# Medicare Administrative Contractor (MAC) Resources

BILLING GUIDES, FEE SCHEDULES, PROVIDER RESOURCES

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Medicare Administrative Contractors or, MACs, are Medicare contractors that develop Local Coverage Determinations, or LCDs and Articles along with the processing of Medicare claims.

Local Coverage Articles are a type of educational document published by the Medicare Administrative Contractors (MACs). Articles often contain coding or other guidelines that complement a Local Coverage Determination (LCD).

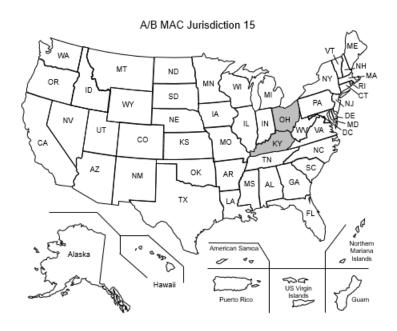
# Medicare Administrative Contractors (MAC) By State

State	Jurisdiction	Part B MAC
Alabama	JJ	Palmetto GBA, LLC
Alaska	JF	Noridian Healthcare Solutions, LLC
Arizona	JF	Noridian Healthcare Solutions, LLC
Arkansas	JH	Novitas Solutions, Inc
California	JE	Noridian Healthcare Solutions, LLC
Colorado	JH	Novitas Solutions, Inc
Connecticut	JK	National Government Services, Inc
Delaware	JL	Novitas Solutions, Inc
Florida	JN	First Coast Service Options, Inc
Georgia	JJ	Palmetto GBA, LLC
Hawaii	JE	Noridian Healthcare Solutions, LLC
Idaho	JF	Noridian Healthcare Solutions, LLC
Illinois	J6	National Government Services, Inc
Indiana	J8	WPS Government Health Administrators
lowa	J5	WPS Government Health Administrators
Kansas	J5	WPS Government Health Administrators
Kentucky	J15	CGS Administrators, LLC
Louisiana	JH	Novitas Solutions, Inc
Maine	JK	National Government Services, Inc
Maryland	JL	Novitas Solutions, Inc
Massachusetts	JK	National Government Services, Inc
Michigan	J8	WPS Government Health Administrators
Minnesota	J6	National Government Services, Inc
Mississippi	JH	Novitas Solutions, Inc
Missouri	J5	WPS Government Health Administrators
Montana	JF	Noridian Healthcare Solutions, LLC
Nebraska	J5	WPS Government Health Administrators
Nevada	JE	Noridian Healthcare Solutions, LLC
New Hampshire	JK	National Government Services, Inc
New Jersey	JL	Novitas Solutions, Inc
New Mexico	JH	Novitas Solutions, Inc
New York	JK	National Government Services, Inc
North Carolina	JM	Palmetto GBA, LLC
North Dakota	JF	Noridian Healthcare Solutions, LLC
Ohio	J15	CGS Administrators, LLC
Oklahoma	JH	Novitas Solutions, Inc
Oregon	JF	Noridian Healthcare Solutions, LLC
Pennsylvania	JL	Novitas Solutions, Inc
Rhode Island	JK	National Government Services, Inc
South Carolina	JM	Palmetto GBA, LLC
South Dakota	JF	Noridian Healthcare Solutions, LLC
Tennessee	JJ	Palmetto GBA, LLC

Texas	JH	Novitas Solutions, Inc
Utah	JF	Noridian Healthcare Solutions, LLC
Vermont	JK	National Government Services, Inc
Virginia	JM	Palmetto GBA, LLC
Washington	JF	Noridian Healthcare Solutions, LLC
West Virginia	JM	Palmetto GBA, LLC
Wisconsin	J6	National Government Services, Inc
Wyoming	JF	Noridian Healthcare Solutions, LLC
District of Columbia	JL	Novitas Solutions, Inc
American Samoa, Guam,	JE	Noridian Healthcare Solutions, LLC
Northern Mariana Islands		
Puerto Rico, US Virgin Islands	JN	First Coast Service Options, Inc

# **CGS** Administrators

# Jurisdiction 15 or J15, processes FFS Part B claims for Kentucky and Ohio.



## **CGS** Administrators Resources

# <u>Prior Authorization of Repetitive Scheduled Non-Emergent Ambulance Transport</u> (RSNAT)

Repetitive ambulance services are defined as ambulance transportation that is medically necessary which is furnished 3 or more round trips in a ten-day period or at least one round trip per week for at least 3 weeks. The RSNAT prior authorization model applies to the following HCPC codes:

- A0426 Advanced Life Support (ALS) Level 1 non-emergency transport
- A0428 Basic Life Support (BLS) non-emergency transport

#### Targeted Probe and Educate (TPE)

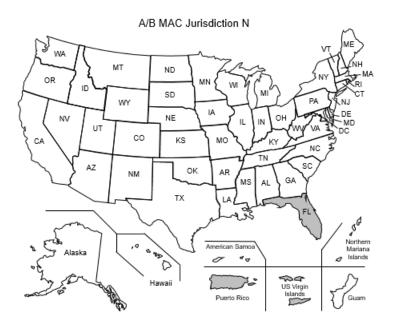
The Centers for Medicare & Medicaid Services (CMS) is resuming the Targeted Probe & Educate (TPE) process, effective September 1, 2021. Based on data analysis of claims payment, CGS will identify areas with the greatest risk of inappropriate program payment. You may reference the <a href="Medical Review Activity Log">Medical Review Activity Log</a> for a list of review topics. Previous post-payment service-specific reviews will be phased out.

#### **Self-Service Options**

CGS' online tools and calculators are informational and educational tools only, designed to assist suppliers and providers in submitting claims correctly. Appeals, claims, EDI, Medical Review, Provider, Enrollment.

# First Coast Service Options

Jurisdiction N or JN, processes FFS Part B claims for Florida, Puerto Rico, and U.S. Virgin Islands.



# First Coast Service Options Resources

#### **Appeals**

First-Level Appeal Status, When and How to Appeal, Appeal Forms, FAQs, Overpayments, and Resources.

#### Billing

Claim Submission, Medical Review Records, Prior Authorization Requests, Medical Policy, Provider Enrollment.

#### Checklist: Ambulance Services Documentation

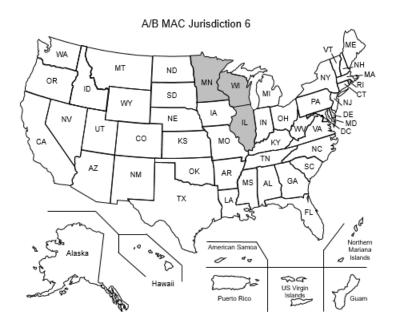
This checklist is intended to provide healthcare providers with a reference for use when responding to additional documentation requests for emergency ambulance transports. Healthcare providers retain the responsibility to submit complete and accurate documentation. Providers should refer to the CMS official website for additional information regarding ambulance transports and Medicare coverage <a href="here">here</a>.

#### Coding

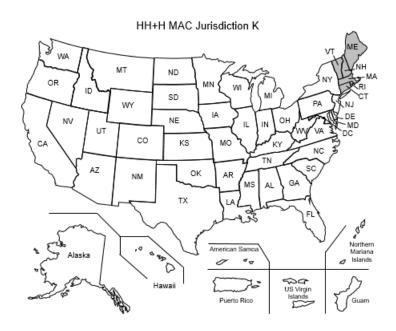
ICD-10, Modifiers, Place of Service, Procedure Codes.

# National Government Services

Jurisdiction 6 or J6, processes FFS Part B claims for Illinois, Minnesota, and Wisconsin.



Jurisdiction K or JK, processes FFS Part B claims for Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont.



## National Government Services Resource

#### Claims and Appeals

Learn about claims, top errors, fees, MBI, and appeals.

#### Enrollment

Getting started, after you enroll, and revalidating your enrollment.

#### Fee Schedule Lookup

Code pricing search, payment systems, limits, and fee schedule lookup.

#### Medical Policies/LCDs

Find LCDs and related billing and coding articles.

#### Medicare Compliance

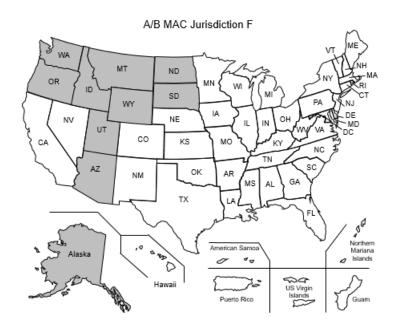
Medical Review, Prior Authorization, Fraud & Abuse, CERT, and more.

#### **Overpayments**

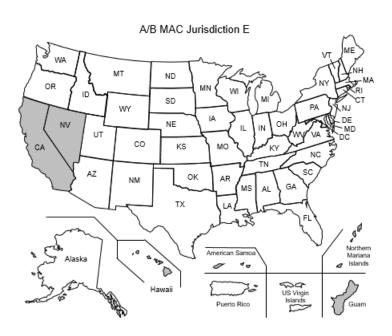
Repayment schedules and post-pay adjustment.

## Noridian Healthcare Solutions

Jurisdiction F or JF, processes FFS Part B claims for Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah, Washington, and Wyoming.



Jurisdiction E or JE, processes FFS Part B claims for American Samoa, California, Guam, Hawaii, Nevada, and Northern Mariana Islands.



## Noridian Healthcare Solutions Resources

#### **Active LCDs**

All LCDS are the same for each state within a Jurisdiction and are accessible from here.

#### **Appeals**

Reopening, Redetermination, Reconsideration, Administrative Law Judge (ALJ) Hearing, Medicare Appeals Council Review, Federal Court Review.

#### Claims

Claim Submission, ICD-10 Diagnosis, Place of Service, Denial Code Resolution.

#### Fee Schedules

A fee schedule is a complete listing of fees used by Medicare to pay doctors or other providers/suppliers. This comprehensive listing of fee maximums is used to reimburse a physician and/or other providers on a fee-for-service basis. Providers may access the most current fee schedules from the link.

#### Noridian Medicare Portal

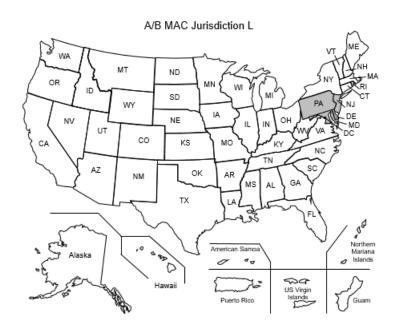
Register for access to eligibility, claims, appeals, and more.

#### Noridian Training and Events

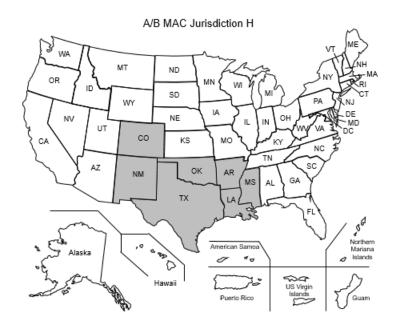
Outreach and Education, Webinar on Demand Recordings.

# **Novitas Solutions**

Jurisdiction L or JL, processes FFS Part B claims for Delaware, District of Columbia including Arlington and Fairfax counties in Virginia and the city of Alexandria, Virginia, Maryland, New Jersey, and Pennsylvania.



Jurisdiction H or JH, processes FFS Part B claims for Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, and Texas.



## Novitas Solutions Resources

#### Claims Center

Claim Status, Issues, Denials, Rejections, & Claim Submission Errors

#### Claim Submission

Learn how to submit claims to here. Additional tips on completing claim forms, timely reporting, and mandatory claim submission.

#### Coding & Billing

We offer general billing requirements relating to CPT, HCPCS, Modifiers, National Correct Coding Initiative (NCCI), Medically Unlikely Edits (MUE), and various other resources. Unless included in an LCD, billing and coding article, NCD or other CMS instruction, it is up to you to submit the claim with the appropriate HCPCS/CPT code(s) and diagnosis codes(s) as supported by your medical documentation.

#### Medical Review

Learn more about the Medical Review process including Data Analysis, Record Development, Medical Record Review, Education and Progressive Corrective Action.

#### **Modifiers**

Modifiers indicate that a service or procedure performed has been altered by some specific circumstance, but not changed in its definition or code. They are used to add information or change the description of service to improve accuracy or specificity. Modifiers can be alphabetic, numeric or a combination of both, but will always be two digits.

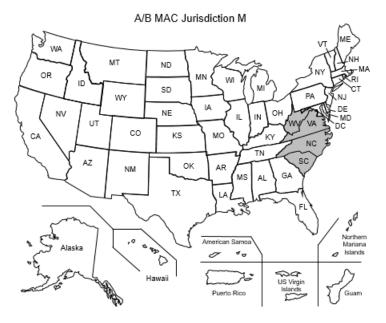
#### Novitasphere

Novitasphere is a free, secure internet portal for providers, billing services, and clearinghouses.

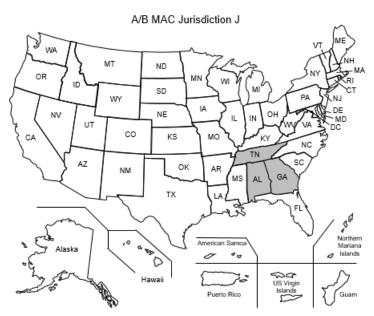
# Palmetto GBA, LLC

Jurisdiction M or JM, processes FFS Part B claims for North Carolina, South Carolina, Virginia, and West Virginia.

Note: For Part B services, MAC Jurisdiction M **excludes the counties of Arlington and Fairfax in Virginia along with the city of Alexandria in Virginia** (serviced by another MAC jurisdiction, Jurisdiction L).



Jurisdiction J or JJ, processes FFS Medicare Part B claims for Alabama, Georgia, and Tennessee.



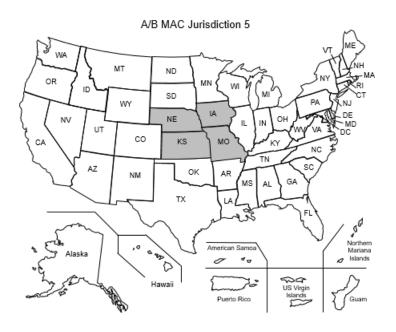
# Palmetto GBA, LLC Resources

#### Palmetto GBA Jurisdiction J and M Ambulance Resources

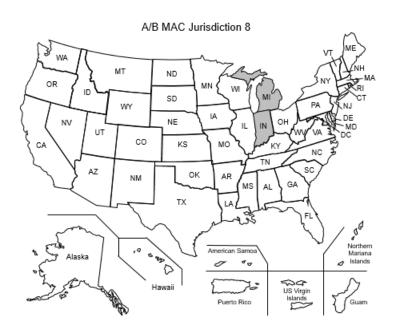
Access these helpful resources for more information about ambulance services including Physician Certification Statements (PCS) Requirements, Documentation Tips for Ambulance Providers, Ambulance Fee Schedule and Medicare Transports, Ambulance Coverage for Nonemergency Transports, Air Ambulance Information, Beneficiary Signature Requirements, Mutual Aid Situations, Enrollment Requirements, etc.

# WPS Government Health Administrators

Jurisdiction 5, or J5 processes FFS Medicare Part B claims for Iowa, Kansas, Missouri, and Nebraska.



Jurisdiction 8, or J8 processes FFS Medicare Part B claims for Indiana and Michigan.



## WPS Government Health Administrators Resources

#### **Ambulance Documentation Requirements**

Guides and Resources for Ambulance Documentation, Medical Necessity for Ambulance Services, Ambulance Mileage, Prior Authorization, Physician Certification Statements, etc.

#### Ambulance Statutory and Billing Requirements

Information regarding Distance and Point of Drop-off and Point of Pickup Requirements, Modifiers, Patient Signature Requirements, Mileage, Procedure Codes, etc.

#### Claims Guides and Resources

Featured Guides and Resources related to Claims including Advance Beneficiary Notice of Non-Coverage (ABN), Electronic Data Interchange (EDI), Qualified Medicare Beneficiary (QMB) Program.

# <u>Prior Authorization for Repetitive, Scheduled Non-Emergent Ambulance Transport</u> (RSNAT)

The PA program is applicable to Part B ambulance suppliers that bill Medicare Part B and render RSNAT services. The PA program applies to the following Healthcare Common Procedure Coding System (HCPCS) codes: A0426 – ambulance service, advanced life support, non-emergency transport, level 1 and A0428 – ambulance service, basic life support (BLS), non-emergency transport.

#### Self-Service Guides and Resources

Featured Guides and Resources related to Self-Service such as Claim Corrections, Claim Denials, Claim Submissions, Documentation Submissions, Redetermination, and Training.