



A CMS Medicare Administrative Contractor

<http://www.NGSMedicare.com>

WELCOME TO NATIONAL GOVERNMENT SERVICES

About National Government Services: Your Jurisdiction K Medicare Administrative Contractor

The Centers for Medicare & Medicaid Services (CMS) has consolidated the contracts for Jurisdiction 13 (Connecticut and New York) and Jurisdiction 14 (Maine, Massachusetts, New Hampshire, Rhode Island and Vermont) into one Medicare Administrative Contractor (MAC) known as Jurisdiction K (JK).

CMS has awarded the JK A/B MAC contract to National Government Services. National Government Services will administer the Part A and Part B Medicare fee-for-service claims in the states of Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont. The contractor will also be responsible for processing Medicare home health and hospice (HH&H) billings in the states of Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

NHIC, Corp. is the outgoing Jurisdiction 14 (J14) MAC for the Maine, Massachusetts, New Hampshire, Rhode Island and Vermont workloads. It also is the outgoing MAC for the HH+H workload in those states and the state of Connecticut. National Government Services will assume responsibility for the JK A/B MAC workload in three phases.

This article contains important information regarding the upcoming implementation, including: the implementation schedule, possible dark day, training opportunities, NGSConnex enrollment, local coverage determinations (LCDs), JK phone and fax numbers, JK mailing addresses, electronic funds transfer (EFT), electronic data interchange (EDI) Early Boarding and EDI contractor number changes.

National Government Services is one of the largest Medicare contractors in the country, serving over 208,000 providers and suppliers and 24 million people with Medicare in 18 states and five U.S. territories. National Government Services (with its corporate predecessors) has served as a Medicare contractor since 1966.

The National Government Services team is committed to continuing our service of excellence to Medicare providers and beneficiaries. We look forward to working with you to successfully implement the JK MAC.

National Government Services JK Web Site and E-mail Subscription Program

National Government Services is pleased to announce that the Jurisdiction K Transition Information Web site is available. Visit this Web site for all JK transition-related news and updates. We have a dedicated Web site to keep providers informed of all important information, updates, and activities

pertaining to the JK transition. We encourage providers to check the JK transition Web site often as the information becomes available and is updated.

The following link will bring you to the Jurisdiction K Transition Information Web Site <http://www.NGSMedicare.com/wps/portal/ngsmedicare/jktransition>. We encourage providers to subscribe to our E-mail Updates to receive current information about the transition. You can register for the National Government Services **E-mail Updates** program to receive important information about the JK MAC transition and upcoming training opportunities. Register today on the National Government Services Web site by doing the following:

- Go to the <http://www.NGSMedicare.com> **start page**
- Select your **line of business** as applicable
- Accept the **site attestation**
- Select **Publications > E-mail Updates** from the left navigation
- Select **Subscribe**
- Enter your **e-mail account information**
- Create your **profile**
- Select the desired **E-mail Update categories (be sure to include 'JK Transition')** and select **Submit**

Once registration is complete you will be notified by e-mail to confirm your account information.

The National Government Services Medicare Web site is designed to provide our beneficiaries and providers with information that is most relevant to them. The Web site will provide you with information about:

- Current news and relevant changes
- Enrollment in Medicare
- Coverage issues
- Claims
- Review/appeals process
- Provider education & support
- Resources for contacting Medicare
- The JK transition

Implementation Schedule

National Government Services will assume responsibility for JK Part A, Part B, and HH&H workload in three segments based on workload and geographic location.

Below are the transition cutover dates for each workload.

CURRENT MAC	STATE AND WORKLOAD	CUTOVER DATE *
National Government Services (J13) Part A and Part B – Phase 1	Connecticut (except HH&H) and New York	06/01/2013 (Completed)
NHIC, Corp. (J14) Part A – Phase 2	Connecticut (HH&H only), Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	10/18/2013

CURRENT MAC	STATE AND WORKLOAD	CUTOVER DATE *
NHIC, Corp. (J14) Part B – Phase 3	Maine, Massachusetts, New Hampshire, Rhode Island, Vermont	10/25/2013

It is important to note that NHIC, Corp. will transfer all pending and in-process operations to the National Government Services JK MAC on the cutover date listed above. Regardless of the date of service, the National Government Services JK MAC will handle all claims processing, provider enrollment agreements, customer service, and payments on these cutover dates.

Transitioning to the National Government Services JK MAC

Our goal is to assure our provider and beneficiary communities that this will be a seamless transition with as few disruptions as possible. The National Government Services Team is committed to providing the Medicare community we serve with the highest level of service. We have developed a detailed plan to assume the workload from the outgoing Medicare contractor as well as a detailed communications plan to keep you informed.

The goal of our communications plan is to provide our Medicare community with concise information describing the changes you can expect and the key dates. We have established and maintained partnerships with key medical and professional associations, hospital and facility organizations, providers and provider groups who are providing the National Government Services Team with valuable feedback and assisting us with determining the most effective educational needs of the Medicare community as it relates to the transition.

The cutover dates established by CMS will approach rapidly. We will ensure that you have the detailed information you need regarding all aspects of transition including claims processing, appeals, EDI, EFT, provider customer care (PCC), provider enrollment, and interactive voice response (IVR), LCDs and ongoing provider outreach and education.

Possible System Dark Day for Part B Providers as a Result of the JK A/B MAC Transition

On October 25, 2013, the Medicare Part B workload will be transition from NHIC, Corp. Medicare to the new National Government Services JK A/B MAC. In order to transition these workloads successfully, it may become necessary to impose a one-day system dark day. On dark days, Medicare online systems will not be available for either internal or external use. System dark days impact the availability of claims processing and payments, EDI transactions, the Provider Contact Center (PCC), and the IVR system. For the Medicare Part B workload cutover, CMS has approved Monday, October 28, 2013 as a dark day, **if necessary**, to verify all workloads have been transferred and the systems are working properly.

National Government Services JK systems will not be available on Saturday, October 26, 2013 and Sunday, October 27, 2013. We anticipate that the systems will be available on Monday, October 28, 2013 at 8:00 a.m. Eastern Time (ET). However, in the event there is a delay in the system availability on Monday, October 28, 2013, we will notify the provider community via our E-mail Updates and our JK

transition Web site of the need to institute this dark day **no later than 7:00 a.m. ET on Monday, October 28, 2013.**

Educational Opportunities- Provider Outreach & Education

As your new MAC, our Provider Outreach & Education (POE) staff offers a robust training program to assist you in your day-to-day workings with the Medicare Program.

Each course is conducted in an interactive Webinar and requires prior registration. During each live training session, you will be able to view our presentation and materials and participate in the question and answer portion.

Visit our Web site for registration details at <http://www.NGS Medicare.com> and select the Part B Medicare contract. On the Provider Specific Portal Home Page select the Training Events Calendar option under the Education and Training category (on the left hand side). Select the link for the session you wish to attend under Event Details and click on the link under Registration Information to register. Your registration is complete only when you receive a confirmation at your e-mail address immediately after submitting your registration. All times listed are in Eastern Time (ET).

Jurisdiction K Transition Teleconferences

The National Government Services POE department is conducting a series of Webinars to keep you informed about the JK transition and to answer your questions. We recommend you plan on attending at least one of the sessions.

Each two-hour session will provide you with information you need to be aware of during your transition from your current Medicare contractor to National Government Services.

These Webinars are an opportunity for sharing information about the transition and allows us to respond to your questions, listen to your concerns, and receive your feedback. This is your opportunity to speak directly to your incoming MAC on issues related to the JK transition. National Government Services will have a panel of subject matter experts available representing a wide variety of functions to answer your questions.

Topics include:

- National Government Services – Who we are
- Transitioning lines of business and dates
- Local coverage determinations
- Electronic funds transfer
- EDI changes
- IVR & provider contact center
- Addresses & Web sites
- NGSConnex
- PC-ACE Pro32 free software

Conference Details

Please register for the appropriate line of business Webinar on our Web site at <http://www.NGSMedicare.com> under the Training Events Calendar. You must preregister for the session and ask that you dial into the conference at least ten (10) minutes before the start time.

LINE OF BUSINESS	WEBINAR DATES
Part B	Friday, October 4, 2013 Tuesday, October 8, 2013 Thursday, October 10, 2013 Wednesday, October 16, 2013 Friday, October 18, 2013 Tuesday, October 22, 2013 Thursday, October 24, 2013 Monday, October 28, 2013 Thursday, October 31, 2013 Thursday, November 7, 2013

National Government Services Connex

NGSConnex is a free Web application developed by National Government Services just for you! NGSConnex allows you to access a wide array of self-service functions that save you time and money, such as:

- Obtain beneficiary eligibility information
- Query for your claims status
- Initiate and check the status of redeterminations and reopening requests
- View your provider/supplier demographic information
- Query for your financial data
- Submit audit and reimbursement cost reports, letters, and supporting work papers (Part A providers only)
- Coming soon: claim submission capability

A Quick Steps Job Aid, available on the home page of <http://www.NGSConnex.com>, provides an overview of the NGSConnex application.

Please Note: Part B providers in Maine, Massachusetts, New Hampshire, Rhode Island and Vermont can sign up for NGSConnex as of September 23, 2013 and will be able to access the system after the transition to National Government Services takes place on October 25, 2013.

Snapshot of Changes

National Government Services has been working with the outgoing Medicare contractor NHIC, Corp. to identify differences between our business and that of the outgoing contractor.

To date, we have identified the following areas of impact to the providers in the J14 states. Additional information will follow in this newsletter and future information will be posted to our Web site at <http://www.NGSMedicare.com/wps/portal/ngsmedicare/jktransition>. As additional provider impacts are identified, we will post them to the Web site.

- LCDs standardized throughout the jurisdiction
- New P.O. box numbers for use with JK MAC
- New IVR Telephone Numbers for use with JK MAC
- New Provider Contact Center telephone numbers for use with JK MAC
- New business telephone numbers for use with JK MAC
- Fax on Demand Option, available through IVR
- Telephone reopening unit (TRU) telephone numbers and process, available for Part B providers
- National Government Services Connex (Web-based portal application)
- New contractor IDs
- New EDI Connectivity Front end (M2)
- New EDI submitter and logon IDs
- New EDI P.O. box numbers/fax numbers for use with JK MAC
- PC-ACE Pro32 claims submission software

What is Not Changing

- **National Provider Identifier (NPI) and Provider Transaction Access Numbers (PTANs)** will transfer from NHIC, Corp.
- **EDI Logon/Submitter ID** - National Government Services will obtain the existing EDI Logon/Submitter ID information from NHIC Corp.
- **EFT** will transfer to National Government Services
- **Administrative Simplification Compliance Act (ASCA) Waivers** for small providers to bill on paper will transfer to National Government Services

National Government Services Phone and Fax Numbers

Medicare Part B Provider Contact Center

STATE	INTERACTIVE VOICE RESPONSE SYSTEM NUMBER	TOLL-FREE NUMBER	FAX-ON-DEMAND	WRITTEN GENERAL INQUIRIES
Jurisdiction K: Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont	877-869-6504	866-837-0241 TTY: 866-786-7155	866-709-1905	National Government Services, Inc. P.O. Box 6189 Indianapolis, IN 46206-6189

Hours Available

Monday-Friday: 8:00 a.m.–5:00 p.m. ET

Training Closure Time: Thursdays, 2:00–4:00 p.m. ET

Provider Customer Care Representative Assistance

The National Government Services PCC representatives are available to assist you with a wide-range of Medicare coverage and billing-related inquiries.

Please review the following information for a better understanding of the types of inquiries the PCC representatives are available to assist you with.

- **Customer care representatives are available to:**
 - clarify why a claim processed the way it did;
 - assist with general Medicare information/billing questions;
 - provide guidance on how to use the IVR system and the National Government Services Web site; and
 - assist with complex issues that cannot be addressed through the IVR system.
- **Customer care representatives are not able to:**
 - provide claim status, beneficiary eligibility, or any other information that is available through the IVR system;
 - provide information on what modifiers, diagnosis codes, current procedural terminology (CPT) codes or Healthcare Common Procedure Coding System (HCPCS) to use for specific claims or beneficiaries;
 - preauthorize any type of service or supply; and
 - answer inquiries from beneficiaries or their representatives.

Interactive Voice Response System

Hours Available*

Monday–Friday: 6:00 a.m.–7:00 p.m. ET

Saturday: 7:00 a.m.–3:00 p.m. ET

*IVR system hours represent general availability for access to all menu options. The [IVR system](#) is available 24-hours a day, seven days a week. Menu options that require system access (e.g., the Common Working File [CWF]) are limited to that system’s availability.

Fax on Demand

With Fax-on-Demand you have the ability to order common National Government Services and CMS forms and/or documents by phone to be faxed to a number requested by you. Using Fax-on-Demand is simple and efficient!

1. **Call 866-709-1905**; you will be asked to input the fax number you would like the form and/or document faxed.
2. When prompted enter the [Catalog ID#](#) from the list of available forms and documents.
3. After you enter the [Catalog ID#](#) hang up and wait for the form or document to come through your fax line.

Provider Enrollment Inquiries

Toll-Free Provider Enrollment Telephone Number

The Customer Care Department now offers a direct toll-free telephone number for provider enrollment inquiries. Please use the following toll-free telephone number to speak with someone regarding provider enrollment.

- **Jurisdiction K: 888-379-3807**

Telephone Reopenings

Providers may request a reopening of the original claims processing decision by contacting the [Telephone Reopening Unit \(TRU\)](#).

The TRU can be used when you wish to revise the initial determination or redetermination of a specific service or claim for minor clerical errors. If you have a general question or need to talk to someone about an issue that cannot be reopened, please contact our [PCC](#).

TRU representatives will reopen claims to correct minor, uncomplicated, provider or carrier clerical errors or omissions. However, TRU representatives cannot add items or services that were not previously billed.

Please Note: Reopenings are granted at the contractor's discretion; a claim may not be appealed if the contractor decides not to reopen the claim.

With the availability of the electronic remittance advice you can know the outcome prior to the complete finalization of a claim. Please ensure the claim has finalized prior to calling the TRU line to request changes to the claim.

Note: Unsolicited faxes will not be processed and will be returned to the sender.

Contacting the Telephone Reopening Unit

[TRU](#) representatives are available Monday, Tuesday, Wednesday and Friday, 8:00 a.m.–4:00 p.m. ET. On Thursdays, the TRU will open at 8:00 a.m. and close at 3:30 p.m. ET for training.

- **Telephone Reopening Contact Number:** 888-812-8905

Written Correspondence and Inquiries

Download and input your inquiry directly onto the [Medicare Correspondence Request Form](#). Once completed, print and send to the appropriate address as indicated on the form. Please mail all written inquiries to:

- **Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island and Vermont Inquiries**
National Government Services, Inc.
P.O. Box 6189
Indianapolis, IN 46206-6189
- **Freedom of Information Act Inquiries**
National Government Services, Inc.
P.O. Box 6131
Indianapolis, IN 46206-6131
Fax: 317-841-4518

National Government Services Mailing Addresses

In our efforts to provide better service to our providers, National Government Services has established new mailing addresses and P.O. boxes to serve the provider community.

Below is a listing of our most common mailing addresses. A detailed listing of all National Government Services addresses and P.O. boxes will be published to the [National Government Services](#) Web site within two weeks of your segment cover date (see Implementation Schedule).

BUSINESS FUNCTION	MAILING ADDRESS
Administration Simplification Compliance Act Waiver Request Forms	National Government Services, Inc. Attn: ASCA P.O. Box 7022 Indianapolis, IN 46207-7022
Appeals (redeterminations and written reopenings)	National Government Services, Inc. P.O. Box 7111 Indianapolis, IN 46207-7111
Claims (CMS-1500 claim forms)	National Government Services, Inc. P.O. Box 6178 Indianapolis, IN 46206-6178
Electronic Data Interchange Customer Support (electronic billing forms and inquiries)	National Government Services, Inc. P.O. Box 7111 Indianapolis, IN 46207-7111
Provider Enrollment (CMS-855 forms or new electronic funds transfer [EFT] [CMS-588])	National Government Services, Inc. P.O. Box 7149 Indianapolis, IN 46206-7149
Provider Written General Inquiries	National Government Services, Inc. P.O. Box 6189 Indianapolis, IN 46206-6189

We encourage you to send business mail via the United States Postal Service (USPS). The USPS delivers to specific P.O. boxes allowing for faster receipt, timely processing, and enhanced service to you.

Local Coverage Determinations

An LCD is a decision made by a MAC whether to cover a particular service on a MAC-wide basis in accordance with Section 1862(a)(1)(A) of the Social Security Act (i.e., a determination as to whether the service is reasonable and necessary). LCDs were established by Section 522 of the Benefits Improvement and Protection Act (BIPA). More information is available on the CMS Web site regarding the [Medicare Coverage Determination Process](#).

LCDs and the JK Transition

- The final list of LCDs effective for JK is available. These LCDs are effective for Part A providers in Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont on October 18, 2013. They will be effective for Part B providers in Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont on October 25, 2013.
- For all Connecticut and New York providers, the LCDs were in effect on June 1, 2013, with the exception of L34186 (Reduction Mammoplasty) and L34187 (Scanning Computerized Ophthalmic Diagnostic Imaging [SCODI]), which will be effective October 18, 2013.
- To access a complete list of LCDs by contractor or state, visit the CMS [Medicare Coverage Database](#) Web site.

JK LCD Roster

National Government Services has determined the roster of LCDs that will apply to all Part A and Part B providers within JK. This roster was developed under the combined experience of Medicare contractor medical directors, who reviewed each active policy in Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island and Vermont. Policies chosen for the final roster met a set of criteria, including identified Comprehensive Error Rate Testing (CERT) errors (especially repetitive errors), high volume/high dollar/pervasive problems, patient safety issues and other parameters.

L26003	Biologic Products for Wound Treatment and Surgical Interventions
L26841	Botulinum Toxins
L26890	Breast Imaging Mammography/Breast Echography (Sonography)/Breast MRI/Ductography
L26375	B-type Natriuretic Peptide (BNP) Testing
L26880	Cardiac Catheterization and Coronary Angiography
L25907	Cardiac Computed Tomography (CCT) and Coronary Computed Tomography Angiography (CCTA)
L25447	Cardiac Output Measurement Thoracic Electrical Bioimpedance
L26859	Cardiovascular Nuclear Medicine
L26853	Cataract Extraction
L25275	Category III CPT® Codes
L27350	Chiropractic Services
L32965	Circulating Tumor Cell (CTC) Assay
L26404	Colonoscopy/Sigmoidoscopy/Proctosigmoidoscopy
L32589	Combined Ovarian Cancer Biomarker Tests
L25233	Computed Tomographic (CT) Colonography
L28142	Corneal Pachymetry
L27373	Debridement Services
L25820	Drugs and Biologicals, Coverage of, for Label and Off-Label Uses
L32963	EEG – 24 Hour Monitoring
L25211	Erythropoiesis Stimulating Agents (ESA)
L32977	Galectin-3
L32454	Implantable Miniature Telescope (IMT)
L28490	Incision and Drainage (I & D) of Abscess of Skin, Subcutaneous and Accessory Structures
L25367	Magnetic Resonance Angiography (MRA)
L26869	Nerve Conduction Studies (NCS)/Electromyography (EMG)
L32456	Noncovered Services
L27355	Non-Invasive Vascular Studies
L28178	Nonvascular Extremity Ultrasound
L26441	Ophthalmic Biometry for Intraocular Lens Power Calculation
L25466	Ophthalmology: Posterior Segment Imaging (Extended Ophthalmoscopy and Fundus Photography)
L32945	Osteopathic Manipulative Treatment
L26884	Outpatient Physical and Occupational Therapy Services
L28529	Pain Management
L28497	Panretinal (Scatter) Laser Photocoagulation
L28395	Percutaneous Coronary Intervention

L31391	Posterior Tibial Nerve Stimulation for Voiding Dysfunction
L25507	Psychiatric Inpatient Hospitalization
L26398	Psychiatric Partial Hospitalization Programs
L26895	Psychiatry and Psychology Services
L28145	Qualitative Drug Screening
L28463	RAST Type Tests
L34186	Reduction Mammoplasty
L27362	Removal of Benign Skin Lesions
L26426	Routine Foot Care and Debridement of Nails
L34187	Scanning Computerized Ophthalmic Diagnostic Imaging (SCODI)
L27404	Speech-Language Pathology
L26863	Stretta Procedure
L32038	Transcranial Magnetic Stimulation
L27381	Transesophageal Echocardiography (TEE)
L26876	Transrectal Ultrasound
L27360	Transthoracic Echocardiography (TTE)
L26851	Urodynamics
L25519	Varicose Veins of the Lower Extremity, Treatment of
L26439	Vertebroplasty and Vertebral Augmentation (Percutaneous)
L26367	Visual Fields Testing
L29510	Vitamin D Assay Testing

Please Note: New LCD and minor change for Connecticut and New York providers:

- Reduction Mammoplasty (L34186)
- SCODI (L34187)
 - Provisions for anterior segment imaging

Provider Enrollment

Providers are not required to complete a new CMS-855 enrollment form as part of the JK MAC transition. CMS maintains provider enrollment information in the National Provider Enrollment Chain Ownership System (PECOS). National Government Services can access provider enrollment data on file at the cutover to the JK MAC.

If you need to make changes to your provider file prior to cutover, you should submit the CMS 855 form(s) to NHIC, Corp. or hold your CMS-855 forms until the cutover to the JK MAC.

Upon cutover to the JK MAC, NHIC, Corp. will transition all pending CMS-855 forms to National Government Services for continuation of processing. National Government Services has worked with CMS to develop a plan to address any backlog after cutover, and we are committed to processing those pending CMS-855 enrollment forms as quickly as possible. We advise you not to submit a second application to National Government Services if one is pending with NHIC, Corp. National Government Services **will not** have access to the information regarding applications currently pending with NHIC, Corp. until after the cutover date.

Do I need a new Provider ID (PTAN/NPI)?

National Government Services will not be issuing a new PTAN for Part B providers as a result of the JK MAC transition. You will continue to use your existing PTAN/NPI as you do today. In addition, your current NPI will continue to be valid for claim submissions to us upon transition.

Electronic Funds Transfer - No Action Needed

National Government Services has received confirmation from CMS that a new Form CMS-588 (5/10) Electronic Funds Transfer (EFT) Authorization Agreements will not be required to be submitted during the transition from NHIC, Corp. to National Government Services. Providers who were currently not set up to receive electronic payments should have already received a previous revalidation request and should have made the switch to electronic payments. If you have not done this revalidation and are currently receiving paper checks, we encourage you to submit an updated CMS-588 (5/10) form to begin receiving your Medicare payments electronically.

Once transitioned to National Government Services, as part of the normal enrollment or revalidation process, we will continue to review your file and confirm that you are set up with electronic payments and that you are using the most recent version of the new CMS-588 (5/10) form.

Electronic Data Interchange

Vital Information for Submitting EDI Claims to National Government Services, JK A/B MAC for Part B Providers in Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont

In an effort to assist all NHIC, Corp. Part B submitters during the transition, National Government Service and NHIC, Corp. have developed an early boarding process for all electronic submitters. Please review the details in this notice so that you can start early and avoid the potential for any delays after the cutover date of October 25, 2013, when all pending and in-process operations will be transferred to National Government Services.

Overview

The National Government Services Enterprise Gateway (Gateway) provides an electronic interface between Medicare Enterprise Data Centers, National Government Services and the Part B provider community, which consists of thousands of physicians, laboratories, ambulance suppliers, etc., and other trading partners.

Early boarding is a term that refers to the process allowing submitters to establish connectivity to and submit claims through the National Government Services EDI Gateway and receive remittances through the National Government Service EDI mailbox prior to cutover to the JK MAC on October 25, 2013. During the early boarding period, NHIC, Corp. will continue to process claims. JK trading partners will need to submit claims and claim status inquiry files through the National Government Services EDI Gateway with the current contractor numbers. These files will be delivered to the NHIC, Corp. region for processing. Acknowledgement files (999 and 277 CA) will be downloaded from the National Government Service EDI Gateway mailboxes. The 835 Electronic Remittance Advice and the 277 Claim Status Inquiry Response files will be delivered to both the National Government Service EDI

mailboxes and the NHIC, Corp. mailboxes. Early boarding will allow current electronic claim submitters to familiarize themselves with the new system. National Government Services encourages submitters to take advantage of this opportunity and avoid the last minute rush and unnecessary delay in payments. **We recommend early boarding to all electronic submitters.**

New Telecommunications Requirements for the National Government Services EDI Gateway

All connectivity to the National Government Services EDI Gateway **must be obtained via a Network Service Vendor (NSV)**. NSV profiles are available on the National Government Services JK Web site. Based on CMS regulations, National Government Services requires connectivity to the National Government Services EDI Gateway for exchange of EDI data through select NSVs. These vendors offer services and benefits that include:

- Connections for submission and receipt of Health Insurance Portability and Accountability Act (HIPAA) transactions
- Access to the Fiscal Intermediary Standard System (FISS)/Direct Data Entry (DDE) Provider Online System (for Medicare Part A providers) and the Professional Provider Telecommunication Network (PPTN) (for Medicare Part B providers)
- Access to the CMS HIPAA Eligibility Transaction System (HETS) application for eligibility inquiry and response.

Vendors who have connectivity to the National Government Services EDI Gateway are listed from the link below; to receive additional information on the services provided by these NSVs and pricing structures, please use the contact information provided.

To access NSV options:

- Go to <http://www.NGSMedicare.com/wps/portal/ngsmedicare/jktransition>
- Under "Transition Information A-Z" select "Electronic Data Interchange Information"
- Select: Network Service Vendor (NSV) Profile
- When prompted, select to either open or save the file to view the list of approved NSVs

NHIC, Corp. previously communicated the need for electronic submitters to migrate to an NSV. For additional information, please refer to the following link:

- [Announcing the NHIC MAC J14 Initiative to Discontinue Modem Connections By August 15, 2013](#)

Note: You must have connectivity in place with one of the approved NSVs to participate in the early boarding initiative. If you are already using one of these NSVs for batch file transfer, or eligibility, you may simply contact them to request access to the National Government Service EDI Gateway.

For a complete list of technical details for the early boarding process:

- Go to <http://www.NGSMedicare.com/wps/portal/ngsmedicare/jktransition>
- Under "Transition Information A-Z" select "[Medicare Part B EDI Early Boarding Technical Requirements for Jurisdiction K Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont](#)"

J14/JK Part B Electronic Trading Partners Contractor Number Changes - Cutover Impact

The J14 Part B workloads for Maine Massachusetts, New Hampshire, Rhode Island and Vermont will transition from the J14 MAC to the JK MAC after 5:00 p.m. ET on Friday, October 25, 2013.

Upon transition to National Government Services A/B MAC, it will be necessary for you to change the contractor number in your electronic files to reflect the new JK MAC.

There will be minimal changes to the 837 claim and 276 claim status inquiry files to accommodate the new Medicare contractor number assigned to the JK workloads.

Below is the listing of new contractor numbers, along with the transition date:

JK SEGMENT	JK MAC CONTRACTOR #	DATE OF TRANSITION TO NATIONAL GOVERNMENT SERVICES A/B MAC
Part B		
Maine	14112	10/25/2013 as of 5:00 p.m. ET
Massachusetts	14212	
New Hampshire	14312	
Vermont	14512	
Rhode Island	14412	

Once transition begins, it will be necessary to remove the legacy contractor number and replace it with the appropriate National Government Services contractor number, in any data elements in the 837 or 276 files. **Therefore, files transmitted after 5:00 p.m. on Friday, October 25, 2013 must have the new contractor number.**

Failure to submit the correct contractor number after transition will result in the batch file being rejected.

CONTRACTOR NUMBER	ISA08 RECEIVER ID	ISA08 RECEIVER ID
Refer to above table for the applicable contract number	GS03 Application Receiver ID	GS03 Application Receiver ID
Refer to above table for the applicable contract number	NM109 (1000B Loop) Receiver Primary Identifier	NM109 (2100A Loop) Payer Identifier
Refer to above table for the applicable contract number	NM109 (2010BB Loop) Receiver Primary Identifier	NM109 (2010BB Loop) Receiver Primary Identifier

With the implementation of the acknowledgement transactions 999 and 277 claims acknowledgment (CA) to standardize the reporting of inbound transactions (i.e., 837 claim, 276 claim status inquiry), there will be minimal impact to implementation of the HIPAA transaction with the transition to National Government Services.

In addition to the acknowledgement transactions, National Government Services EDI supplies an additional report – the TRN Report, which is generated when there are significant structural issues

with an 837 or 276 file preventing translation. A sample of this report can be found on the National Government Services Web site. To access:

- Go to the <http://www.NGSMedicare.com> **start page**
- Select your **line of business** as applicable
- Accept the **site attestation**
- Select **Claims > Electronic Submissions (EDI)** from the left navigation
- Select **Version 5010**
- Select **How to Read Acknowledgements – 999 and 277CA Reports** under **Technical Information and Guides**

If you have any questions, please contact the National Government Services EDI Help Desk at 888-379-9132.

EDI System Outages for Transition Activities

A series of planned system outages impacting all contracts has been planned from 5:00-9:00 p.m. ET for the dates listed below. With each outage, EDI Trading Partners for all contracts will be unable to access the EDI Gateway for batch file transfer activities including claim submissions.

We will need to disable the legacy contractor numbers and implement the MAC contractor numbers following the 5:00 p.m. ET cut off on the last business day before cutover. The schedule for each outage is as follows:

EDI OUTAGE
Friday, October 18, 2013 (Segment 2: Part A)
Friday, October 25, 2013 (Segment 3: Part B)

Cessation of Electronic Data Interchange Enrollment Requests for NHIC, Corp. Part A, Part B and HH&H Providers

NHIC, Corp. will stop accepting EDI enrollment requests Monday, September 30, 2013. Processing of EDI enrollment requests received by NHIC, Corp. prior to Monday, September 30, 2013 will continue through Friday, October 4, 2013.

Beginning Tuesday, October 1, 2013, EDI enrollment requests should be submitted to National Government Services via the online EDI Enrollment forms located on the National Government Services Web site under **Claims > Electronic Submissions (EDI) > Enrollment Information > Enrollment Forms**. EDI enrollment requests received for Part A by National Government Services between Tuesday, October 1, 2013 and the cutover date of Friday, October 18, 2013, will be held until National Government Services can process the requests as the JK MAC following workload transition on October 21, 2013. EDI enrollment requests received for Part B by National Government Services between Tuesday, October 1, 2013 and the cutover date of Friday, October 25, 2013, will be held until National Government Services can process the requests as the JK MAC following workload transition on October 28, 2013.

EDI Help Desk

Beginning Monday, October 21, 2013 for Part A and Monday, October 28, 2013 for Part B, all EDI questions should be directed to the National Government Services EDI Help Desk at 888-379-9132 or by submitting the EDI Online Inquiry Form found on the National Government Services Web site.

- **To access the EDI E-mail Inquiry Form**
 - Go to <http://www.NGSMedicare.com> start page
 - Select your line of business as applicable
 - Accept the site attestation
 - Select Claims > Electronic Submissions (EDI) from the left navigation; and then select the EDI E-mail Inquiry Form under Contact Information

Elimination of Stratford as Free Contractor-Supplied Software for Part B

NHIC, Corp. like all MACs, provides free Medicare-only billing software. The NHIC, Corp. version of the software is known as "Stratford." After October 25, 2013, NHIC, Corp. **will not provide technical support for the Stratford software product.**

National Government Services utilizes PC-ACE Pro 32 software as the free contractor-supplied claims submission software. Current NHIC, Corp. providers who use the NHIC, Corp. free software program, Stratford, **will need to migrate to the PC-ACE Pro 32 software prior to the transition to National Government Services on October 25, 2013**, or chose one of the following options:

1. Contract with Stratford directly for their full support for transition to the National Government Services Electronic Data Interchange (EDI) Gateway. National Government Services will not support the Stratford software during Early Boarding or after the cutover on October 25, 2013. For additional information regarding Stratford Software support, please see visit the NHIC, Corp. Web site at <http://nhic.medicaresoftware.net/>.
2. Install the National Government Services PC-ACE Pro 32 v2.48version. There will be no conversion available for your beneficiary data. Therefore it will be necessary to enter your patient information.
3. Select an alternate software vendor.

All providers will need to have NSV connectivity to access the National Government Services EDI Gateway. Those providers who currently utilize the NHIC, Corp. Part B supplied Stratford software program who wish to take advantage of the Early Boarding opportunity may do so if they have established connectivity via an NSV (see above for more information on NSV).

Information About PC-ACE Pro 32 Software

PC-ACE Pro32 is a professional stand-alone claims processing system that enables an electronic submitter to store demographic information, enter and store claim information, and prepare files for Medicare Part B. These files are prepared in the HIPAA-compliant 837 ANSI 5010 format. The software was developed and is licensed from Systems Design, Inc. (SDI), who maintains and upgrades the program as necessary.

The PC-ACE Pro32 software program is an effective and easy-to-use system for entering Medicare claims. PC-ACE Pro32 offers the ability to key all claim data prior to establishing a connection with National Government Services.

Some other features of PC-ACE Pro32 include:

- Networking capabilities;
- Quarterly releases;
- Full Medicare claim data entry capability with comprehensive editing;
- Real-time claim editing and automated code validation (procedure, diagnosis, etc.);
- Pre-loaded with place of service codes, type of service codes, provider specialty codes, HCPCS procedure codes, modifiers, International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes, taxonomy codes, claim adjustment reason codes and remittance remark codes;
- A “Charges Master” file is available to compile a list of frequently used procedures and charges. This allows selection of procedure codes from a customized list instead of searching a complete list of HCPCS codes when entering claim information;
- Patient information database that will automatically post demographic patient information when entering claim data;
- Claims history and tracking capability;
- Backup, restore and file maintenance functions; and
- Comprehensive online help system.

Before requesting the PC-ACE Pro32 software program, please take a few minutes to ensure your computer meets the following technical requirements:

- Digital Subscriber Line (DSL), cable modems, and VoIP (Voice-over Internet Protocol) phone service connections **cannot be used to connect to National Government Services EDI Gateway.**
- SVGA monitor 800 x 600 resolution or greater
- Adobe Acrobat reader version 4.0 or later (for overlaid claims printing).
- Windows 7, Vista, XP, 2000 or NT 4.0 Operating Systems

Getting Started

You will need to download the PC-ACE Pro 32 software from our Web site. Complete instructions for downloading the PC-ACE software are located under **Claims > Electronic Submissions (EDI) > Technical Information > Software > PC-ACE Pro32** click on the “Learn more about PC-ACE Pro32 (Professional)” link then [PC-ACE Pro32 Part B Full Install Instructions](#).

In addition, the “PC-ACE Pro32 Quick Reference Guide (Professional)” is located on our Web site under **Part B > Publications > Manuals**.

To download the software, go the PC-ACE download page at **Part B > Claims > Electronic Submissions (EDI) > PC-ACE Download Form** (<http://www.NGSMedicare.com/ngs/portal/ngsmedicare/pacedownload?LOB=Part+B>), enter your

Provider number, ZIP code, provider name and provider e-mail address (this is necessary to send you updated information). Select the third bullet for *“PC-ACE Full Installation Version 2.48 for all new Part B, J6 and JK (Institutional and Professional) PC-ACE Pro 32 users Version 5010.”* Click the *Submit Request* button and follow the instructions to download the software. The approximate download time is 50 minutes at 56KB.

All providers with access to the Internet should have the capability to download this billing software free of charge. However, if that is not the case, this software will continue to be available on CD for a \$25 **nonrefundable** fee. Contact the EDI Help Desk at 888-379-9132 or submit an [Online E-mail Inquiry form](#) for assistance. If it is determined that you are not capable of downloading the software, you will be provided with the appropriate form to request the PC-ACE Pro32 software on CD.

To save time and money for you and the Medicare Program, we strongly encourage you to download this program when enrolling or upgrading. CMS requires PC-ACE Pro32 customers to perform PC-ACE Pro32 software upgrades within 90 days of the upgrade availability.

National Government Services looks forward to serving the provider community as your MAC.

We encourage providers to stay informed of changes in the Medicare Program both during this transition and in years to come. Please visit our Jurisdiction K Transition Information Web Site at <http://www.NGSMedicare.com/wps/portal/ngsmedicare/jktransition> for the most up to date information concerning the transition to National Government Services.