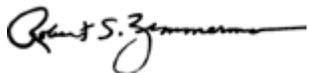


	<b>MEDICAL ASSISTANCE BULLETIN</b> <b>COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE</b>	
	<b>SUBJECT</b>  Announcement of Revised Millennium Ready Medical Assistance Claims Forms	<b>BY</b>    <b>Robert S. Zimmerman, Jr., M.P.H.</b> Deputy Secretary for Medical Assistance Programs
<b>NUMBER:</b>	99-98-02	
<b>ISSUE DATE:</b>	March 16, 1998	
<b>EFFECTIVE DATE:</b>	Fall 1998	

**PURPOSE:**

To announce the Department is revising its Medical Assistance (MA) claim forms (invoices and claim adjustments) in preparation for the upcoming millennium.

**SCOPE:**

This bulletin applies to all providers enrolled in the MA Program who currently use the following MA claim forms:

- Dental Services Invoice & Claim Adjustment (MA300D Series)
- Drug Invoice & Claim Adjustment (MA302 Series)
- Long Term Care Invoice (MA309C)
- Physician's Invoice or Medical Services/Supplies Invoice (MA319 Series)

**BACKGROUND:**

As we approach the year 2000, it is imperative that all MA claim forms be millennium-ready. Therefore, we are revising our MA invoices/claim adjustments to accommodate a 4-digit year. In addition to the millennium changes, we are making other revisions to our claim forms, which will be detailed in a separate bulletin that will be sent to you in April, and should be shared with the appropriate computer programmers and billing personnel for your business entity. The revised invoices/claim adjustments will have a revision date of 10/98 located in the bottom right hand corner of each claim form.

**DISCUSSION:**

Effective Fall 1998, our systems will be millennium compliant. Therefore, we want our provider community to receive the necessary claim forms, and the instructions for completing them, in sufficient time for their programming and training needs. We are planning an initial distribution of the revised forms. The quantity and type of claim forms that we send will be determined by your ordering history and will represent a three (3) month supply based on that history. If you have not recently placed an order for MA Invoices, you will NOT receive an initial supply. However, you will have an opportunity to receive the new claim forms prior to the implementation by completing a "Special Order Form" which will be attached to a future bulletin.

**NOTE:**

1. The title of the MA319 Series (Physician's Invoice or Medical Services/Supplies Invoice and Claim Adjustment) is now titled "Medical Services Invoice" and "Medical Services Claim Adjustment."
2. Dispensing physicians will receive the "Drug Invoice" (MA302) and "Drug Claim Adjustment" (MA302A) in addition to the MA319, if they have ordered them in the past.

The initial distribution will begin in April 1998. You will receive your supply at the business location you designated at the time of your enrollment. If you have not received any millennium-compliant claim forms by the time you receive the bulletin

addressing the revisions and billing instructions, please complete and submit the "Special Order Form" attached to that bulletin. Special orders will be distributed prior to October 1998.

**PROCEDURE:**

- A. The revised 10/98 claim forms will not be processed prior to September 18, 1998. Therefore, you must be sure that you have a sufficient supply of current claim adjustments on hand for your billing requirements until that date. (The current claim forms can be identified by a revision date of 7/95 located in the lower right hand corner.) You should survey your stock at this time and, if necessary, place an order for the 7/95 claim forms using the Provider Order Form (MA300X). The 7/95 claim forms will only be available for requisitioning until September 1, 1998. Any MA300X order received after that date will be filled with the 10/98 invoices/claim adjustments.
  
- B. Upon receiving your initial supply of revised claim forms, please:
  - 1. Verify that you have received the correct invoices for your provider type.
  
  - 2. Use whatever amount you deem necessary for your programming needs.
  
- C. For those providers who submit claims via Electronic Media Claims (EMC), specifications will be sent to you by EDS, under separate cover. In the event you wish to convert to EMC billing, please contact EDS at (717) 975-6045 for more information.

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

The appropriate toll-free inquiry line for your provider type.

Visit the Office of Medical Assistance Programs website at [www.dpw.state.pa.us/omap](http://www.dpw.state.pa.us/omap).