TrailBlazer Health Enterprises, LLC
J4 MAC Frequently Asked Questions (FAQs)

1. **Question:** How many LCDs were reviewed during the J4 MAC LCD consolidation?

   Answer: Over 800 LCDs from TrailBlazer (Texas, New Mexico and Colorado), Chisholm (Oklahoma), Noridian (Colorado) and Pinnacle (New Mexico and Oklahoma) were reviewed during the consolidation process.

2. **Question:** How many consolidated LCDs will there be for the J4 MAC?

   Answer: Consolidation resulted in 139 LCDs, the majority of which contain coverage provisions that are new in some way to TrailBlazer.

3. **Question:** What elements in the LCDs were considered during the consolidation?

   Answer: The following elements were considered:
   - Indications and limitations, which include descriptions of the service/procedure covered by the LCD and under what circumstances it is considered medically necessary, description of any credentialing or accreditation requirements of the providers of the service/procedure, and description of any limitations to the service/procedure being put into place by the LCD.
   - CPT/HCPCS codes included in each LCD.
   - ICD-9-CM diagnosis codes to include a comparison of codes included in each LCD and their consistency with the stated indications and limitations and use of dual diagnosis requirements or secondary diagnoses.
   - Utilization and documentation guidelines to include comparison of frequency limitations, if any, and comparison of documentation required to support the LCD's indications and limitations.
   - Coding guidelines were compared and included in the LCD's related Article.

4. **Question:** Where in the LCD can I find information on how the consolidation decision was made or what other LCDs were evaluated in developing the consolidated LCD?

   Answer: In the "Sources of Information and Basis for Decision" section of the LCD (bottom) under:
   - Jurisdiction 4 (J4) (CO, NM, OK, TX) MAC Integration.
     Or,
   - Other Contractor Local Coverage Determinations.

5. **Question:** Were the consolidated LCDs reviewed and approved by CMS?

   Answer: Yes, CMS reviewed and approved the consolidated LCDs posted for notice on the J4 MAC Implementation site.

6. **Question:** Will the consolidated LCDs be posted for comment and notice?

   Answer: There is no formal comment period for these consolidated policies. They will be posted on the J4 MAC Implementation site for a notice period of 45 days. TrailBlazer will review all comments received despite there being no formal comment period.

7. **Question:** Where will the LCDs be posted?

   Answer: On the Draft LCDs page of the J4 MAC Implementation site as an LCD in the Notice Period (status = "F").

8. **Question:** Will the LCDs be posted by state?

   Answer: Although clicking on "Draft" and then clicking on a state will bring up an LCD, it will not be effective in that state until the cutover date for that state. The cutover date for each state will be posted in the narrative section above the search box on the LCD page, once confirmed by CMS.

9. **Question:** Will the consolidated LCDs look the same as the LCDs TrailBlazer currently has in place?

   Answer: No, the consolidated LCDs will contain both Part A and Part B information. If information is different for Part A or Part B, it will be clearly identified.

10. **Question:** Will the related Article continue to be used to convey coding guidelines?

    Answer: Yes, but it will contain both Part A and Part B information with clear delineation as to what are Part A rules (e.g., coding guidelines) and what are Part B rules.

11. **Question:** I practice in (Delaware, District of Columbia, Maryland, and Virginia). Will the LCDs for these states change? Where will they be located?

    Answer: J4 MAC consolidated LCDs do not apply to claims submitted to Medicare from Delaware, Maryland, Washington, D.C., or Virginia.

    Existing TrailBlazer LCDs found on the current TrailBlazer Web site (**not** the J4 MAC Web site) apply to Delaware, Maryland, Washington, D.C., and Virginia until the workloads of those states move from TrailBlazer to a MAC. TrailBlazer continues LCD development and maintenance for Delaware, Maryland, Washington, D.C., and Virginia until their cutover to their respective MAC.

12. **Question**: Will the date of service determine which Local Coverage Determination (LCD) is used to process the claims?

Answer: Yes, claims received after the cutover will be adjudicated based on the date of service. For example, claims with dates of service after the cutover will be processed using the new MAC LCDs. If the date of service is before the cutover date, the prior version of the LCDs would be used.

13. **Question:** Currently there is no formal Local Coverage Determination (LCD) in Oklahoma. I understand that TrailBlazer will become our new LCD contractor. Currently we have been told to bill the Dermagraft® product with the J7342 code for the product itself. Then we bill the 15360 and 15366 codes for application. Since Dermagraft® carries a 90-day global with it, we have been instructed by the Dermagraft® representative to place a 58 modifier with the application codes for weekly application up to eight times per the package insert. Are we doing this correctly at this point in time? When TrailBlazer implements the formal LCD, will this change in any way? Please send complete documentation so that we may bill correctly both now and in the future.

    Answer: TrailBlazer has an LCD that addresses Dermagraft® and its use, which is available on our Web site at:
    http://www.trailblazerhealth.com/Tools/Local%20Coverage%20Determinations/Default.aspx?id=2790&DomainID=1.

    Providers may review the current TrailBlazer LCDs; however, they will not be the LCDs in effect when TrailBlazer assumes responsibility for the Oklahoma J4 segment. That LCD is being developed at this time. When the LCDs for the J4 MAC are fully developed and published, an announcement will be distributed via the J4 MAC Implementation News listserv and/or the J4 state-specific listservs. These LCDs will be published on the LCD page on the J4 MAC Implementation Web site and available for a minimum 45-day notice period.

    We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site at www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

14. **Question:** Can you give an estimated time frame for when TrailBlazer may be consolidating and implementing the new Botulinum Toxin policy?

    Answer: When the Local Coverage Determinations (LCDs) for the J4 MAC are fully developed and published, an announcement will be distributed via the J4 MAC Implementation News listserv and/or the J4 state-specific listservs. These LCDs will be published on the LCD page on the J4 MAC Implementation Web site and available for a minimum 45-day notice period.

We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site at www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

15. **Question:** How do I access the medical policies in place by service CPT code?

    Answer: Medical policies for J4 will be accessed in the same way they are now at the current contractor site. As of a specified date, providers will be notified to access the new policies on the J4 Web site instead of the current TrailBlazer Web site. The J4 medical policies are currently being reviewed by CMS and will be posted as soon as possible.

16. **Question:** According to an FAQ on the J4 MAC Web site, the J4 medical policies are currently being reviewed by CMS and will be posted as soon as possible. If this is the case, how do we obtain the list of medical policies currently under review? Also, where do we submit clinical literature for consideration during this LCD review process?

    Answer: A list of the Local Coverage Determination (LCDs) can be printed from the J4 Web site once they are posted. A job aid entitled "Instructions on How to Access LCDs" is available on both the current and the J4 Web site.

    Clinical literature can be submitted to:

    Medical Directors
    TrailBlazer Health Enterprises, LLC
    Executive Center III
    8330 LBJ Freeway
    Dallas, Texas 75243-1213

    Clinical literature may also be submitted by fax or e-mail:
    E-mail: policy@trailblazerhealth.com
    Fax: (469) 372-2649

FAQs – LCD Consolidation pending CMS approval

17. **Question**: I have reviewed the newly posted list of LCDs for the J4 MAC and have not located one pertaining to therapy/rehabilitation services for physical therapy/occupational therapy/speech therapy. Will one be posted, or do we utilize

the TrailBlazer Physical Medicine and Rehabilitation Services LCD with revision effective date 9/14/07 (Y-18B-R11)?

Answer: This LCD is listed as [Physical Medicine and Rehabilitation, Outpatient](). The effective date of the LCD will be the date of the CMS-approved cutover for your specific segment.

TrailBlazer J4 Provider Inquiry Responses

1. **Question:** I registered for the J4 MAC Implementation listservs and have not received one to date.

   Answer: TrailBlazer has not released any listservs to date. The final approved implementation schedule and exact dates for each state changeover to TrailBlazer will be the first of many communications to be shared with providers and other J4 stakeholders.

   Important Listserv Tips:

   If the subscription request is successful, an e-mail notice will be sent confirming the subscription change. **The provider must respond to this message to have the subscription change fully activated.**

   Providers are encouraged to check the status of their mailing lists if they encounter any problems receiving listserv messages. Providers may verify their subscription status from the "[Edit Profile]()" page and select the "Listserv" tab. Following is a description of the status information that will display in the "Status" column:

   - **Normal** – This status will display if the provider has successfully subscribed to the mailing list and there are no listserv delivery problems.

   - **Confirm** – This status will display when a provider has subscribed to a mailing list but still needs to respond to the confirmation e-mail to have it activated. Once the provider confirms, the status will change to "Normal."

   - **Confirm – Failed** – This status will display when delivery of the confirmation e-mail has not been successful. This may be due to an incorrect provider e-mail address. Providers should edit their profile information to ensure the information is correct and current, and then re-subscribe to the mailing list. The status will change to "Normal" when the information is correct and the delivery of the confirmation listserv is successful.

   - **Held** – This status will display when there is a problem with the delivery of the listserv e-mail.

If the listserv confirmation is not received, providers should check their spam or bulk e-mail folder to ensure the confirmation e-mail message was not delivered to that location instead of to their e-mail inbox. If this has occurred, select the confirmation message and mark it "Not Spam," which should allow future messages to be delivered.

If a hyperlink in the listserv message is not functioning properly, copy and paste the link directly into the Web browser's address bar.

2. **Question:** Will TrailBlazer continue to be the MAC for Texas rural health clinics? If not, when is the transition date to another MAC?

   Answer: On August 3, 2007, CMS announced the selection of TrailBlazer to administer the claims process for both Part A and Part B fee-for-service Medicare in Colorado, New Mexico, Oklahoma and Texas. This includes the Rural Health Clinics (RHCs) in those states.

3. **Question:** Do you have information yet regarding who will fulfill the roles of the Carrier Medical Directors and the policy analysts for the J4 jurisdiction?

   Answer: The designated TrailBlazer Contractor Medical Director (CMD) for the J4 MAC is Debra Patterson, MD. Policy analyst contact information will be shared in coordination with the outgoing contractors at the appropriate time.

4. **Question:** As a third-party biller, we use PC-ACE Pro32 software in billing. Currently, we have both Mutual of Omaha and TrailBlazer clients. After the transition, how will this affect our ability to use the software that Mutual has provided? Can we change the intermediary number from 52280 to C0400 and continue to use the software we have? And will we need new agreements done for billing for these mutual clients? Can we send those in advance to expedite the process? We also have clients that we access through direct data entry that are Mutual clients. Can we send a list to have these clients added to GPNet for access? Or we will need to have new third-party access agreements done with those Mutual clients once they are notified they have been switched to TrailBlazer? If so, can we send these in advance to make sure we are able to access clients' claims? What about the mailboxes for clients currently with Mutual that send claims electronically through other software, such as LTC, QuickCare, etc.? Will these all be assigned to TrailBlazer, but with new phone numbers?

   Answer: TrailBlazer is currently developing our EDI J4 protocols, but vendors may continue using the PC-ACE PRO32 software.

   We encourage vendors and providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area on the J4 MAC Web site at www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and

all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs for service areas.

Listservs with important EDI information will be noted in the listserv title to ensure interested parties are alerted to EDI content.

5. **Question:** The Oklahoma Heart Hospital has partnered with the Oklahoma Cardiovascular Research Group in several clinical research studies over the past three years. Our procedure has been to request approval from our Fiscal Intermediary (FI), Chisholm Administrative Services, for coverage of claims submitted for services to Medicare beneficiaries. Who will be our contact once we are moved to the J4 MAC? When will we change to the J4 MAC? Will there be a different process once we move to the J4 MAC?

   Answer: TrailBlazer will assume responsibility for the Oklahoma J4 segment based on a schedule that has yet to be approved by CMS. This schedule will be posted on the TrailBlazer J4 Transition Web site at www.trailblazerhealth.com/j4.

   We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

   The schedule of the final approved implementation schedule and exact dates for each state changeover to TrailBlazer will be the first of many communications to be shared with providers and other J4 stakeholders. Until the implementation is completed, claims will continue to be managed by the current Medicare fee-for-service contractor and providers should follow the requirements established in their state.

   In coordination with the outgoing contractors, we will post contact information as soon as it is appropriate. TrailBlazer's current Investigational Device Exemption (IDE) process can be found on our Web site at: http://www.trailblazerhealth.com/Policies/Devices/.

6. **Question:** If TrailBlazer has been chosen as the MAC contractor for Jurisdiction 4, who will be the MAC contractor for the J12 region? We are Part B providers and currently submit Medicare claims to TrailBlazer.

   Answer: As of today's date (October 5, 2007), CMS has not announced the selection of the J12 MAC. When the award is announced, notification will be posted on the TrailBlazer Web site, as well as e-mail notification to listserv subscribers.

Information is also posted on the CMS Web site at:
http://www.cms.hhs.gov/MedicareContractingReform/02_What's%20New.asp.

7. **Question:** When would we expect to see an announcement from Noridian, our current carrier, about this change to the MAC?

Answer: TrailBlazer is in communication with all the outgoing contractors and holding planning meetings in October 2007. Both the outgoing contractors and TrailBlazer will be releasing detailed implementation plans and information as it becomes available. Multiple communication and outreach plans are under way to ensure the provider community and other stakeholders are informed early and often on implementation activities.

We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site at www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

8. **Question:** How do I register for listservs?

Answer: Providers must be registered for TrailBlazer's Web site in order to subscribe to listservs. Simply select "Register" on the J4 MAC Implementation Home Page and fill in the blanks with the required information. To access and register for listservs, click "LISTSERV" at the top of any J4 Web page. Providers are encouraged to subscribe to the J4 MAC Implementation News listserv as well as their state-specific listserv. Select the listserv link you are interested in and then select "subscribe." You will receive a confirmation e-mail, and confirmation must be made before the subscription is activated.

Important Tips

- If the listserv confirmation is not received, providers should check their spam or bulk e-mail folder to ensure the confirmation e-mail message was not delivered to that location instead of to their e-mail inbox. If this has occurred, select the confirmation message and mark it "Not Spam," which should allow future messages to be delivered.

- If a hyperlink in the listserv message is not functioning properly, copy and paste the link directly into the Web browser's address bar.

- To update an e-mail address that has changed, go to "Edit Profile" and select "E-mail." Add the new e-mail address in the field provided and click "Update My E-mail Address."

9. **Question:** Is there an estimated time frame for the transition from the current carrier (Noridian) to TrailBlazer? What should providers be doing to prepare for this transition? Should current enrollment requests (such as adding CPT codes for Independent Diagnostic Testing Facilities (IDTFs)) be sent to the current carrier or to TrailBlazer?

   Answer: All providers should continue their current activities (such as changes to your enrollment form) with their present carrier or fiscal intermediary until further instructions are released.

   Both the outgoing contractors and TrailBlazer will be releasing detailed implementation plans and information as it becomes approved and available. Multiple communications and outreach plans are under way to ensure the provider community and other stakeholders are informed early and often on implementation activities.

   To prepare for the transition, we encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site at http://www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

10. **Question:** Can you please provide information on Web site training events and transition information that Oklahoma providers will need to ensure a smooth transition?

    Answer: TrailBlazer is in the early stages of the J4 MAC implementation planning. We have developed and forwarded to CMS for approval a comprehensive provider communications plan that will ensure all stakeholders are kept informed during and after the implementation. We offer listservs dedicated to disseminating important news and information regarding the J4 implementation activities and schedules on the J4 MAC Implementation Web site. Until the TrailBlazer listserv J4 membership is higher, the outgoing contractors will disseminate all information through their communication channels.

    We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area on the J4 MAC Web site at http://www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4

MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs for service areas.

TrailBlazer will announce all scheduled training events via the J4 MAC Implementation Web site and J4 MAC state-specific listservs. The J4 Calendar of Events is located on the top banner of the J4 Web site and will provide a complete state-specific listing of all training events, dates and times, and an overview of information that will be provided during each event. Online registration for these events will be available via the Calendar of Events.

11. **Question:** Will new EDI enrollment forms need to be submitted to TrailBlazer?

Answer: No, providers who are currently billing electronically should not have to complete new enrollment forms. Plans are for the outgoing contractor to transfer the necessary EDI forms to TrailBlazer.

12. **Question:** Are education opportunities available yet?

Answer: TrailBlazer is still in the early stages of the J4 MAC implementation planning. We have developed, and forwarded to CMS for approval, a comprehensive provider communications plan that will ensure detailed education and outreach opportunities are available for all providers. TrailBlazer will announce all scheduled training events via the J4 MAC Implementation Web page and J4 MAC state-specific listservs. The J4 Calendar of Events is located on the top banner of the J4 Web site and will provide a complete state-specific listing of all training events, dates and times, and an overview of information that will be provided during each event. Online registration for these events will be available via Calendar of Events.

We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area on the J4 MAC Web site at http://www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information on J4 MAC implementation activities, all new process updates or changes, and training opportunities.

13. **Question**: What is the official cutover date and how will this affect the processing of Part A/B claims for hospitals with associated split professional billing situations?

Answer: TrailBlazer will assume responsibility for Jurisdiction 4 and the Colorado, Oklahoma, New Mexico and Texas segments based on a schedule that has yet to be approved by CMS. This schedule will be posted on the TrailBlazer J4 Transition Web site at www.trailblazerhealth.com/j4 as soon as it becomes available. Billing for Part A and Part B services on the UB-04 claim form will not change.

14. **Question:** I am having a hard time understanding the J4 MAC. Can you please explain it to me once again, maybe in greater detail?

Answer: An overview of the J4 MAC award is available in the notice linked below. http://www.trailblazerhealth.com/Tools/Notices.aspx?DomainID=4&id=12093

More detailed MAC information can be obtained by visiting the CMS Medicare Reform Web site and reviewing the CMS J4 MAC Questions and Answers document.

http://www.cms.hhs.gov/MedicareContractingReform/05_A_BMACJurisdictions.asp

http://www.cms.hhs.gov/MedicareContractingReform/Downloads/J4_Award_QsAs.pdf

TrailBlazer will continue to post implementation information on the J4 MAC Web site as it becomes available. We encourage providers to register for the J4 MAC Implementation News listserv as well as the state-specific listserv for their service area from the J4 MAC Web site at http://www.trailblazerhealth.com/j4. By registering for these listservs, providers will receive the latest information and more detailed explanation of ongoing J4 MAC implementation activities and all new process updates or changes. Jurisdiction-wide information will be shared in the J4 MAC Implementation News listserv as often as is needed, with state-specific information included in the state-specific listservs.

If you have more specific questions after reviewing this information, please feel free to forward those questions to us.

15. **Question:** What is the J4 MAC? Will this affect us here at Pratt Medical Center in Virginia?

    Answer: Virginia's Part B workload is currently included in the TrailBlazer Medicare processing workload. Until CMS offers an official request for a proposal and selects a MAC for the Virginia jurisdiction, tentatively scheduled for early 2009, no changes in Medicare processing will occur for Virginia providers. More detailed information can be obtained on the CMS Web site at: http://www.cms.hhs.gov/MedicareContractingReform/02_What's%20New.asp.

16. **Question:** What does the Jurisdiction 4 Medicare Administrative Contractor (J4 MAC) include? Will TrailBlazer take over all of the Jurisdiction 4 region or just the four states mentioned? Does the intermediary change relate to Oklahoma Medicare and the Durable Medical Equipment Regional Carrier (DMERC) for Region D?

    Answer: The J4 MAC does not include the DMERC for Region D. The four states that comprise the J4 MAC are Colorado, Oklahoma, New Mexico and Texas. The following documents outline what is included in the J4 MAC award and can be viewed on the CMS Web site:

- J4 Award Background Sheet.
  http://www.cms.hhs.gov/MedicareContractingReform/downloads/J4_Award_Background_Sheet.pdf
- J4 Award Questions and Answers.
  http://www.cms.hhs.gov/MedicareContractingReform/downloads/J4_Award_QsAs.pdf.

17. **Question:** Our practice has received an e-mail from Palmetto GBA that routed us to the CMS Web site. The article, dated October 26, 2007, indicates that the MAC contractor for Jurisdiction 12 for Delaware, Maryland, New Jersey, Pennsylvania and Washington, D.C., will be Highmark Medicare Services Inc. Is this true?

    Answer: On October 26, 2007, CMS announced the award of the A/B MAC Jurisdiction 12 to Highmark Medicare Services, Inc. On November 6, 2007, CMS notified TrailBlazer that J12 MAC transition activities have been placed on hold. For additional information, reference
    http://www.cms.hhs.gov/MedicareContractingReform/02_What's%20New.asp.

18. **Question:** We have five Skilled Nursing Facilities (SNFs) in Texas that had Mutual of Omaha as their Fiscal Intermediary (FI). We are aware that we will be transitioning to TrailBlazer. Our concern at this point is when we try to access Mutual of Omaha Medicare, as we have done in the past, their Web address redirects to Wisconsin Physicians Service (WPS). I am confused. Who is our FI or MAC?

    Answer: Your facilities will cut over to TrailBlazer as part of the MAC transitions; however, you need to continue to work with your FI until that transition occurs. Mutual of Omaha is now partnering with WPS. They now represent your FI.

19. **Question:** In Colorado, there are some facilities that work through another Fiscal Intermediary (FI), Mutual of Omaha. Will they be able to stay with Mutual? Second, chain organizations in the past have had their operation centered at one FI, usually located near its home office. Will these organizations have each facility use the FI where its home office is located?

    Answer: Providers in Colorado (and other J4 states) served by Mutual of Omaha (Mutual) will not immediately transition to TrailBlazer as part of the J4 transition. CMS will establish a separate transition schedule for Mutual providers in J4 at a future date. However, the Mutual providers in J4 will ultimately transition to TrailBlazer, subject to the chain provider nomination guidelines discussed below.

    Eligible chain providers will have the option of nominating the MAC serving the jurisdiction where the chain home office is located. Alternatively, the chain can decide to not make a single MAC nomination. In that case, individual chain provider facilities will be served by the MAC assigned to the jurisdiction where each provider facility is located. These chain nominations and transitions will occur at a later date.

CMS will provide guidance to chain providers regarding the nomination process and transition timeline at a later date.

20. **Question:** When will we be required to submit electronic claims with the NPI information only for J4?

Part B - On October 31, 2007, all Medicare carriers and A/B Medicare Administrative Contractors (MACs) that provide services to providers who formerly billed carriers began rejecting Part B claims if they were unable to match an NPI/PIN combination submitted on a claim to an NPI/PIN combination in the Medicare NPI crosswalk. The NPI/PIN combination may be used to identify the billing, pay-to or rendering provider (the pay-to provider is identified only if it is different from the billing provider).

Part A - Effective January 1, 2008, all fiscal intermediaries and A/B MACs will be required to reject claims not including the National Provider Identifiers (NPIs) in order to identify the primary providers (the billing and pay-to providers) on Medicare electronic and paper institutional claims (i.e., 837I and UB-04 claims). Providers may continue to use the legacy identifier in these fields as long as they also include the NPI in these fields. 837I and UB-04 claims with **only** legacy identifiers in the Billing and Pay-to Provider fields will be rejected effective January 1, 2008.

21. **Question**: Currently, we do Electronic Funds Transfer (EFT) with Medicare. Will we have to do anything differently in order to continue to use EFT? Do you know if New Mexico Submitter IDs will change?

Answer: A new "EFT Authorization Agreement" will need to be submitted to TrailBlazer. The form can be downloaded from the CMS Web site at this link: http://cms.hhs.gov/cmsforms/downloads/CMS588.pdf.

TrailBlazer will also notify all providers enrolled in EDI of their Submitter IDs and passwords. Additional information concerning EDI is forthcoming, and will be distributed via our listserv and Web site.

22. **Question:** Will NPI data from Pinnacle be transferred to TrailBlazer or will the information have to be submitted again?

Answer: TrailBlazer receives its National Provider Identifier (NPI) updates directly from the National Plan & Provider Enumeration System (NPPES) contractor. The provider will not need to submit that data to TrailBlazer.

23. **Question:** What impact will the J4 transition have on providers currently filing with TrailBlazer?

Answer: Because TrailBlazer currently has responsibility for processing over 75 percent of the J4 MAC workload as the Part A Fiscal Intermediary (FI) for the states of Colorado, New Mexico and Texas, as well as the Part B carrier in Texas, it is

anticipated that the impact to those providers already served by TrailBlazer will be minimal. However, CMS requires that the least restrictive local coverage policy used for all states be adopted as the Local Coverage Determination (LCD) jurisdiction-wide effective upon the segment cutover. This will be the biggest change. LCDs are scheduled to be posted by December 15, 2007.

Please register for the J4 MAC Implementation News listserv, as well as the state-specific listserv for your service area to receive the latest information regarding any additional changes that might apply for current TrailBlazer providers. Registration for J4 MAC Implementation listservs can be accessed by selecting LISTSERVS at the top of any J4 Web page.

24. **Question:** Will Medicare Part A hospice claim submissions now need to go through TrailBlazer? Or just Medicare Part B claims? The recent J4 MAC communication infers that Colorado Part A is included in the transition, but HLC has not received confirmation from Cahaba. We currently submit our Part A claims electronically through EDISS to reach Cahaba for processing. Our Part B claims are processed and sent through PC-ACE Pro32.

   Answer: Home health and hospice claims are not part of the J4 award. CMS has a posting on its Web site that addresses these specialty awards, which can be viewed from http://www.cms.hhs.gov/MedicareContractingReform/Downloads/Specialty_MAC_Jurisdiction_Fact_Sheets.pdf.

25. **Question:** Will TrailBlazer continue with New Medicare Update in-service training throughout Oklahoma?

   Answer: TrailBlazer looks forward to face-to-face training with our Oklahoma providers in the future; however, given the time frames of this cutover, all our early education initiatives will be completed via Web-based or teleconference-based training.

26. **Question:** Most New Mexico hospitals already have EFT agreements in place for Part A with TrailBlazer. Will there be any need for another/additional EFT agreement for Part B when there is already one for Part A?

   Answer: A separate Electronic Funds Transfer (EFT) agreement is needed for Part B.

27. **Question:** Will New Mexico providers continue receiving Medicare Explanation of Benefits (EOBs) through a dial-up modem to download the EOBs? That is what we are currently doing. Also, will the Submitter ID for this change?

Answer: New Mexico providers will continue to use dial-up to retrieve their Electronic Remittance Advices (ERAs). TrailBlazer will issue new receiver numbers to all current ERA enrollees. Our goal is to make the transition as uncomplicated as possible. You will receive a letter from TrailBlazer concerning Electronic Data Interchange (EDI) information with your specific IDs for conducting electronic transactions.

28. **Question:** Will TrailBlazer require individual and group applications to be revalidated?

    Answer: CMS has instructed contractors to initiate revalidation for specific providers. The revalidation requests have been initiated by the legacy contractors. Providers should comply with any revalidation requests initiated by the legacy contractors. Upon J4 MAC implementation, the MAC contractors will be required to follow through on any outstanding revalidation issues initiated by the outgoing contractors. TrailBlazer has no current plans for full revalidation of all J4 MAC providers but will comply with any future CMS revalidation directives.

29. **Question:** Will current Medicare legacy individual and group numbers remain the same or even be required on submitted claims?

    Answer: TrailBlazer will continue to use the legacy individual and group Provider Transaction Access Numbers (PTANs) issued by the outgoing contractors. TrailBlazer is currently conducting detailed analysis of legacy provider numbers to determine if there are any isolated circumstances where changes in legacy numbers are necessary. TrailBlazer will communicate directly with any providers where legacy PTAN changes are necessary.

    Providers and contractors are required to adhere to the current CMS instructions for use of legacy PTANs and National Provider Identifiers (NPIs) for claims submissions.

30. **Question:** Will you be able to work the Mutual of Omaha providers who would like to convert to the MAC prior to the final transition date?

    Answer: There is currently no funding and/or workload transition mechanism to allow for individual Mutual of Omaha providers located in J4 to begin being serviced by TrailBlazer. Based on our current feedback from CMS, we expect all Mutual of Omaha providers located in J4 will move to TrailBlazer during a single transition. We expect further guidance from CMS on this issue.

31. **Question:** Will you announce a transition date for Mutual of Omaha when the transition dates for all other outgoing contractors are announced?

    Answer: Mutual of Omaha providers were specifically excluded from the initial J4 workload that was awarded to TrailBlazer. CMS has not yet announced approximate

transition dates for Mutual of Omaha providers to J4. On a preliminary basis, we are being told by CMS that all Mutual of Omaha providers will be transitioned after all 15 MAC jurisdictional workloads have been transitioned. Based on the current CMS timelines, the last of the MAC jurisdictions should be fully transitioned in late FY 2009. Therefore, we anticipate the transition of Mutual of Omaha providers will begin sometime in FY 2010. We expect further guidance from CMS on this issue.

32. **Question:** Will your electronic claims filing system be compatible with Procom? If not, what type of upgrades or changes do we need to make to be able to file electronic claims to TrailBlazer?

   Answer: TrailBlazer is compatible with Procom as a communication package. We recommend submissions be sent using the Z-modem protocol. Please refer to our GPNet Communications Manual on the J4 Web site at http://www.trailblazerhealth.com/J4/EDI/default.aspx?DomainID=4.

33. **Question:** Will providers receive any kind of verification that their EFT has been received by TrailBlazer, and how will providers be notified that their EFT has been processed? Where will notification be sent (practice location, correspondence address or remit address)?

   Answer: Providers will not receive verification that we have received their forms; however, they will receive a letter at their physical address once they have been approved.

34. **Question:** Can we submit the EFT to TrailBlazer's physical address, or will TrailBlazer only accept the EFT at the P.O. Box shown on the Web site?

   Answer: While it is preferred to send EFT forms to the P.O. Box, we understand some providers will wish to track this mailing to verify delivery. With that in mind, EFT forms can be submitted to TrailBlazer's physical address.

35. **Question:** Will TrailBlazer transition to the CDS EDI? If so, when is the anticipated date for this transition?

   Answer: The TrailBlazer Part A Colorado, New Mexico and Texas and Part B Texas workload transition to CDS has not yet been announced. The tentative date is targeted for mid-June 2008 at the same time as the TrailBlazer J4 MAC implementation cutover date.

36. **Question:** Is there a direct contact for questions or concerns regarding the credit balance reports?

Answer: TrailBlazer's contacts for all areas will be shared at a date closer to cutover. Please contact your outgoing contractor's contacts until advised otherwise. We welcome all inquiries via the J4 e-mail address J4MAC@TrailBlazerHealth.com until TrailBlazer's contact information is posted.

37. **Question:** What is the cutover date for Texas providers not currently using TrailBlazer?

    Answer: CMS has not yet announced transition dates for providers currently served by TrailBlazer but not included in the jurisdiction awarded to TrailBlazer. They have indicated plans for all Mutual of Omaha providers to transition after all 15 MAC jurisdictional workloads have been transitioned. Based on the current CMS timelines, the last of the MAC jurisdictions should be fully transitioned in late FY 2009. We expect further guidance from CMS on this issue in the future.

38. **Question:** What is the current time frame for the 835 files to be submitted to providers?

    Answer: The past night's Electronic Remittance Advice (ERA) will be in the provider's mailbox by 8 a.m. the next morning.

39. **Question:** Who will be responsible for inpatient reviews once we convert to the J4 MAC?

    Answer: The Quality Improvement Organizations (QIOs) currently in place will continue to review inpatient claims for the Medicare Administrative Contractors (MACs).

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40. **Question**: Currently with Chisholm Services, we use the Xpack software for claim edit and 837 files to the clearinghouse. Will there be a change in claim edit software? Will it be installed on local networks or Web-based? What other system/network changes will be required?

    Answer: Providers will be able to continue to use their existing software packages to send 837 claim formats. A letter will be distributed to all submitters regarding the minor changes that will be needed at cutover.

41. **Question:** I have been reading about the J4 MAC changes and would like to know what forms we will need to fill out for Electronic Funds Transfer (EFT). We are in El Paso, Texas, and already submit claims to TrailBlazer. Also, what will we need to do as far as Electronic Data Interchange (EDI)?

Answer: Current TrailBlazer electronic submitters will not need to take any action at this time. New EFT forms are not needed for current TrailBlazer providers.

42. **Question:** We currently submit 837 files to TrailBlazer for other Medicare Part B carriers. Do we need to get new submitter numbers for the J4 transition carriers?

    Answer: During the "early boarding" period, TrailBlazer will be distributing Submitter ID information to use in order to submit claims via GPNet. This letter will be forwarded to all submitters by January 31, 2008. After cutover, you may migrate Oklahoma, New Mexico or Colorado claims to the existing GPNet Submitter ID. A form will be posted on our J4 Web site that you will need to complete in order to migrate to the existing GPNet Submitter ID.

43. **Question:** I have downloaded Form CMS-588 (EFT Authorization Agreement) from the CMS Web site. In Part II it asks for the Medicare Identification Number, and I wanted to find out if that is the same as our Medicare group provider number.

    Answer: Part II of the EFT Authorization Agreement should contain the name of the physician or individual practitioner, or the legal business name of the provider/supplier as reported to the Internal Revenue Service (IRS). This information depends on Medicare enrollment. A physician group enrolled with Medicare as a group practice would list the group's National Provider Identifier (NPI) number.

44. **Question:** I participated in TrailBlazer's teleconference call this morning and I wanted clarification about trading partner numbers and Submitter IDs for our electronic claim submissions. We are being told that TrailBlazer will be notifying us at the end of December of our Submitter ID information. Will our Submitter ID remain the same or will it change?

    Answer: For the most part, Submitter/Trading Partner IDs will remain the same. TrailBlazer will mail Submitter ID notification letters to all submitters by January 31, 2008.

45. **Question:** I believe some of our EDI contact information is no longer current with Noridian, so I'm concerned about how I will be receiving our Submitter IDs from TrailBlazer, especially if you will be mailing the information to us rather than by e-mail.

    Answer: Please contact your current contractor concerning contact information and procedures for updating your information. If you do not receive a letter from TrailBlazer by January 31, 2008, please e-mail us at J4MAC@trailblazerhealth.com.

46. **Question:** Is there a phone number I can call to find out this information? I cannot find phone numbers on the J4 MAC Web site.

Answer: Until notified, providers/submitters are being requested to contact their current contractors for EDI issues. Contact information will be shared at the appropriate time of changeover in responsibilities.

47. **Question:** Regarding credit balances, should refunds for a date of service prior to the J4 transition be sent to the previous carrier or to TrailBlazer?

    Answer: All issues will be handled by the current contractors until notified otherwise or until cutover occurs.

48. **Question:** Will there be any changes or delays in claims processing or ERA payments after the transition?

    Answer: TrailBlazer's and CMS' goal is to ensure that there is no disruption of claims processing, payments or Medicare operations. We are working diligently to ensure Medicare providers and beneficiaries experience no delays in payment or claim adjudication.

49. **Question**: When the transition occurs, will the requirements for additional documentation on an electronic claim submission be the same for Oklahoma, Colorado and New Mexico providers as it is currently for Texas providers?

    Answer: TrailBlazer does offer the ability to submit additional documentation with an electronic claim when the documentation is required for claims processing. After implementation, all J4 providers will follow the same claims filing requirements. Information on any differences between what the current contractor required and what is required for J4 providers will be provided via the J4 Implementation News listserv prior to the segment cutover dates.

50. **Question:** Will there be one payment for both Medicare Part A and B payments or will they continue to come separately?

    Answer: Medicare Part A and B claims are still processed on separate payment systems; therefore, payments will be still be made separately.

51. **Question:** What Web site can we go to in order to receive our Explanation of Benefits (EOB) for an EFT payment?

    Answer: Information concerning Electronic Data Interchange (EDI), including Electronic Remittance Advice (ERA), will be shared via J4 Implementation News listservs and posted to the J4 EDI Web page as soon as it becomes available. Please refer to the Part A EFT Letter to Providers or Part B EFT Letter to Providers for more information concerning EFT.

52. **Question:** What are the requirements for Medicare secondary claims to be billed? Will TrailBlazer accept electronic Medicare secondary submissions or will they require paper claims to be sent?

    Answer: Medicare Secondary Payer (MSP) claims filing requirements are national CMS filing requirements and ANSI standards for electronic claims. Electronic claims filers should file MSP claims electronically, unless Medicare is the third payer.

53. **Question:** Will the payment process for our claims change with the new transition?

    Answer: No. Claims will continue to be processed using the Multi-Carrier System (MCS) and the Fiscal Intermediary Standard System (FISS). If you receive payments via EFT from the outgoing contractor today, you will need to submit a new EFT agreement.
    Note: Providers who currently have an EFT agreement with TrailBlazer do not need to submit a new agreement. Please refer to the Part A EFT Letter to Providers or Part B EFT Letter to Providers for more information concerning EFT.

54. **Question:** Is there a contact for us to follow up with on A/R claims after the transition?

    Answer: TrailBlazer contact information will be provided prior to cutover.

55. **Question:** Regarding claims that were originally submitted to the previous carrier that will have to be refiled, will we resubmit the claims to the previous carrier or to TrailBlazer to reprocess?

    Answer: Specific instructions regarding claims submission will be released via the J4 Implementation News listserv. Effective with the final J4 segment (state-specific) cutover date, all claims will be processed by TrailBlazer regardless of dates of service.

56. **Question:** I have heard during the LCD consolidation that the contractor will use the least restrictive policy of the policies currently in place unless CMS approves use of a more restrictive policy upon request on an exception basis. The request must be sent with sufficient justification to explain why a more restrictive policy should be adopted. What does this mean?

    Answer: The contractor must determine whether the least restrictive policy means no policy or to use the least restrictive of the policies that exist. In many cases it is more burdensome to have no policy, or a policy touching on an issue only briefly, than a robust policy since there is limited national guidance in some areas. Least restrictive can mean no policy, but that is a judgment the MAC must make in the context of a MAC jurisdiction. In making that judgment, the MAC should consider potential vulnerabilities of having no policy. The contractor must submit the narrative justification for its determination to CMS for approval.

57. **Question:** Is it true chain providers have the option to house their work based on the state and jurisdiction of their home offices?

Answer: On November 24, 2006, CMS issued the final rule entitled "Medicare Program-Revisions to Hospital Outpatient Prospective Payment System and Calendar Year 2007 Payment Rates." This regulation outlines the CMS policy that all providers and suppliers will generally be assigned to a MAC based on geographic location. "Qualified chain organizations" may request to have their billing activities consolidated under the MAC with jurisdiction over the chain's home office.

For example, if a qualified chain organization with a home office in Florida has downstream providers located throughout the country, the organization can decide that some of its providers will file claims with the MAC that covers Florida, and the balance of its providers will file claims with the MAC covering the jurisdiction where they are located. CMS will provide manual guidance at a future date setting forth chain organization policy on details such as the acceptable ratio of providers billing centrally versus those billing locally.