

## CODING TIP September 2013

## **Important News: 1500 Claim Form Revision**

The National Uniform Claim Committee (NUCC) has approved a transition timeline for the version 02/12 1500 Health Insurance Claim Form (also known as CMS-1500).

In June, the NUCC announced the approval of the updated paper 1500 Claim Form that accommodates reporting needs for ICD-10. The new 1500 form also aligns with the requirements of format 837P, which is the standard format used by health care professionals to transmit claims electronically. The NUCC approved the following transition timeline on August 1, 2013. This timeline aligns with Medicare's 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 continue to receive and process paper claims submitted on 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).

In addition to accommodating the reporting needs of ICD-10, the updated form will also allow reporting of up to 12 diagnosis codes. On the current 1500 form, up to 4 diagnosis codes may be reported.

Physicians submitting paper claims should be in touch with their software vendors about timelines for updating practice management systems for the new form. Additional information, including instructions for use of the 1500 claim form may be found on the NUCC web site: http://www.nucc.org/