

#### **Revised CMS 1500 Form**

The National Uniform Claim Committee (NUCC) has created a revised version of the CMS 1500 form (version 02/12) to accommodate the coding changes for ICD-10.

Physicians and other health care professionals will notice two significant changes on the revised CMS 1500, the claim form used to submit paper claims to Medicare and the required claim form to submit paper claims to Horizon Blue Cross Blue Shield of New Jersey.

The CMS 1500 Form (version 02/12) will give physicians the ability to:

- Identify whether they are using ICD-9-CM or ICD-10-CM codes.
- Include up to 12 codes in the diagnosis field (the limit on the 08/05 version is four codes in the diagnosis field).
- Include information that will improve the accuracy of the data reported, such as being able to identify the role of the provider and specific dates of illness.
- Align paper copy claim submissions with the ASC X12 Health Care Claim: Professional (837P) transaction.

The table below provides information about when to use the CMS 1500 Form (version 02/12).

	Medicare will	Horizon BCBNSJ will
On January 6, 2014	Begin accepting the - CMS 1500 (version 02/12).	Begin accepting the - CMS 1500 (version 02/12).
January 6, 2014 through March 30, 2014	Accept both - CMS 1500 (version 08/05) CMS 1500 (version 02/12).	Accept both - CMS 1500 (version 08/05) CMS 1500 (version 02/12).
April 1, 2014 and after	Accept ONLY the - CMS 1500 (version 02/12).	Continue to accept both - CMS 1500 (version 08/05) CMS 1500 (version 02/12).

For more information, visit <u>www.nucc.org</u>. If you are interested in purchasing CMS 1500 (02/12) forms, you may contact the U.S. Government Printing Office at 1-866-512-1800, or your current forms supplier. If you have questions, please contact your Network Specialist or Ancillary Contracting Specialist.

(Continues)



### 1500 Claim Form FAQs

#### Q1. Why was the CMS 1500 Claim Form changed?

**A1.** The CMS 1500 Claim Form was revised to accommodate ICD-10 and to align with requirements in the Accredited Standards Committee X12 (ASC X12) Health Care Claim: Professional (837P) Version 5010 Technical Report Type 3.

#### Q2. What are the differences between versions?

**A2.** The biggest change on the new CMS 1500 Claim Form is the addition of an indicator to differentiate between ICD-9-CM and ICD-10-CM diagnosis codes. Also, the number of possible diagnosis codes has been expanded from four to 12. You do not have to be ICD-10 compliant to use the new form.

### Q3. When can I start using the new version?

A3. The NUCC approved the following transition timeline on August 1, 2013:

<u>January 6, 2014</u>: Payers may begin receiving and processing paper claims submitted on the revised CMS 1500 Claim Form (version 02/12).

<u>January 6 through March 31, 2014</u>: Dual use period during which payers may continue to receive and process paper claims submitted on the old CMS 1500 Claim Form (version 08/05).

April 1, 2014: Payers may receive and process paper claims submitted on the revised CMS 1500 Claim Form (version 02/12).

This timeline aligns with Medicare's transition timeline.

#### O4. When must I stop using the old version?

**A4.** Effective April 1, 2014, CMS will no longer accept the CMS 1500 Claim Form (version 08/05). Horizon BCBSNJ will, however, continue to accept both forms (old version 08/05 and new version 02/12) after April 1, 2014.

## Q5. I have a stock of old version forms. May I continue to use them?

A5. You may continue to use old version forms (08/05) for claims submitted to Horizon BCBCSNJ.

# Q6. Where can I get copies of the new form and can I get copies pre-printed with my practice information?

**A6.** If you are interested in purchasing CMS 1500 Claim Forms (version 02/12), you may contact:

The U.S. Government Printing Office at 1-866-512-1800 or

http://bookstore.gpo.gov/catalog/government-forms-phone-directories,

TFP Data Systems at 1-800-482-9367 ext. 58029, or email <u>1500form@tfpdata.com</u>, Or your current forms supplier.

# Q7. Can I download and print out copies of the CMS 1500 Claim Form for our office to use?

A7. Yes, bearing in mind that most scanners can only read red ink and that some vendors may choose not to process claims that are submitted in black ink.

(Continues)



# Q8. Do I still have to use a CMS 1500 Claim Form that is in red ink or can I use a form that is copied or printed in black ink?

**A8.** For the CMS1500 Claim Form to be read by a scanner, the form must be in red ink. Some vendors may choose not to process claims that are submitted in black ink.

Q9. I can continue to submit claims electronically, right?

A9. Yes.

### Q10. The Medicare Crossover function will continue, right?

**A10.** Yes. There is no change to this process with the introduction of the revised CMS Claim 1500 Form. Claims processed by the local Medicare Intermediary will continue to be forwarded to Horizon BCBSNJ Electronically for our consideration as the secondary payer. There is no need to submit hard copy claims for any services that will cross over to Horizon BCBSNJ from Medicare.