

MEDICAID PROVIDER BULLETIN
May 2017

Federally qualified health center claims encounters

Anthem Blue Cross and Blue Shield Medicaid would like to inform all federally qualified health centers that only one date of service per claim is allowed to be submitted on the *CMS-1500* form to support accurate wrap payments. A front-end claim edit will take effect May 25, 2017, to deny all claims billed with multiple dates of service.

Any claim submitted after May 25, 2017, with multiple dates of service will be denied and must be resubmitted with only one date of service per claim.

If you have questions about this communication, please contact the Provider Services department at **1-855-661-2028**.

The information in this bulletin may be an update or change to your provider manual. Find the most current manual at:

<https://mediproviders.anthem.com/ky>

Anthem Blue Cross and Blue Shield Medicaid is the trade name of Anthem Kentucky Managed Care Plan, Inc., independent licensee of the Blue Cross and Blue Shield Association. ANTHEM is a registered trademark of Anthem Insurance Companies, Inc. The Blue Cross and Blue Shield names and symbols are registered marks of the Blue Cross and Blue Shield Association.

AKYPEC-1216-17 May 2017