



ProviderView — August 18, 2021

Avera Health Plans Shifts Transition to New Claims Platform to Oct. 1

On Aug. 6, we sent out special information in regards to the upcoming transition to HealthRules Payor®. It is important that this changeover is as smooth as possible for all parties: staff, providers, and members. To ensure a successful transition, we have decided to shift the Go-Live date to Friday, Oct. 1.

We will continue communicating any changes through ProviderView, and we ask that you please share with others in your office as needed. If you have questions about the contents of this ProviderView and our upcoming migration to HealthRules Payor®, please contact the Provider Relations team:

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Case Management Resources Available for Your Patients with Chronic and Complex Conditions

Managing a chronic disease or complex illness can sometimes feel like an overwhelming job for our members. Avera Health Plans Nurse Case Management team is available and ready to help! These programs are available at no additional cost to the member and can help improve their quality of life and reduce medical expenses.

Specially-trained nurses work closely with you and our member to ensure appropriate, timely and cost-effective medical services. We also provide information about care options to help the member make informed decisions while maximizing their benefits.

We help members with conditions such as:

- Heart disease
- Diabetes
- Cancer
- Transplant
- Trauma
- Asthma
- COPD

If you have an Avera Health Plans member who you believe could benefit from these services, or if you would simply like more information on our Nurse Case Management offerings, call us toll-free at 1-888-605-1331 and pick option 2. You can also email Caremanagement@avera.org.

Sole Proprietor Professional Claim NPI Requirements

If you operate your practice as a sole proprietor, you will only have a Type 1 (individual) NPI number. Sole proprietors filing claims to us are required to report their Type 1 NPI number both in the appropriate field of column 24J as well as in field 33A of the CMS 1500 claim form. The NPI should appear in 24J on each line for which a detailed charge has been itemized. Likewise, electronically filed claims (837P) carry the same requirements for the corresponding Loop ID and Segments.

An illustration of these fields on a CMS 1500 claim form is provided below for reference:

The image shows a CMS 1500 claim form with several fields highlighted in blue to indicate NPI requirements. In section 24, the NPI field in column 24J is highlighted for each of the six service lines. In section 33, the NPI field is highlighted. A vertical label on the right side of the form reads 'PHYSICIAN OR SUPPLIER INFORMATION'. At the bottom of the form, there are instructions: 'NUCC Instruction Manual available at: www.nucc.org', 'PLEASE PRINT OR TYPE', and 'APPROVED OMB-0938-1197 FORM 1500 (02-12)'.

While most sole proprietors are doing a good job of accurately reporting their Type 1 NPI in both of these fields, we often see claims where sole proprietors are submitting their Type 1 NPI in field 33A but are not reporting their Type 1 NPI on each claim line in the unshaded portion of 24J. With our migration to HealthRules Payor® on Oct. 1, sole proprietors that do not report their Type 1 NPI in both of these fields, whether submitting by paper or electronically, will have their claims denied or rejected.

To avoid any denials and the associated delay in payment, we encourage you to double check your paper claims output or confirm with your EDI clearinghouse vendor that your claims are being formatted accurately for this NPI reporting requirement.

For more information on sole proprietors and NPI numbers, you can view [this fact sheet from the Center of MEDICARE and MEDICAID Services](#).