with reported partial payments from Personal Injury Protection (PIP) Payers did not process correctly and instructed providers on how to return the overpayments. To address this, a change was implemented in the Medicaid Management Information System (MMIS) to recognize and appropriately deduct Casualty Payer payments from MassHealth claim reimbursement.

This bulletin describes new billing requirements for reporting Casualty Payer payments (formerly PIP payments) on MassHealth institutional and professional claim submissions.

### **Billing Requirements**

Providers reporting Casualty Payer payments should follow these instructions.

- Use one of the following Casualty Payer carrier codes assigned by MassHealth:
  - 2222220 Automobile Accident;
  - 2222221 Worker's Compensation; or
  - 2222222 Other.
- Report the Casualty Payer as the **primary** carrier code.
- Report the Casualty Payer adjudication information at the **claim** (header) **level** only and do not repeat information at the service detail line level.
- The Casualty Payer remittance date must be **prior** to any other Payer remittance date(s) reported on the claim.
- If the Casualty Payer paid amount is less than the total claim charges, use HIPAA claim adjustment group code and adjustment reason code OA 45 to balance the Casualty Payer information.

Appendix C (Third-Party Liability Codes) in the MassHealth provider manuals will be updated to include the above listed Casualty Payer carrier codes.

*(continued on next page)*

### **Direct Data Entry (DDE) Transactions**

For all claims submitted via DDE through the Provider Online Service Center (POSC), the Casualty Payer adjudication information must be entered on the Coordination of Benefits tab of the following panels.

- Coordination of Benefits (COB) Detail; and
- List of COB Reasons

Do not repeat the Casualty Payer information on the Procedure tab.

Submit COB information for all other Payers according to instructions found in the POSC job aids.

Go to the MassHealth website at [www.mass.gov/masshealth](http://www.mass.gov/masshealth). Click on

1. Information for MassHealth Providers;
2. Medicaid Management Information System (MMIS) and Provider Online Service Center (POSC);
3. Need Additional Information or Training?;
4. Get Trained; and
5. Under the subheading Third-Party Liability (TPL), click on either Institutional or Professional Claim job aid.

### **837 Transactions**

For 8371 or 837P electronic transactions, the Casualty Payer adjudication information must be entered in Loop 2320. Do not repeat the Casualty Payer information in Loop 2430.

Submit COB information for all other Payers according to instructions found in the HIPAA 837 Companion Guides. For MassHealth 837 Companion Guides go to the MassHealth website at [www.mass.gov/masshealth](http://www.mass.gov/masshealth). Click on

1. MassHealth Regulations and Other Publications;
2. Provider Library; and
3. MassHealth Companion Guides.

### **Questions**

If you have any questions about the information in this bulletin, please contact the MassHealth Customer Services Center at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.