



Tips for PayerPath 5010 Quick Reference

Information for Providers

PayerPath has been modified to accommodate changes from the old 4010 to the new 5010 electronic claim transmission format. This document provides highlights of changes and tips for using the new system.

Diagnosis Codes

Diagnosis codes and pointers are now required on all professional, institutional and transportation claims. Failure to include a diagnosis code will cause your claim to reject. The diagnosis codes in the following table are default codes for providers who do not have access to a recipient's medical records. If you have a diagnosis code that is a valid code and is more accurate for the services you are providing, continue to use that code. Otherwise, use one of the following:

Provider Type	Provider Description	ICD-9 Code*	ICD-9 Description
HC#####	Home and Community Based Agency (HCB)	78099	Other general symptoms
RL#####	Residential Supported Living Arrangements	V606	Person living in residential institution
EM#####	Environmental Modifications	V601	Inadequate housing
CMG#####	Care Coordination	78099	Other general symptoms
AC##### HM##### HO#####	Pre-Maternal Home	V222	Pregnancy state, incidental
PCG#####	Personal Care Agency	7999	Other unknown and unspecified cause
SB#####	School Based Services	78099	Other general symptoms
TR##### TX##### AC##### HM##### HO#####	Taxi Services and Hotel/Motel	V630	Residence remote from hospital or other health care facility
BR#####	Behavioral Rehabilitation	V606	Person living in residential institution
MS#####	Lifeline Waiver	78099	Other general symptoms

*Note: The ICD-9 diagnosis codes are entered without the decimal in PayerPath.



Tips for Working with Diagnosis Codes

- Use ICD-9 diagnosis codes.
- Each claim type allows you to submit up to a certain number of codes, as follows:
 - Professional Claims – 8 codes
 - Institutional Claims – 26 codes
 - Transportation Claims – 4 codes
- A pointer is required for each diagnosis code entered.
- Use a “1” in the diagnosis pointer field to indicate the primary diagnosis, a “2” for a secondary diagnosis, and so on.

Rebill Function Tips

The Rebill function simplifies claims submission by pre-populating certain fields with information that was previously submitted for a recipient.

- If you use a claim submitted prior to January 1, 2012 as the base claim, you must update fields to 5010 standards in order for the claim to be accepted.
- Examples of updates include:
 - Change *Patient Signature Source* from “B” to “P” or blank
 - Change *Primary Payer Facility ID Qualifier* from “1D” to “G2”
 - Change P.O. Box addresses to a physical location
 - Add +4 to all zip codes
 - Make sure the claim has a diagnosis code and pointer
 - Transportation claims need a *Place of Service* code
 - Institutional claims need a *Present on Admission* code



General Changes

- Billing address must be a physical street address – No P.O. boxes.
- Billing address zip code must be 9 digits (zip+4). For example: 995020769. Omit hyphens or spaces. If you don't know the 9-digit code, you can find it at: <http://zip4.usps.com>.
- Diagnosis codes and pointers are now required on all professional, institutional and transportation claims. (See section on Diagnosis Codes.)
- Some fields are larger; you can now enter more characters.

Institutional Claims

- Referring and rendering providers must be individuals.
- Although the *Value Codes/Amount* entered in Fields 39, 40 and 41 for covered days displays as a dollar amount, the claim processes correctly. For example, if 30 days is entered and it displays as \$30.00, the claim processes correctly for 30 days.
- A *Present on Admission* (POA) field indicates whether the associated diagnosis code was present when the patient was admitted to the facility. The following table lists the four valid POA codes you can use.

POA Value	Details
Y	Diagnosis present at time of inpatient admission
N	Diagnosis not present at time of inpatient admission
U	Documentation insufficient to determine if condition was present at the time of inpatient admission
W	Affirms that the hospital has determined that, based on data and clinical judgment, it is not possible to document when the onset of the condition occurred.

Professional Claims

- Referring and rendering providers must be individuals.
- New fields for facility contact phone number and for ambulance pick-up and drop-off.
- Lab service claims – you must submit the CLIA for the lab performing the service.
- Anesthesia – you must report as total number of anesthesia minutes. Procedure code 01999 is the same.

Transportation Claims

Place of Service (POS) is now a required field. Transportation and Accommodation providers must enter a place of service code on every claim. The following table lists the three transportation-related POS codes you can use.

POS Code	Description
41	Ambulance – Land
42	Ambulance – Air or Water
99	Other place of service. Transportation and accommodation providers can use this code if other ambulance codes do not apply.

Reminders about Using PayerPath

- **Red fields** indicate required information. Fields that were not previously required may be required now to meet 5010 standards
- Forms you can submit via PayerPath:
 - CMS-1500 form
 - UB-04 form
 - ADA Dental form
- Where field sizes are larger, Alaska Medical Assistance will accept and return these expanded field values. At the present time, however, we will continue to use current field sizes internally for processing claims.

Need Help or Have Questions?

View Online Help in PayerPath

Did you know PayerPath has an online help system?

To view help in PayerPath:

1. Put your cursor over the title of a section.
2. When the cursor changes to a hand, click the title. A Field Help box displays with information for the section.

Watch for Updates, New Alerts

Watch for information on this topic in the following resources:

- RA Messages
- ACS Monthly Newsletter
- PayerPath Broadcast Messages
- www.medicaidalaska.com

Contact Alaska HIPAA Support Team

Email: AKHIPAASupport@acs-inc.com

Phone: 855.226.9391 (toll-free)

907.644.6831 (local Alaska #)