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## National Provider Identifier

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#### **UB-04 (CMS 1450) & CMS-1500 (08-05) Claim Form**

The MO HealthNet Division implemented use of the new UB-04 (CMS-1450) claim form on June 1, 2007 and the new CMS-1500 (08-05) claim form on July 23, 2007 as a requirement by the Centers for Medicare and Medicaid Services (CMS). Some old UB-92 and HCFA-1500 (12-90) claim forms are still being received by our fiscal agent, Infocrossing Healthcare Services.

The National Provider Identifier (NPI) will be required on all claims received after the close of the financial cycle on Friday, May 9, 2008. As a result, the old UB-92 and HCFA-1500 (12-90) claim forms will not be accepted after May 9, 2008 as they do not accommodate use of the NPI. This will allow Infocrossing Healthcare Services time to enter and process all of the old paper forms prior to the NPI requirement. Any old UB-92 or HCFA-1500 (12-90) claim forms received after May 9, 2008 will be returned to the provider.

If a new UB-04 (CMS-1450) or CMS-1500 (08-05) claim form is received without an NPI after the close of the financial cycle on May 9, 2008, it will be denied for an invalid provider number/identifier. Claims denied for invalid provider number/identifier will not appear on your Remittance Advice (RA) as RA's are processed and reported by valid provider numbers/identifiers. You may contact the Provider Communications Unit at (573) 751-2896 if these claims are needed to document timely filing in the future, as they can be accessed in the claims processing system using the participant's MO HealthNet ID number and date of service.

See the National Provider Identifier Bulletin, Volume 30, Number 47, dated February 29, 2008, for more information regarding the NPI requirement.

See the UB-04 (CMS-1450) Claim Form Transition Bulletin, Volume 29, Number 55, dated May 18, 2007 and the UB-04 (CMS-1450) Claim Form Bulletin, Volume 30, Number 15, dated October 10, 2007 for billing instructions for the UB-04 (CMS-1450) claim form. Billing instructions can also be found in Section 15 of your provider manual available at [www.dss.mo.gov/mhd/providers](http://www.dss.mo.gov/mhd/providers).

See the CMS-1500 (08-05) Health Insurance Claim Form Bulletin, Volume 30, Number 31, dated December 20, 2007 for billing instructions for the CMS-1500 (08-05) claim form. Billing instructions can also be found in Section 15 of your provider manual available at [www.dss.mo.gov/mhd/providers](http://www.dss.mo.gov/mhd/providers).

### **ADA 2002, 2004 Dental Claim Form**

The MO HealthNet Division implemented the use of the ADA 2002, 2004 Dental Claim Form in December 2006. For further information related to this change, refer to the archived Dental Bulletin Number 29 Volume 19, dated December 19, 2006 available on the Internet at [www.dss.mo.gov/mhd/providers](http://www.dss.mo.gov/mhd/providers).

Effective May 9, 2008, paper dental claims will only be accepted on the ADA 2002, 2004 Dental Claim Form. Any other version of the dental claim form will no longer be accepted by MO HealthNet and its fiscal agent, Infocrossing Healthcare Services. All paper dental claims submitted on or after May 9, 2008 in any version other than the ADA 2002, 2004 format will not be processed and will be returned to the provider.

**Provider Bulletins** are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

**MO HealthNet News:** Providers and other interested parties are urged to go to the MHD Web site at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

**MO HealthNet Managed Care:** The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline  
573-751-2896**