

Hot Topics

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Anthem Medicare B Replacement Claims

Numerous Skilled Nursing Facilities (SNF's) with residents that have Anthem as their Medicare B replacement policy are having problems with claims processing. SNF's have been submitting therapy charges on a UB-04 to Anthem and receiving denial notices. The denial explanation codes are as follows:

G18 – The submitted service is not allowed per your contract

256 – Service not payable per Managed Care Contract

SNF's have repeatedly called Anthem and have received various reasons as to why the claims are not being paid.

Our office reached out to Wayne Johnson at KAHCF for an Anthem contact to help with the denial issues. We contacted Anthem representative Cheryl Hattorf who then referred us to Jacqueline Pedersen. As of January 1, 2015, Anthem implemented a change in the contracts. KY SNF's can bill for therapy but are now required to bill on the CMS1500. The Anthem contracts also provide 3 separate PIN/Provider numbers that should be submitted on the CMS1500 forms. There is one PIN/provider number for Physical Therapy, Occupational Therapy and Speech Pathology. Therefore, all therapy has to be billed separately by therapy discipline along with the therapy specific PIN/provider number.

For example:

One CMS 1500 claim form has to be submitted with Physical Therapy charges. The claim must have the Physical Therapy PIN/Provider number on the claim.

One CMS 1500 claim form has to be submitted with Occupational Therapy charges. The claim must have the Occupational Therapy PIN/Provider number on the claim.

One CMS 1500 claim form has to be submitted with Speech Pathology charges. The claim must have the Speech Pathology PIN/Provider number on the claim.

If you do not know what your PIN/Provider numbers are, you can email Soni Smith at Soni.Smith@anthem.com. Soni Smith will need your facility name and Tax ID or NPI.