

Provider Update

Updated CMS 1500 Form

Background: In June 2013, the National Uniform Claim Committee (NUCC) announced the approval of an updated CMS 1500 Claim Form (version 02/12) that accommodates reporting needs for ICD-10 and aligns with requirements in the Accredited Standards Committee X12 (ASC X12) Health Care Claim: Professional (837P) Version 5010 Technical Report Type 3.

★ What this means to you:

Effective April 1, 2014, submit a paper CMS 1500 Claim Form using only the revised CMS 1500 Claim Form (version 02/12). After April 1, 2014, claims received on the 08/05 version will be rejected. Please share this information with your office or billing staff.

Why is this change necessary?

On January 6, 2014, Amerigroup* started accepting the updated CMS 1500 Claim Form version 02/12 to support ICD-10 changes. Please follow the guidelines set forth by the NUCC for completing the new claim form, or your claim will be rejected.

Will a grace period for submitting the old form be allowed?

The grace period ends March 31, 2014. NUCC allows the submission of either CMS 1500 Claim Form version 08/05 or 02/12 from January 6, 2014, through March 31, 2014.

What if I need help?

For more information about the revised CMS 1500 Claim Form, please visit <http://www.nucc.org/>, which provides helpful resources like a list of changes between the 08/05 and 02/12 claim versions and the CMS 1500 Instruction Manual.

If you have questions about this communication or need help with anything else, contact your local Provider Relations representative or call our Provider Services team:

- Medicaid providers call 1-800-454-3730
- Medicare providers call 1-866-805-4589

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