

Michigan Department of Community Health

Bulletin Number: MSA 05-48
Distribution: All Providers
Issued: October 1, 2005
Subject: Remittance Advice Changes
Effective: November 1, 2005

Programs Affected: Medicaid, Children's Special Health Care Services, Adult Benefits Waiver, MOMS, Children's Waiver

The purpose of this bulletin is to alert providers that effective November 1, 2005, the Michigan Department of Community Health (MDCH) will discontinue distribution of the proprietary electronic Remittance Advice (1232) and issue the HIPAA-compliant 835 Health Care Claim Payment/Advice in its place.

In addition, although providers will continue to receive a paper Remittance Advice, it will contain the same HIPAA-compliant national standard claim adjustment group codes, claim adjustment reason codes, remark codes, and adjustment reason codes as the 835 Health Care Claim Payment/Advice. MDCH proprietary explanation codes will no longer be reported.

Additional information regarding the 835 Health Care Claim Payment/Advice and the paper Remittance Advice may be found in the Billing and Reimbursement Chapters of the Medicaid Provider Manual.

Manual Maintenance

This bulletin may be discarded after review.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and a phone number so you may be contacted if necessary. Providers may phone toll free 1-800-292-2550.

Approved



Paul Reinhart, Director
Medical Services Administration