

**C. GENERAL RULES FOR MEDICAL ASSISTANCE BILLING****Filing Statutes for Billing**

The following statutes must be followed for timely billing:

- MCO claims must be received within 180 days from the date of service;
- Fee-For-Service (FFS) claims must be received within 12 months of the date of service;

Please Note: A Remittance Advice, Medicare/Third-party Explanation of Benefits (EOB), IMA-81 (letter of retro-eligibility) and/or a returned date-stamped claim from the program are the **only** documents that will be accepted as proof of timely filing.

Please bill promptly. Claims received after the deadlines will be denied. If the recipient is enrolled in an MCO on the date of service, the MCO must be billed directly.

**Paper Claims**

If a provider is submitting paper claims, he/she must use a CMS-1500 form. Claims can be submitted in any quantity and at any time within the filing time limitation. Once Medical Assistance receives a claim, it may take 30 business days to process. Invoices are processed on a weekly basis. Payments are issued weekly and mailed to provider's "pay-to" address. **Medicaid will accept paper claims only on the revised Form 1500, version 02/12. Providers cannot report both ICD-9-CM and ICD-10-CM codes on the same claim form.** For those services rendered to recipients **not** enrolled in an MCO, mail FFS claims to the following address:

**Claims Processing  
Maryland Department of Health and Mental Hygiene  
P.O Box 1935  
Baltimore, MD 21203-1935**

**For MCO Claims:** Paper claims for students enrolled in HealthChoice must be submitted to the appropriate MCO. Once an MCO receives a claim, they are required to process claims within 30 calendar days (or pay interest).

**Electronic Claims**

If a provider chooses to submit claims electronically, HIPAA regulations require providers to complete electronic transactions using ANSI ASC X12N 837P, version 5010A. **Before** submitting electronic claims directly or through a billing service, a provider must have a signed *Submitter Identification Form* and *Trading Partner*

## Section 6

## Billing and Encounter Data Reporting

*Agreement* on file. Providers must also undergo testing before transmitting such claims. Electronic claims are generally paid within two weeks of submission.

Testing information can be found on the DHMH website at the following link:

<http://www.dhmh.maryland.gov/hipaa/Pages/testinstruct.aspx>

If you have any questions regarding HIPAA testing, please send an email to:

[dhmh.hipaamedicaid@maryland.gov](mailto:dhmh.hipaamedicaid@maryland.gov).

Companion guides to assist providers for electronic transactions can be found on the DHMH website: <http://www.dhmh.maryland.gov/hipaa/Pages/transandcodesets.aspx>.

**For MCO Claims:** Providers should contact individual MCOs if interested in billing electronically. MCOs are not required to accept electronic claims. Each MCO may require separate testing.

### Healthy Kids/EPSTD Exceptions for Third Party Billing

When participants have both Medicaid and other insurance coverage, the provider must bill the other insurance first. However, States are required to exempt certain Healthy Kids/ EPSTD services from this rule.

For preventive services, you may submit the following codes directly to the appropriate MCO (or Medical Assistance, if appropriate) even if the child is covered by other third party insurance:

- Preventive Medical Services (99381-99385, 99391-99395)
- Immunizations
- Developmental Tests (96110, 96111)
- Objective Hearing Tests (92551)
- Objective Vision Tests (99173)

The Medical Assistance Program or the MCO will handle recoveries from other insurances for these services. When the patient has Medical Assistance and other third party insurance, do not bill the patient for any co-pay or deductible associated with other insurance policies.

Only the services/codes listed above are exempt. Other EPSTD components, such as laboratory tests and other primary care services, must first be submitted to the other insurer prior to billing Medical Assistance of the MCO.