

VA



U.S. Department of Veterans Affairs

Veterans Health Administration
Office of Community Care

VA Community Care Paper Claims Submissions

Provider Training Guide

May 2020

Learning Objectives & Training Topics

Training Topics

1. Overview

- What is the transition from paper claims to electronic format?
- What are the benefits of transitioning to electronic claims?

2. Paper Claims Submission Process

- What are the ways that providers can submit paper claims to VA?
- What is the new process for submitting paper claims?
- What claims are exempt from the transition to processing paper claims electronically?
- Why are claims typically rejected?

3. Assistance with Paper Claims

- What if a paper claim is rejected?
- What can I do to prevent my paper claim being rejected?
- Where can I find additional assisting with submitting paper claims?

4. Appendix

- What is the process for electronic claims?
- Can electronic claims include attachments?

Learning Objectives

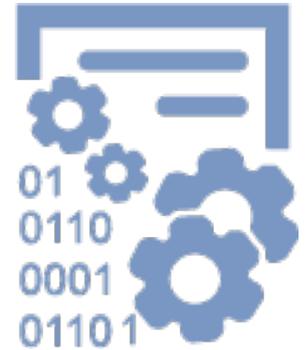
- To learn the reasons and benefits of VA transitioning from paper to electronic-based claims
- To learn the new process of submitting paper claims via mail for electronic conversion
- To obtain information and resources for assistance with submitting paper claims

Overview

Training Topic 1: Overview (1 of 3)

What is the transition from paper claims to electronic format?

- VA is transitioning away from paper-based claims to an electronic format, Electronic Data Interchange (EDI) transactions, in order to improve its claims submission and processing capabilities.
- Providers should submit electronically when possible. This is now easier than ever with the release of 275 transaction capability, which allows claims with supporting documentation to be submitted electronically.
- Community providers who cannot submit electronic claims should send Veteran's paper health claims submissions to a single location (VHA Office of Community Care, P.O. Box 30780, Tampa, FL 336-3780) where they will be converted and routed to VA medical centers as electronic claims.
- As part of VA's recent efforts to increase efficiency and accuracy in claims processing, the paper submission intake system will now scan automatically for non-compliance based on national standards. Note that this may cause an increase in front-end rejections, as the need to correct non-compliant fields throughout claims processing will be reduced.



What is the transition from paper claims to electronic format?

- The transition of paper claims to electronic format is also being augmented with the release of EDI 275 Attachments, which will allow claims with 275 attachments to be submitted electronically.
- Community providers who submit electronic claims but continue to submit paper supporting documentation by mail must include either:
 - 1) A paper copy of the claim with supporting documentation, OR
 - 2) a completed cover sheet form, which can be found on the [P2E webpage](#).
- The cover sheet form must contain the required fields needed to match the electronic claim to the paper supporting documentation. If paper documentation lacks a paper copy of the claim, or the cover sheet form is incomplete or missing, this WILL result in delayed processing or rejection of the claim for required documentation.

What are the benefits of transitioning from paper to electronic format?

-  Reduces manual entry and the number of steps required for claims receipt
-  Reduces the overall number of paper claims manually processed
-  Increases overall efficiency and turnaround time for claims processing and payment

Paper Claims Submission Process

Training Topic 2: Paper Claims Submission Process (2 of 4)

What are the ways that providers can submit claims to VA?

Providers who primarily submit paper claims (due to the need to provide supporting medical documentation, i.e. attachments) can now submit claims the following two ways:

- **Option 1 (preferred) – Submitting Both Claims and Supporting Medical Documentation Electronic Data Interchange (EDI):** You can work with VA's clearinghouse, Change Healthcare, to begin submitting claims electronically. Note that this process includes the new 275 transaction capability for supporting documents electronically (see slide 17 for information on Change Healthcare and the electronic, EDI submission process).
- **Option 2 – Mailing Paper Claims and Medical Documentation:** We encourage providers to submit claims electronically through their clearinghouses when possible. If you are unable to submit claims and documentation electronically, community providers will now mail paper claims to: VHA Office of Community Care P.O. Box 30780 Tampa, FL 33640-3780, the new single Community Care address for central processing (see Slide 9 for exceptions).

NOTE: Community providers that submit claims as 837 transactions and paper records: Please include a paper copy of the claim when submitting the corresponding documents OR complete and attach cover sheet to paper medical documents. If paper records lack a paper copy of electronic claim or a completed cover sheet with the minimum requirements, the submission may result in a delay in processing or a rejection of the claim due to the inability to match the records to the associated claim.

Training Topic 2: Paper Claims Submission Process (3 of 4)

What is the new process for submitting paper claims?

Community provider mails the paper claims and documentation to the new mailing address of VA's central claims intake location.



Staff at VA's central location scans and converts the paper claims and documentation to an electronic format, an Electronic Data Interchange (EDI) transaction.



Once converted to an EDI transaction, the Change Healthcare clearinghouse will route the claims and documentation to the VA using the normal EDI process.

Training Topic 2: Paper Claims Submission Process (4 of 4)

Which claims are exempt from the transition to processing paper claims electronically?

The following types of claims are *not* included in the new paper claims submission process:

- Caregiver Bowel and Bladder
- Federal or Tribal government health care
- Reconsiderations/Appeals
- Other programs that do not bill on a CMS-1500 or CMS-1450
- Contract Nursing Home



NOTE: We are currently reviewing processes and details of these exceptions in order to include some of these in the future.

Training Topic 3: Assistance with Paper Claims (1 of 5)

Assistance with Paper Claims

Training Topic 3: Assistance with Paper Claims (2 of 5)

What if a paper claim is rejected?

If a claim is rejected, providers should receive a notification letter from VA describing the rejection, and the reason and associated code for the rejection (i.e. "Reject reason 088-Invalid Service Facility Address.").

The following slides will review the top three most common rejection reasons for CMS-1500 and CMS-1450 claims and what the VA requires when filling out these forms to prevent these rejections.

For additional information on paper claims rejections and how to avoid them, view the "Preventing Paper Claims Rejections" Fact Sheet or view the full list of rejections and associated codes on the [VHA Office of Community Care website](#).

Training Topic 3:

Assistance with Paper Claims (3 of 5)

What can I do to prevent my paper claim being rejected?

CMS-1500 claims forms rejections

CMS-1500 claims forms are the official standard form used by physicians and other providers when submitting bills/claims for reimbursement to Medicare/Medicaid for health services. It is also used by private insurers and managed care plans. A few of the most common reasons for CMS-1500 claims rejections are as follows:

- 1. Rejection Reason (016): The claim contains a missing, incomplete, or invalid Insured ID.**
Explanation: This is the most common reason for paper claims rejection. The "Insured ID," which is also the patient's social security number, must be in box 1a and total exactly nine (9) numeric digits. A combination of numbers and letters, or an incomplete entry, will result in rejection of the claim.
- 2. Rejection Reason (086): The claim is missing an Insurance Plan Name or Program Name.**
Explanation: Submissions must include the name of the insurance plan or program in box 9D, "Insurance Plan Name or Program Name," as this is a required field.
- 3. Rejection Reason (088): The claim has an invalid Service Facility Address.**
Explanation: The location of the service facility, shown in box 32, "Service Facility Location Information," must be the address of a physical street address of a building where the actual service was performed. A PO Box is not acceptable as a valid street address for the service facility locations. If box 33 on the CMS-1500 (HCFA-1550) is a street address and nothing is in box 32, it's presumed to be the same and will *not* be rejected.

Training Topic 3: Assistance with Paper Claims (4 of 5)

What can I do to prevent my paper claim being rejected?

How to avoid CMS-1450 claims forms rejections

The CMS-1450 is a claim form used by hospitals, nursing facilities, in-patient, and other facility providers. A specific facility provider of service may also utilize this type of form. A few of the most common reasons for CMS-1450 claims rejections are as follows:

1. Rejection Reason (016): The claim contains a missing, incomplete, or invalid Insured ID.

Explanation: This is the most common reason for paper claims rejection. The "Insured ID," which is also the patient's social security number, must be included and inputted in box 60 and this entry must total exactly 9 numeric digits only. A combination of numbers and letters, or an incomplete entry, will result in rejection of the claim.

2. Rejection Reason (021): The claim is missing a Patient Control Number.

Explanation: The "Patient Control Number" in box 3a is a required field for every claim.

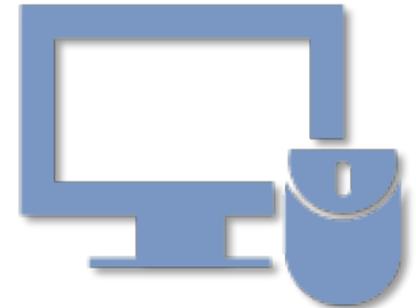
3. Rejection Reason (034): The claim contains an invalid or missing Patient Reason Diagnosis Code.

Explanation: The diagnosis code, or "Patient Reason DX" is the reason for the Veteran seeing the provider and the reason they are being treated. VA must have at least one official code from the American Medical Association (AMA) database on the form. Please enter the appropriate code in box 70 , under "Patient Reason DX."

Training Topic 3: Assistance with Paper Claims (5 of 5)

Where can I find additional assistance with submitting paper claims?

- Learn more about 275 transactions and the paper claims process on the VA Office of Community Care web pages:
 - [File a Veteran Care Claim](#)
 - [Paper to Electronic Claims \(P2E\)](#)
- Contact P2Einquiries@va.gov for additional questions related to the paper claims submission process



Appendix

Electronic Claims Submission Process (1 of 2)

What is the Process for Electronic Claims?

Community providers and their billing offices can submit claims electronically using EDI through the VA's clearinghouse via Change Healthcare. Community providers may also elect to submit electronically to VA through a clearinghouse of their choice. Additionally, the new capability will allow VHA to accept 275 transactions.

Community provider prepares the electronic healthcare claims (837) and supporting documentation (275) for VA community Care (formerly known as VA Fee Basis or Non-VA)



Community provider submits the claim and supporting documentation through their EDI provider services in coordination with VA's clearinghouse Change Healthcare



The VA Clearinghouse processes the claim and documentation via EDI

Electronic Claims Submission Process (2 of 2)

Can Electronic Claims Include Attachments?

Attachments: A New EDI Capability

- Yes, attachments, supporting documentation, can now be submitted as 275 transactions with electronic claims submissions (837).
- Attachments include any documents that would normally be sent via paper in support of a claim, e.g. health notes or other data related to demographic, clinical information.
- 275 supports most formats to include GIF, MIME, HL7 Clinical Document Architecture (CDA), and PDFs

For assistance with electronic claims:

- Contact Change Healthcare to assist with details on submitting electronic claims at 844-217-1199 or by visiting their website at [Change Healthcare Support](#).
- Visit the [VHA Office of Community Care P2E page](#) for additional information on submitting electronic claims.