

Empire BlueCross

Lab, DME, and Specialty Pharmacy Blue Claims

Generally, as a healthcare provider you should file claims for your Blue Cross and Blue Shield (BC/BS) patients to the local Blue Plan. However, there are circumstances when claims filing directions will differ based on the type of ancillary provider. To that point, effective October 14, 2012, Empire Blue Cross (Empire) implemented claim filing requirements, based on ancillary provider type.

Q. Where should I file the claim?

A. Please see below based on what type of claim you are filing;

Independent Clinical Laboratory (Lab) --The claim must be filed to the BC/BS Plan where the specimen was drawn.

Durable/Home Medical Equipment and Supplies (DME) --The claim must be filed to the BC/BS Plan where the equipment was delivered to or rented/purchased at a retail store.

Specialty Pharmacy --The claim must be filed to the BC/BS Plan where the ordering/referring physician is located.

Q. When did this go into effect?

A. This Blue Cross and Blue Shield Association policy went into effect on 10/14/12.

Q. Does this apply to non-contracting providers?

A. The ancillary claim filing rules apply regardless of the provider's contracting status with the Blue Plan where the claim is filed. If non-participating with the Plan, the provider must still file the claim to the Plan where the specimen is drawn; DME is rented, purchased or delivered; or the physician ordering the specialty Rx is located.

Q. How can I verify Member Eligibility and Benefits?

A. You can check by calling the number on the back of the member's ID card or by calling 1-800-676-BLUE.

Q. How best can I file an ancillary claim to avoid the chance of a rejected claim?

A. In addition to the CMS required fields to be filed on a claim, Empire has created the chart on the following page to help insure all necessary claim fields are included.

Provider Type	Required Fields	Where to File	Example
<p>Independent Clinical Laboratory Types of Service include but are not limited to: Blood or urine specimens</p>	<p>Referring Provider: Field 17B on CMS 1500 Health Insurance Claim Form or Loop 2310A (claim level) on the 837 Professional Electronic</p>	<p>File the claim to the Plan in whose service area the <i>specimen was drawn</i>.*</p> <p>Where the <i>specimen was drawn</i> will be determined by the address associated with the referring/ordering provider's NPI.</p>	<p>Blood is drawn* in lab or office setting located in Plan X service area. Blood analysis is done in Plan Y service area. <i>File to: Plan X service area</i>. *Claims for the analysis of a lab must be filed to the Plan in whose service area the <i>specimen was drawn</i>.</p>
<p>Durable/Home Medical Equipment and Supplies (D/HME) delivered to patient. Types of Service include, but are not limited to: Hospital beds, oxygen tanks, crutches, etc.</p>	<p>Patient's Address: Field 5 on CMS 1500 Health Insurance Claim Form or Loop 2010CA on the 837 Professional Electronic Submission. Ordering Provider: Field 17B on CMS 1500 Health Insurance Claim Form or Loop 2420E (line level) on the 837 Professional Electronic Submission. Place of Service: Field 24B on the CMS 1500 Health Insurance Claim Form or Loop 2300, CLM05-1 on the 837 Professional Electronic Submissions.</p>	<p>File the claim to the Plan in whose service area the equipment was <i>delivered</i>.</p>	<p>Wheelchair is rented/purchased from an ancillary supplier located in Plan X service area and delivered to an address in Plan Y service area. <i>File to: Plan Y service area</i>.</p> <p>Oxygen is rented from an ancillary supplier located in Plan X service area and is delivered to the patient's address in Plan Y service area. <i>File to: Plan Y service area</i>.</p>
<p>Durable/Home Medical Equipment and Supplies (D/HME) rented/purchased at a retail location. Types of Service include, but are not limited to: Hospital beds, oxygen tanks, crutches, etc.</p>	<p>Ordering Provider: Field 17B on CMS 1500 Health Insurance Claim Form or Loop 2420E (line level) on the 837 Professional Electronic Submission. Place of Service: Field 24B on the CMS 1500 Health Insurance Claim Form or Loop 2300, CLM05-1 on the 837 Professional Electronic Submissions. Service Facility Location Information: Field 32 on CMS 1500 Health Insurance Form or Loop 2310C (claim level) on the 837 Professional Electronic Submission.</p>	<p>File the claim to the Plan in whose service area the equipment was <i>rented/purchased in a retail store</i>.</p>	<p>Crutches are purchased at a retail store located in Plan Y service area. <i>File to: Plan Y service area</i>.</p>

Provider Type	Required Fields	Where to File	Example
Specialty Pharmacy Types of Service: Non-routine, biological therapeutics ordered by a healthcare professional as a covered medical benefit .	Referring Provider: Field 17B on CMS 1500 Health Insurance Claim Form or Loop 2310A (claim level) on the 837 Professional Electronic Submission.	File the claim to the Plan in whose service area the <i>ordering/referring physician is located.</i> The ordering/referring physician location is determined by the address associated with the provider NPI.	Patient is seen by a physician in Plan X service area who orders a specialty pharmacy injectable for this patient. Patient will receive the injections in Plan Y service area where the member lives for 6 months of the year. <i>File to: Plan X service area.</i>

Q. Where can I go to check the status of my claim(s)?

A. For the ancillary types listed above, to check on the status of a claim, you can access Availity® to obtain information on any Empire Plan and many other Blue Plans. For more information or to register, go to www.availity.com.

Q. What can I do if I have additional questions?

A. If you have additional questions about filing ancillary claims please call the number on the back of the member's ID card.

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Empire BlueCross BlueShield

Lab, DME, and Specialty Pharmacy Blue Claims

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A. Please see below based on what type of claim you are filing;

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