

news brief

Business information and news from Premera Blue Cross

September 21, 2006

New Claims Editing System

Premera Blue Cross is committed to providing you with the best possible customer service to support efficiency and claims payment accuracy. With this in mind, we will implement a new claims editing software system, which will incorporate new changes in technology and provide you with timely, accurate, predictable and consistent claims payments.

Effective for claims processed no earlier than December 4, 2006, Premera will implement Ingenix Claims Edit System (iCES). iCES is a state-of-the-art claims editing system that evaluates billing information and coding accuracy on submitted claims using an automated process. The software compares each claim with thousands of government and industry rules and regulations, as well as our payment policies to achieve accurate, consistent processing of physician and provider payments.

iCES edits are created and supported via industry standards that include Centers for Medicare and Medicaid Services (CMS), Medicare Correct Coding Initiative (CCI), Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), and specialty society directives or publications.

Going forward, Premera intends to update iCES on a quarterly basis in January, April, July and October of each year to ensure continued efficiency and transactional ease for you. We also anticipate offering a What-If-Tool (WIT) via our Provider Portal in the first quarter of 2007. Although the WIT will not provide eligibility, benefit or reimbursement information, it will allow access to the coding rationale regarding claims payments.

For claims related questions, please call the member's Customer Service department at the number on the back of the member's ID card. Please contact the Provider Relations team at 1-877-342-5258, option 4, if you have questions about this News Brief.

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