

# Electronic Billing Newsletter

First Coast Service Options, Inc. A/B MAC Electronic Billing Newsletter

February 2024



## New SPOT Feature: SPOT Claim Submission/ERA

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This **Electronic Billing Newsletter** is published by First Coast Service Options Inc's Electronic Data Interchange (EDI) department for the electronic billing providers, vendors, billing services, and clearinghouses. This bulletin should be shared with all health care practitioners and managerial members of the provider/supplier staff.

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The new Claim Submission/ERA feature is coming to SPOT the evening of February 7. This feature will allow offices who are enrolled to submit electronic claim files (837 transactions) free and retrieve the electronic response reports. The claim file must first be created in a different software program. First Coast provides a free option, [PC-ACE](#), or you may obtain software from any [5010 approved vendor](#). Detailed instructions for using the Claim Submission/ERA feature are in [section 7 of the SPOT User Guide](#).

The [SPOT claim submission agreement form](#) is needed once for organizations enrolled prior to January 2022 that want to gain access to the Claim Submission/ERA feature. Please read the important notes provided on the [SPOT claim submission](#) webpage carefully prior to submitting the agreement form.

If you are not familiar with SPOT, it is our free and secure online portal for providers, billing services, and clearinghouses. Access the [how to register for SPOT](#) webpage today for the link to the enrollment form and complete instructions to obtain access.

**NEW  
FEATURE**

## A FISS Logon ID Email Requirements

In accordance with the CMS security policy, each person who utilizes the Fiscal Intermediary Shared System (FISS) must enroll for their own unique Logon ID (RACF ID). RACF IDs should never be used by anyone other than the person that the ID has been assigned to and they should never be shared with anyone – including supervisors, managers, or third party billers.

All users enrolling for a RACF ID must meet the following email requirements to ensure the security of the RACF ID:

- ☒ The email address provided on your FISS Enrollment form must be your business email address.
- ☒ The email address must identify your name.  
(e.g. Jane.Doe@Hospital.org, j.doe@HospitalName.org)
- ☒ The email address must identify your company/organization.  
(e.g. Jane.Doe@HospitalName.org)
- ☒ The email address CANNOT be a SHARED emailed address.  
(e.g. BillingOfficeManagers@Hospital.org)
- ☒ The email address CANNOT belong to a supervisor/manager.  
(e.g., MySupervisorsName@Hospital.org)
- ☒ The email address CANNOT be a private email address. (Gmail, Yahoo, Verizon, AOL etc.)



The email address not meeting these requirement is one of our top return reasons for FISS access requests. If you cannot meet these email requirements, please provide a detailed explanation in the Processing Details block of the FISS enrollment form.

## A B PC-ACE Version 6.1 Upgrade

PC-ACE is a free software program that enables electronic billing for both Medicare Part A and Part B claims in a Health Insurance Portability and Accountability Act (HIPAA)-compliant format. To provide the most up-to-date information within PC-ACE, the software program is updated quarterly. The most current upgrade, which is PC-ACE version 6.1, was released **January 2, 2024**.

To streamline the distribution process for software program upgrades, the PC-ACE software program is available via internet download from the [PC-ACE release notes webpage](#). **Please take time to upgrade now.** The Centers for Medicare & Medicaid Services (CMS) requires you to use the most current version of the software program and to eliminate the use of prior versions within 90 days of receipt of this notification. Therefore, please install this software as soon as possible, but **no later than March 1st**, which is the required upgrade compliance date.

**IMPORTANT:** An installation password is required to install or upgrade the PC-ACE software. This password was provided in your EDI PC-ACE approval letter. If you do not have this letter, please contact the EDI Help Desk. The password is needed for each quarterly upgrade or new installation; therefore, please keep it in a safe place where it is readily available.

## A Top Ten Electronic Billing Errors – Part A

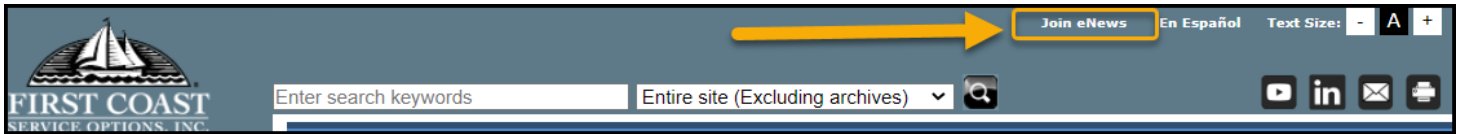
Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A8:562:128:85	This Claim is rejected for a relational field in error within the Billing Provider's National Provider Identifier (NPI) and Billing Provider's Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A3:121	This Claim is rejected for the Service line number greater than maximum allowable for payer.	Verify the number of Service lines does not exceed 449.
A8:496:85	Claim Rejected for relational field in error. Submitter not approved for electronic claim submissions on behalf of the Billing Provider.	Verify the provider's NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing submitters will result in claim rejections.
A8:306	This Claim is rejected for a relational field in error for Service(s) Rendered.	Not Otherwise Classified (NOC) procedure codes require a detailed description of the service. NOC drug codes require the name and dosage of the drug. Enter the description in the 2400 SV101-7.
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A7:480	Claim rejected for invalid information in the Other Carrier Claim filing indicator.	The Claim Filing Indicator for the other insurance cannot be MA.
A7:500:77	This Claim is rejected for Invalid Information within the Service Location's Postal/Zip Code.	Verify that that facility zip code is the correct full 9 digit zip code.
A7:455	This Claim is rejected for Invalid Information within the Revenue code for services rendered.	Verify that you are using valid revenue codes.
A7:521	This Claim is rejected for invalid information in the Adjustment Reason Code.	Verify that you are using valid group/reason code combinations.

## B Top Ten Electronic Billing Errors – Part B

Edit Claim Status Category and Claim Status Codes	Business Edit Message	How to Avoid/Correct
A8:496:85	This Claim is rejected for relational field due to Billing Provider's submitter not approved for electronic claim submissions on behalf of this Billing Provider.	Verify the providers NPI is registered with the Submitter ID prior to submitting claims. When sending EDI Enrollment forms to change submitters, list any existing submitters in the Maintain Existing Submitter/Receiver ID Setup block that still have claims to submit on your behalf. Failure to maintain existing will result in claim rejections.
A8:746:40	Rejected due to duplicate ST/SE submission.	Verify the file was not already sent prior to submitting.
A7:164:IL	This Claim is rejected for Invalid Information for a Subscriber's contract/member number.	Verify the Subscriber's Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:562:82	This Claim is rejected for Invalid Information for a Rendering Provider's National Provider Identifier (NPI).	Verify the rendering NPI is correct and a member of the group NPI.
A8:562:128:85	This Claim is rejected for relational field in the Billing Provider's NPI (National Provider ID) and Tax ID.	Only submit the Tax ID that is registered with the billing NPI.
A7:562:85	This Claim is rejected for Invalid Information in the Billing Provider's NPI (National Provider ID).	Verify the Billing provider's NPI is correct prior to submitting claims.
A7:164:IL	This Claim is rejected for containing Invalid Information within the Subscriber's contract/member number per the claim effective date.	Verify the Medicare Beneficiary ID (MBI) is entered correctly on the claim.
A7:535	This Claim is rejected for Invalid Information within the Claim Frequency Code.	Verify that Loop 2300 CLM05-3 is a '1'. Medicare only accepts original claims.
A7:453	This Claim is rejected for relational field Information within the Procedure Code Modifier(s) for Service(s) Rendered.	Verify the procedure modifier is valid.

## Subscribe to our Email Lists

Do you want to be the first to be notified about changes related to Electronic Data Interchange (EDI), SPOT announcements, and the EDI Newsletter? Join our email lists for the latest Medicare broadcasts from FCSO, delivered directly to your email inbox.



Signing up is simple:

1. Navigate to [medicare.fcso.com](http://medicare.fcso.com).
2. Click the "Join eNews" link in the upper right.
3. Enter your email and NPI.
4. Select all appropriate mailing lists. We encourage all EDI billers to subscribe to the Electronic Data Interchange list.
5. Click Submit.

You can manage your subscription from any email you receive through this mailing list. Simply click on the "**Manage your Subscription**" link at the bottom of the message.

## Information Needed When Calling EDI

To ensure the privacy of our customer's protected information, we must verify certain criteria with every telephone call. When you call EDI Services or the SPOT Help Desk, please be sure to have your Provider Transaction Access Number (PTAN), National Provider Identifier (NPI), and the last five digits of the organization's Tax ID. Having all this information readily available will allow for us to assist with your inquiry more quickly and efficiently.

## Contact Us

We are available at the times and numbers shown below. Please contact us with any questions related to information in this newsletter.

### **JN EDI Help Desk**

1-888-670-0940  
Monday-Friday, 8 a.m. – 5 p.m. ET/CT

### **SPOT Help Desk**

1-855-416-4199  
Monday-Friday, 8 a.m. – 5 p.m. ET/CT



### **Website Contact Information**

[FCSO EDI Contact information](#)  
[SPOT: Contact information](#)  
[medicare.fcso.com](http://medicare.fcso.com)

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***Thank you for reading our newsletter!***

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