



Provider Notice

January 10, 2024

New EDI Edits and Billing Clarification for FQHC Claims Effective 01/05/24

Failure to Adhere Could Result in Claim Rejections

FQHC claims billed on a CMS 1500/837P, received 01/05/2024 and later, must be billed with the appropriate taxonomies.

For 837P submissions, if the first service line is CPT code T1015, T1040, or S5190, the billing taxonomy (loop 2000A, segment PRV, element 03) must be 261QF0400X or 261QR1300X. Additionally, if the billing taxonomy (loop 2000A, segment PRV, element 03) is 261QF0400X or 261QR1300X then the rendering taxonomy (loop 2310B) must **not** equal 261QF0400X or 261QR1300X.

For CMS 1500 paper claims, if the first service line is CPT code T1015, T1040, or S5190 the billing taxonomy (box 33b) must be 261QF0400X or 261QR1300X. Additionally, if the billing taxonomy (box 33b) is 261QF0400X or 261QR1300X then the rendering taxonomy (Box 24J) must **not** equal 261QF0400X or 261QR1300X.

Please note, failure to submit the appropriate taxonomies on your claim will result in a claim rejection.

CONTACT US

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact CountyCare Provider Services at CountyCareProviderServices@cookcountyhhs.org or your Provider Relations Representative.