



PROVIDER QUICK TIPS

#123

Medical Assistance (MA) Claims for Ambulance Transport to Inpatient Hospital Facilities

The Centers for Medicare and Medicaid Services has mandated that insurers, including the Department of Human Services, upgrade all electronic healthcare claim transactions effective January 1, 2012. As a result of the specific upgrade requirements from the X12v4010 Healthcare Transactions Sets to the X12v5010 Healthcare Transaction Sets, providers are required to report certain additional claim information on the 837P electronic claim form and via Internet claim for services rendered to MA recipients.

Effective January 1, 2012, MA enrolled ambulance providers must reflect the date of service as the date of admission in the admission date field when submitting claims for ambulance transports to the inpatient hospital setting (place of service 21). This requirement is **only** for claims submitted for ambulance transports to the inpatient hospital setting, POS 21, and **only** applies to claims submitted via the 837P electronic claim form and Internet. Failure to complete the date of admission field for claims submitted for POS 21 will result in claim rejection due to an incomplete field.

Thank you for your service to our Medical Assistance recipients.
We value your participation.
Check the Department of Human Services' website often: www.dhs.pa.gov

