



**Steven L. Beshear**  
Governor

**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

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**Audrey Tayse Haynes**  
Secretary

**Lawrence Kissner**  
Commissioner

Dear Kentucky Medicaid Provider,

The National Uniform Claim Committee (NUCC) has approved a transition timeline for the version 02/12 1500 Health Insurance Claim Form (1500 Claim Form). In June, the NUCC announced the approval of the updated 1500 Claim Form that accommodates reporting needs for ICD-10 and aligns with requirements in the Accredited Standards Committee X12 (ASC X12) Health Care Claim: Professional (837P) Version 5010 Technical Report Type 3.

The NUCC approved the following transition timeline:

- January 6, 2014: Payers begin receiving and processing paper claims submitted on the revised 1500 Claim Form (version 02/12).
- January 6 through March 31, 2014: Dual use period during which payers may receive and process paper claims submitted on the revised 1500 Claim Form (version 02/12) or the old 1500 Claim Form (version 08/05).
- April 1, 2014: Payers receive and process paper claims submitted only on the revised 1500 Claim Form (version 02/12).

The Department for Medicaid Services will be making the changes listed below to accommodate the CMS 1500 02/12.

- The member's Medicaid ID will be changing from Field 9A to Field 1A
- The member's private commercial insurance will move from Field 11 to Fields 9 – 9D.
  - 9 other insured- policy holders name
  - 9A other insured ID number
  - 9D other insurance plan name
- The Physician Assistant NPI will move from Field 10D to Field 19
- Field 21- Diagnosis Code field changed the label from numeric to alpha. Also, the period was removed from the field. There is an ICD indicator in the top right of the box to indicate if the code is ICD 9 or ICD 10 CM. The acceptable codes are:

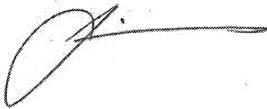
- 9 for ICD 9; or
- 0 for ICD 10
- Field 24E – Diagnosis Code Indicator will no longer be numeric. It will be alpha character A-L.
- Field 30 – amount due is now obsolete

It is very important that you reach out to your software vendor and clearinghouses to ensure they are ready to accommodate the changes listed above. Claims received on and after April 1, 2014, on the old version, will be returned to the provider.

The billing instructions are in process of being updated. Please visit our website at [www.kymmis.com](http://www.kymmis.com) for further updates.

If you should have any questions regarding the claim form changes, please contact the Provider Inquiry Helpdesk at 1-800-807-1232.

Sincerely,

A handwritten signature in black ink, appearing to read 'Lawrence Kissner', with a long horizontal flourish extending to the right.

Lawrence Kissner  
Commissioner