



PROVIDER BULLETIN
#21-2013

TO: Participating hospitals and ambulatory surgical centers

FROM: Contracting and Provider Networks

DATE: November 13, 2013

SUBJECT: Operating Physician Requirement for Facility Claims

As of November 1, 2013, we have begun transitioning our Independence Blue Cross membership to a new operating platform. As a result of this transition, we will be enforcing industry standards for claims processed on the new platform (including Federal Employee Program [FEP] members and Host BlueCard® claims).

One of these standards is the requirement of an operating physician on any claim with a surgical revenue code. If you submit a claim that does not follow this requirement, it will be rejected. Please review the following information specific to outpatient and inpatient claims.

Outpatient claims

An operating physician must be reported on outpatient claims when the following is reported:

- Revenue code = 360-369, 490-499, or 750-759
- HCPCS code = 10000-69999

Note: The name and primary ID should be included in the NM1 segment of loop 2310B. The REF segment is no longer required.

Inpatient claims

An operating physician must be reported on inpatient claims when the revenue code is 360-369, 490-499, or 750-759 and a Principal Procedure Code is reported.

Note: The name and primary ID should be included in the NM1 segment of loop 2310B. The REF segment is no longer required.

For more information

For more information about our Business Transformation, please visit our dedicated site at www.ibx.com/pnc/businesstransformation. On this site, you will find a communication archive and Frequently Asked Questions (FAQ) document. If you still have questions after reviewing the FAQ, email us at provider_communications@ibx.com.

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