### Claims Billing Aid

#### Electronic Claim Submissions:
Payer ID: 68069 (Medical)
Clearinghouse Vendors: Emdeon, Gateway EDI, Availity, SDS and SSI.

#### Paper Claim Submissions:
New Hampshire Healthy Families
P.O. Box 4060
Farmington, MO 63640-3831

*Timely filing limit for an electronic or paper (first time) claim is 90 calendar days from the date of service.*

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#### Modifiers Requirements:

**Therapy:**
- All PT, OT, and/or ST services must be billed with the following modifiers in the 1st position:
  - GN – Speech Therapy
  - GO – Occupational Therapy
  - GP – Physical Therapy

**Hearing Aids:**
- All hearing aids must be billed with LT or RT

**Appropriate Use of Modifier 25:**
- Modifier should be used when a significant and separately identifiable E&M service is performed by the same physician on the same day of another procedure (e.g., 99381 and 99211-25)

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**Anesthesia**
- Total minutes must be billed in the appropriate loop/segment of the 837P / box 24G of the CMS1500 paper claim and must be submitted with the accurate ASA CPT/modifier combination.
- Anesthesiologists must bill one of the following ASA modifiers: AA, QK, QY, AD
- CRNAs must bill one of the following ASA modifiers: QZ, QX
- Qualifying circumstances are billed in addition to ASA with a count of 1.

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**POA Indicators:**
- Present on Admission (POA) Indicator is required on all inpatient facility claims.

**EPSDT:**
- All EPSDT service must be billed with the EP modifier in the 1st position.
- Indicator E for EPSDT screening
- Indicator F if service is Family Planning related
- Indicator B if both

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**NDC:**
- The 11 digit National Drug Code (NDC) must be reported on all qualifying claim forms when injectable drugs are administered in the office or outpatient setting, excludes applicable vaccinations/immunizations related to health check services.

**Vaccinations obtained free from DHHS:**
- Providers must bill appropriate immunization codes with SL modifier along with the administration code w/out a modifier.

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**CLIA:**
- In order for providers to perform tests that require complex procedures, a CLIA certification is required to be billed.
- Report the CLIA certification or waiver number in: X12N 837 (HIPAA version) loop 2400, REF02. REF01 = X4 Box 23 of the CMS1500

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**Notice:**
- NH Healthy Families will not accept hand written claims forms and will only allow forms printed in the Flint OCR Red, or exact ink match.