



State of New Jersey
Department of Human Services
Division of Medical Assistance and Health Services

MEDICAID ALERT

January 1994

TO: Hospitals - Chief Executive Officer
Home Health Agencies and Independent Clinics - Free-standing
Renal Dialysis Facilities

ROUTE TO: Accounting, Finance and Billing Offices,
Hospital-Based Home Health Agencies and
Renal Dialysis Centers

SUBJECT: Conversion to UB-92 Claim Form

EFFECTIVE: April 1, 1994

BACKGROUND: In the Medicaid Alert dated August 1993 regarding the conversion to the UB-92 claim form, reference was made to acceptable electronic media formats. The purpose of this Medicaid Alert is to clarify which formats will be acceptable for use as of April 1, 1994.

ACTION: As of April 1, 1994, providers may submit electronic claims either in their current NJMMIS EMC format or in the HCFA FLAT FILE (Version 4) format within NJMMIS specifications. Since the ANSI 837 has not yet been finalized, this format cannot be accepted as of April 1, 1994.

Providers will be advised in the near future as to the New Jersey Medicaid specifications for use with HCFA FLAT FILE (Version 4). NOTE: Between the date of the receipt of this Medicaid Alert and 4/1/94, only the NJMMIS EMC format may be used. Providers are requested to contact the EMC Department of Unisys to indicate your choice of the use of either the current NJMMIS EMC format or the HCFA FLAT FILE (Version 4) format after April 1, 1994.

PLEASE CALL: EMC Coordinator at (609) 588-6032 or

PLEASE WRITE: Unisys
EMC Department
CN-4804
Trenton, New Jersey 08650

For further information or questions concerning this Medicaid Alert, please contact the EMC Department at Unisys, at (609) 588-6032.

**RETAIN THIS MEDICAID ALERT CHRONOLOGICALLY BEHIND THE ALERTS TAB
(GREEN TAB MARKED "4").**