

New York State UB04 Billing Guidelines

SCHOOL SUPPORTIVE HEALTH SERVICES PROGRAM (SSHSP)/PRESCHOOL SUPPORTIVE HEALTH SERVICES PROGRAM (PSHSP)



eMedNY is the name of the electronic New York State Medicaid system. The eMedNY system allows New York Medicaid providers to submit claims and receive payments for Medicaid-covered services provided to eligible members.

eMedNY offers several innovative technical and architectural features, facilitating the adjudication and payment of claims and providing extensive support and convenience for its users.

The information contained within this document was created in concert by DOH and eMedNY. More information about eMedNY can be found at <u>www.emedny.org</u>.

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For eMedNY Billing Guideline questions, please contact the eMedNY Call Center 1-800-343-9000.

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1. Purpose Statement

The purpose of this document is to augment the General Billing Guidelines for institutional claims with the NYS Medicaid specific requirements and expectations for SSHSP/PSHSP services.

For providers new to NYS Medicaid, it is required to read the General Institutional Billing Guidelines available at www.emedny.org or by clicking: <u>General Institutional Billing Guidelines</u>.

2. Claims Submission

SSHSP/PSHSP providers submit their claims to NYS Medicaid in electronic format only.

2.1 Electronic Claims

SSHSP/PSHSP providers must submit their Medicaid claims electronically using the HIPAA 837 Institutional (837I) transaction.

2.2 Paper Claims

SSHSP/PSHSP are not permitted to submit paper claims.

2.3 SSHSP/PSHSP Services Billing Instructions

SSHSP/PSHSP services are processed as Clinic claims. See the Clinic Billing Guidelines for applicable instructions.

3. Remittance Advice

The Remittance Advice is an electronic, PDF or paper statement issued by eMedNY that contains the status of claim transactions processed by eMedNY during a specific reporting period. Statements contain the following information:

- A listing of all claims (identified by several items of information submitted on the claim) that have entered the computerized processing system during the corresponding cycle
- The status of each claim (denied, paid or pended) after processing
- The eMedNY edits (errors) that resulted in a claim denied or pended
- Subtotals and grand totals of claims and dollar amounts
- Other pertinent financial information such as recoupment, negative balances, etc.

The General Remittance Advice Guidelines contains information on selecting a remittance advice format, remittance sort options, and descriptions of the paper Remittance Advice layout. This document is available at www.emedny.org by clicking: General Remittance Billing Guidelines.

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