Anthem BlueCross

Encounter Data Submission of HIPPS Codes

CMS has issued a new mandate requiring the inclusion of HIPPS coding on all Medicare Advantage home health care and skilled nursing claims. For dates of service on or after July 1, 2014, CMS has notified all Medicare Advantage payers to reject claims submitted for services billed that do not include HIPPS coding on each claim. This is in accordance with Chapter 25 of the Medicare Claims Processing Manual guidelines found at www.cms.gov. To ensure timely processing please include this information on every claim submitted.