

To:  
All Providers  
HMOs and Other  
Managed Care  
Programs

## Wisconsin Medicaid will split claims and claim details in certain situations

This *Wisconsin Medicaid and BadgerCare Update* explains when 837 Health Care Claim electronic transactions will be split and how these claims will be reported on the paper Remittance and Status (R/S) Report and 835 Health Care Claim Payment/Advice electronic transaction.

### **Situations when claims will be split**

With the implementation of the federal Health Insurance Portability and Accountability Act of 1996 (HIPAA), the 837 Health Care Claim electronic transaction will allow providers to submit a claim with more detail lines than Wisconsin Medicaid currently accepts. For electronic claims received on and after October 13, 2003, Wisconsin Medicaid will process up to 28 detail lines per claim. Therefore, with the exception of inpatient hospital claims, claims submitted with more than 28 detail lines will be split into multiple claims.

The current detail line limits for paper claims will not change. Paper claims received with more than the current detail line limit will be denied. Providers should refer to their service-specific publications for information on detail line limits.

### **Situations when claim details will be split**

For claims received on and after October 13, 2003, claim detail lines will be split in the following scenarios:

- **Dental** — A claim submitted with multiple tooth numbers per detail on the 837 dental electronic transaction will be split into separate details for each tooth number.
- **Range of dates** — With the exception of rental services and services provided by inpatient hospital and nursing home providers, a claim submitted with the same service for consecutive dates of service (i.e., span dates) per detail line on the 837 institutional or professional electronic transaction may have each date of service split into separate detail lines.

### **How providers will know when claims have been split**

Claims that have been split into multiple claims by Wisconsin Medicaid will be reported as multiple claims on the paper Remittance and Status (R/S) Report and the 835 Health Care Claim Payment/Advice electronic transaction. As a result, multiple claims resulting from a split may not appear on the same paper R/S Report and 835 Health Care Claim Payment/Advice electronic transaction.

The following remark codes will appear on the 835 Health Care Claim Payment/Advice electronic transaction on each of the claims resulting from a split:

- Split claims — Remark code MA15 (“Your claim has been separated to expedite handling. You will receive a separate notice for the other services reported.”) will appear in the header.
- Split details — Remark code N123 (“This is a split service and represents a portion of the units from the originally submitted service.”) will be used at the detail to indicate a split detail.

Providers are encouraged to send a unique line item control number on all service lines on the 837 electronic transaction. This number will be returned on the 835 Health Care Claim Payment/Advice electronic transaction and will allow providers to track details or service lines that are split into one or more separate details or service lines. Refer to the HIPAA 837 Implementation Guide (REF02, the “Line Item Control Number”) for more information.

There will not be an indicator to identify split claims on the paper R/S Report.

## Information regarding Medicaid HMOs

This *Wisconsin Medicaid and BadgerCare Update* contains Medicaid fee-for-service information and applies to providers of services to recipients who have fee-for-service Medicaid. Since HIPAA impacts all health care payers, it is important to know that HIPAA changes, including changes from local procedure codes to national procedure codes, will also have an impact on Medicaid HMOs. For questions related to Medicaid HMOs or managed care HIPAA-related changes, contact the appropriate managed care organization.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at [www.dhfs.state.wi.us/medicaid/](http://www.dhfs.state.wi.us/medicaid/).