



July 19, 2010

Dear Clearinghouse:

Virginia Premier Health Plan, Inc. (VPHP) is pleased to announce that it will begin accepting secondary claims effective August 1, 2010.

Currently, secondary claims are only accepted by Virginia Premier through the submission of paper claims due to required data elements found on the primary carrier's remittance advice.

To submit secondary claims to VPHP, several Coordination of Benefit Segments are required. Failure to submit a required segment will result in a rejection of the claim back to the clearinghouse.

Below is a list of all the required segments and the edit message used for the VPHP Proprietary Response Report. If you receive a 277, the standard edit message for any missing segment is; **A3:672: Other Payer's payment information is out of balance**

Subscriber Name (Loop 2330A NM103, NM104, NM105);

Incomplete Returns Custom Report Edit Message:
Sub Name Required for COB Claims

Subscriber ID (Loop 2330A NM109);

Incomplete Returns Custom Report Edit Message:
Sub ID Required for COB Claims

Insurance Company Name (loop 2330B NM103);

Incomplete Returns Custom Report Edit Message:
Payer Name Required for COB Claims

Other Payer Claim Adjudication Date (loop 2330B DTP01, DTP02, DTP03), (COB Claim Header Only);

Incomplete Returns Custom Report Edit Message:
Primary Payer Adjudication Date Required for COB Claims

COB Amount Paid (Professional Claims: Loop 2320 AMT02 w/ AMT01= $\$$ q(payer paid amount) (Institutional Claims: Loop 2320 AMT02 w/ AMT01= $\$$ 4q(payer prior payment) or (Loop 2430 field SVD02 on at least one claim line for professional and institutional claims);

Incomplete Returns Custom Report Edit Message:
COB Paid Amount Required for COB Claims

COB Allowed Amount (required only for claim header level COB)(Loop 2320 Amt02 w/ Amt01 = $\$$ 6q(Allowed Amount);

Incomplete Returns Custom Report Edit Message:
COB Allowed Amount Required for COB Claims

Virginia Premier Health Plan, Inc.

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Optional Field

COB Patient Responsibility Amounts (required only if available) (Loop2320 CAS01= 'PR')
Note: No Custom Report Edit message will be returned for this segment since this field is optional.

If you have any further questions or concerns with our mandatory segments or Edits (returned messages) please contact our EDI Support mailbox at EDI_Support@vapremier.com.

In an effort to ensure that this process runs smoothly, we request that you advise us prior to sending any secondary claims. We will monitor your submissions and advise you of any issues. You may contact Jeremy Sells at 804-819-5151 ext. 5228 or via email at jsells@vapremier.com to provide this information.

If you are not the correct contact for this email, please forward to the appropriate contact within your organization.

Your assistance and cooperation with this new process is greatly appreciated.

Thanks.

Virginia Premier EDI Department

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