## PROVIDER BULLETIN PROVIDER INFORMATION



July 1, 2022

## Notice of Admission (NOA) Claims Required for Home Care Claims Effective January 1, 2022

Revision: Blue Cross is revising Provider Bulletin P79-21, published on 12/1/2021, to provide clarification regarding Medicare lines of business (LOB) that are impacted by changes made from the Centers for Medicare and Medicaid Services (CMS) and home care claims. This update identifies more specific billing instructions in relation to the notice of admission claims involved in these services, and better aligns with Medicare guidance.

In order to align with new requirements published by the Centers for Medicare & Medicaid Services (CMS) for home health agencies, Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) will be requiring a Notice of Admission (NOA) claim with type of bill 32A effective with episodes of care for dates of service January 1, 2022, and after.

Blue Cross is requiring a NOA claim be submitted for all Medicare-eligible Home Care services rendered to Medicare members. CMS only requires 1 NOA for any series of Home Health Periods of Care beginning with admission to home care and ending with discharge. Once you report a discharge to Medicare, you must send a new NOA before you submit any additional claims.

Blue Cross will not require the correct HIPPS code to be submitted on the NOA claim. Final episode of care claim submission must include the correct HIPPS code in order to reimburse correctly.

Blue Cross will not immediately apply a penalty or reduction in reimbursement for non-timely NOA claim submissions, however, penalties may be enforced in the future. Blue Cross will provide a follow-up publication notifying providers when penalties will be enforced.

## **Products Impacted**

This change applies to members enrolled with Medicare Advantage and Minnesota Senior Health Options (MSHO) coverage.

## Questions?

If you have questions for a member enrolled in a Medicare Advantage product, please contact provider services at **(651) 662-5200** or **1-800-262-0820**. If you have questions for a member enrolled in MSHO, please contact provider services at **1-866-518-8448**.

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