



Top Billing Issues and Errors and How to Avoid Them for Professional Providers

Claims processing experts identified the common adjudication errors that cause claims to be suspended or denied. To ensure timely and accurate processing of claims please review these recommendations.

Some common issues...	CORRECTION or REASON
Bilateral Procedures	When billing a bilateral procedure that requires a modifier, if done bilaterally use modifier 50 and bill one unit per left/right combination. Do not bill an RT and LT modifier separately. If multiple distinct bilateral procedures are done on a patient, for example, multiple bilateral spine injections, it is permissible to bill multiple units.
Incorrect Provider Number (NPI)	BCBSWY needs your correct NPI on file to process your claim properly. If practices are unsure which National Provider Identifier (NPI) to use, contact BCBSWY Provider Relations.
Incorrect Taxonomy code	Submit a valid taxonomy code, in box 24j on a HCFA 1500. For providers with multiple specialties please use the taxonomy code that reflects the services provided.
Invalid address or zip code	Submit the physical street address for the billing and/or service facility NOT PO BOX or Lock Box. Submit all 9 digits of the billing and/or service facility zip code without zeros in the last four positions. Contact Provider Relations if your location does not have a +4 zip.
When billing for anesthesia and the billing provider is not a CRNA	One of the following anesthesia certification modifiers must be submitted: AA-AE, GC, QX, QY, WP
Related anesthesia procedure code not found for anesthesia service.	Submit surgery code for the Anesthesia being administered.
NPI for referring provider not found	For certain services (labs, imaging, DME) the NPI of the referring provider is required on the claim.
CCI Edits	Correct Coding Initiative (CCI) edits are now applied to BCBSWY claims. Payment for these services are included in the allowance for another service with which it was provided. These services cannot be paid separately.
Non-participating Provider Benefit Denials	This service is only covered when performed by a participating provider. Therefore, no payment can be made.
Line Item Missing Charges	Line items requires a provider charge.