Explanation of Benefit Code 1347

The Explanation of Benefit (EOB) Code 1347 (Billing Provider Number is not found or is not valid for Dates of Service) posts on a claim when the system cannot find a unique billing provider Medicaid ID to process the claim. The Remittance Advice (RA) will have the claim Internal Claim Number (ICN) listed in the Denied Claim section of the Remittance Advice (RA).

The 835 will report:

- Claim Status Code 21: Missing or invalid information
- Claim Adjustment Reason Code: 208 NPI not matched
- Remark Code: N257 Missing/incomplete/invalid billing provider/supplier primary identifier.

The system uses the following information to assign the appropriate Mississippi Medicaid ID to the claim for processing:

- NPI on provider file
- Taxonomy on provider file
- Billing 5-digit zip code
- Billing +4 added to the 5 digit zip code

Essentially, the system will seek to find a **unique** match using the 4 data elements above <u>submitted on your claim</u> to a specific provider record in our system. If a unique match is not found – the edit is set, and you will receive the error code.

In an effort to make the information on file with Medicaid readily accessible, this information can be verified by going to the <u>dom-azure-app.medicaid.ms.gov</u> Provider Lookup Tool housed on the Division of Medicaid website.

The following scenarios could be the reason for the EOB Code 1347:

- The billing provider's address (specifically the 5 digit zip code and/or the +4 of the zip code) that is being submitted on the claim is a different address than what is on file for the billing provider.
- The NPI/Taxonomy code submitted on the claim for the billing provider does not uniquely match what is on file for the billing provider.
- The NPI/Taxonomy code submitted on the claim for the billing provider has multiple provider billing records on file that have the same zip code plus 4. It is common for a provider to have multiple provider records in the system. Example:
- NPI 1234567890 Medicaid ID 001122334 Taxonomy 193200000X Zip 12345 +4 -1234
- NPI 1234567890 Medicaid ID 112233445 Taxonomy 193200000X Zip 12345 +4 -1234
- The Taxonomy code submitted for the billing provider is not the taxonomy code on file for the billing provider.

Ways that you can resolve the error:

• Make sure the address submitted for the billing provider (specifically the 5 digit zip code and/or the +4 of the zip code) matches the address on file.

- Make sure the NPI and Taxonomy code submitted on the claim for the billing provider is the same NPI and Taxonomy code that is listed on the Gainwell provider file.
- If your billing provider's NPI and Taxonomy code is on file for more than one provider record:
- NPI 1234567890 Medicaid ID 001122334 Taxonomy 193200000X Zip 12345 +4 - 1234
- NPI 1234567890 Medicaid ID 112233445 Taxonomy 193200000X Zip 12345 +4 - 1234

You may:

 Deactivate any provider ID numbers that you will not be using to create a single billing provider record:

NPI – 1234567890 Medicaid ID – 001122334 Taxonomy – 193200000X Zip – 12345 +4 - 1234

NPI – 1234567890 Medicaid ID – 112233445 Taxonomy – 193200000X Zip – 12345 +4 – 1234 (**DEACTIVATE This File**)

Send a voluntary termination letter to:

MESA Provider Portal: <u>https://medicaid.ms.gov/mesa-portal-for-providers</u>, **or** Provider Services Fax Number: (866) 644-6148 Attention: Provider Enrollment, **or** Provider Services Mailing Address: Provider Enrollment/MississippiCAN/MSCHIP PO Box 23078 Jackson, MS 39225

 Update the address on file for the multiple provider records by changing the zip plus 4 for the billing provider's address:
 NPI – 1234567890 Medicaid ID – 001122334 Taxonomy – 193200000X Zip –

NPI – 1234567890 Medicaid ID – 001122334 Taxonomy – 193200000X Zip – 12345 +4 - 1234

NPI – 1234567890 Medicaid ID – 112233445 Taxonomy – 193200000X Zip – 12345 +4 – **0000 (+4 Update)**

Send a change of address form indicating a +4 = 0000 to:

MESA Provider Portal https://medicaid.ms.gov/mesa-portal-for-providers, or Provider Services Fax Number: (866) 644-6148 Attention: Provider Enrollment, or Provider Services Mailing Address: Provider

Enrollment/MississippiCAN/MSCHIP PO Box 23078 Jackson, MS 39225

• Make sure you are billing the assigned Taxonomy code on file with your provider record in our system, for the billing provider. This Taxonomy code was assigned by Gainwell and DOM based on the information that was previously on file with the prior payer.

For Paper submission (CMS 1500): Make sure that box 33 has the FFS billing servicing address (where the services were rendered) are entered correctly with the billing NPI and corresponding taxonomy. (Please reference paper billing instructions <u>Section-4.pdf (ms.gov</u>))

See example:

Figure 57. FL 33 Required: Billing Provider Info and Phone Number

33. BILLING PROVIDER INFO & PH # (215) 555-5555

ABC Medical Group 8 North American Street Southlake, MS 34567-1234

Instructions: Enter the billing provider name (last name, first name), address (including the expanded ZIP Code+4), and telephone number currently on file with DOM as the billing provider where services were rendered.

Figure 58. FL 33a Required: Billing Provider NPI

a. 2222222222

Instructions: Enter the NPI of the billing provider.

Atypical providers are required to enter the Medicaid provider ID on field 33b.

Figure 59. FL 33b Required: Billing Provider Other ID#

^{b.} 282N0000X

Instructions: Enter the qualifier ZZ followed by the Taxonomy code if the NPI was used in FL 33a. Enter the qualifier (0B, G2, and LU) identifying the non-NPI number followed by the ID number. The non-NPI ID number of the billing provider refers to the payer assigned unique identifier of the provider.

In this example, based on the data provider on the claim – we will seek to uniquely match to a provider record using:

 NPI:
 222222222

 Taxonomy:
 282N0000X

 Zip code:
 34567

Zip +4: 1234

For Paper Submission (UB-04): Make sure that FL 1 has the FFS billing servicing address (where the services were rendered). Please reference paper billing instructions <u>Section-5.pdf</u> (ms.gov)

Figure 61. FL 1 Required: Billing Provider Name, and Address

Sunny Hospital

25 Elm St

Jackson, MS 39203-1555

Instructions: Enter the billing provider name and address (including the expanded ZIP Code+4) currently on file with DOM as follows:

- Line 1: Billing Provider Name
- Line 2: Billing Provider Street Address
- Line 3: Billing Provider City, State and Zip Code+4

Enter the correct billing NPI in FL 56:

Figure 99. FL 56 Required: NPI - Billing Provider

56 NPI 9874561230

Instructions: Enter the unique identification number assigned to the provider submitting the bill. This is a 10-digit number that will be used to identify you to your health care partners including all payers.

Enter the corresponding taxonomy in FL 81.

81CC a	B3	282N00000X	
b			
с			
d			

Instructions: Enter the "B3" Qualifier followed by the billing provider taxonomy. This is a required field to report billing provider taxonomy.

In this example, based on the data provider on the claim – we will seek to uniquely match to a provider record using:

	0
NPI:	9874561230
Taxonomy:	282N0000X
Zip code:	39203
Zip +4:	1555

For Paper Submission (Dental): Make sure that FL 48 has the correct zip, plus 4 per provider file. (Where the services were rendered). lease reference the Paper Billing Instructions <u>Section-6.pdf (ms.gov)</u>

Figure 178. FL 48 Required: Name, Address, City, State, Zip Code

48. Name, Address, City, State, Zip Code University Dentists 2500 North State Street Jackson, MS 39216-1234

Instructions: Enter the name and complete address of the billing dentist or dental entity (group, corporation, etc.)

Enter the corresponding NPI in FL 49.

Figure 179. FL 49 Required: NPI

^{49. NPI} 0123456789

Instructions: Enter the appropriate ten-digit NPI number for the billing entity. The NPI is an identifier assigned by the federal government to all providers considered to be HIPAA covered entities. An NPI is required for payment of Medicaid claims.

Figure 183.	FL 52a	Situational:	Additional	Provider ID
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52a. Additional Provider ID ZZ 193400000X

Instructions: Enter the qualifier ZZ followed by the Taxonomy code, if the NPI was used in <u>FL 49</u> (Figure 179). Enter the qualifier (0B, G2, and LU) identifying the non-NPI number followed by the ID number. The non-NPI ID number of the billing provider refers to the payer assigned unique identifier of the dental provider.

In this example, based on the data provider on the claim – we will seek to uniquely match to a provider record using:

NPI:0123456789Taxonomy:193400000XZip code:39216Zip +4:1234

For **EDI Submission** please reference the EDI Companion Guide:

https://medicaid.ms.gov/edi-technical-documents/

Loops and Segment in the Electronic Files:

Billing Provider Taxonomy Code-2000A Loop, PRV Segment Billing Provider NPI-2010AA Loop, NM108 Segment Billing Provider Address-2010AA Loop, N3 and N4 Segments