



**PROVIDER BULLETIN**  
#08-2018

**TO:** Participating hospitals and ambulatory surgical centers that provide covered services to AmeriHealth New Jersey members

**FROM:** Provider Contracting and Reimbursement

**DATE:** May 15, 2018

**SUBJECT:** Reminder: Enhanced claim edits to align with industry standard billing rules

We are sending you this bulletin to remind you that starting June 10, 2018, AmeriHealth HMO, Inc. and AmeriHealth Insurance Company of New Jersey (collectively, AmeriHealth New Jersey) are implementing a claim editing process during prepayment review to increase compliance with current industry standards and support the automated application of correct national coding principles. If you have been submitting claims in accordance with industry standards, you will have no issues with the topics in this bulletin. However, if you have not, please be advised that you may see an increase in claim rejections and/or denials processed once the claim edits begin. Some examples of what you can expect to see are listed below.

**Modifiers**

While modifiers are only required on outpatient claims reimbursed according to Ambulatory Payment Classifications (APC), should modifiers be billed on non-APC reimbursed claims, it must be in accordance with national billing standards, such as:

- Centers for Medicare & Medicaid Services (CMS)
- American Medical Association (AMA) Current Procedural Terminology (CPT®) coding guidelines
- CMS HCPCS LEVEL II Manual coding guidelines

**ICD-10 coding**

ICD-10 codes must be billed according to the highest level of specificity. In addition, primary diagnosis codes cannot be billed with the following:

- diagnosis of external causes
- manifestation codes
- secondary diagnosis code

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**We encourage you to share this information with appropriate members of your staff.**

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## **More information**

Please review the *Partners in Health Update*<sup>SM</sup> article, [Update: Enhanced claim edits to support correct coding principles to begin in June 2018](#), which was posted on the AmeriHealth Provider News Center on May 15, 2018. For further questions about the enhanced claim editing process, review our [Claim edit enhancements: Frequently asked questions \(FAQ\)](#), which can also be found on AmeriHealth NaviNet<sup>®</sup> Plan Central in the Frequently Asked Questions section under Administrative Tools & Resources.

If you still have questions after reviewing these resources, please send an email to [ahclaimeditquestions@amerihealth.com](mailto:ahclaimeditquestions@amerihealth.com).

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