

EDI billing reminder – submit appropriate information for Coordination of Benefits

When billing Electronic Data Interchange (EDI) 837 coordination of benefit services to Keystone First or Keystone First Community HealthChoices as a secondary payor for a Member/Participant that has traditional Medicare or a Medicare Advantage plan (including Keystone First VIP Choice), please remember to indicate the appropriate primary insurer. Claims submitted indicating the primary payor incorrectly as a commercial carrier rather than Medicare may be delayed or processed incorrectly.

Correct EDI submission:

The claims filing indicator (located in Loop 2320, segment SBR09) identifies whether the primary payer is Medicare or another commercial payer. When the member has a Medicare Advantage plan, the claim should be billed to the secondary payer with a Medicare Part A or B indicator, **not as commercial insurance**. Please ensure you are using the appropriate indicator on EDI claims as follows:

- **MA** -the primary payer is Medicare Part A (use for both traditional Medicare and Medicare Advantage)
- **MB** -the primary payer is Medicare Part B (use for both traditional Medicare and Medicare Advantage)
- **CI** -the primary payer is commercial insurance (non-Medicare/non Medicare Advantage)

If you have any questions about this notice, please contact Provider Services at 1-800-521-6007.

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