



Highmark Maintaining Resource Utilization Group (RUG) Methodology in 2020

Although The Centers for Medicare and Medicaid Services (CMS) will be replacing the Resource Utilization Group (RUG) pricing methodology with the Patient Driven Payment Model (PDPM) on October 1, 2019, Highmark has made the decision to maintain the RUG pricing methodology for the immediate future. Highmark plans to monitor the progress of PDPM for the potential adoption of this new methodology at a later date. [Read the official Highmark Special Bulletin here...](#)

Capital Blue Cross Authorization and Claim Status Management Now on Availity

Navinet access for authorization and claim status management for Capital Blue Cross ended June 30, 2019. Capital Blue Cross has transitioned all of the capabilities from Navinet to their new portal through Availity. Providers who have not already registered are strongly encouraged to sign up for the new Capital Blue Cross Availity portal as soon as possible to minimize the impact of authorization and claim status issues. [More information about the transition can be found on Capital Blue Cross's Availity landing page...](#)

CMS Transition Period for New Medicare Numbers ends December 31, 2019

Beginning in April 2018, Medicare began the transition to remove Social Security Numbers from all Medicare cards by April 2019. The old numbers were replaced by new unique Medicare numbers called the Medicare Beneficiary Identifier or MBI. The transition period for claims processing between the old Medicare numbers and the new MBI will end on December 31, 2019. As of January 1, 2019, Medicare will only accept claims with the new MBI as the Medicare identifier. It is imperative to make sure that all of your Medicare beneficiaries have received their new card and notified you of their new number. If you are still in need of some Medicare beneficiaries MBIs, Medicare is currently processing the remittance advices with the new MBIs, in addition to the old Medicare ID. The new MBIs can also be obtained through Novitasphere. [Read more about the transition and the new MBIs here...](#)

Pennsylvania Community HealthChoices (CHC) Phase III Set to Begin January 1, 2020

Pennsylvania's Medicaid transition to Community HealthChoices (CHC) is being implemented in three phases. Phase I and Phase II are completed and Phase III is set to take effect on January 1, 2020, for all remaining counties in Pennsylvania. RKL's Medical Billing team has worked with providers during the Phase I and Phase II transitions and we are here to help. Contact [Stefanie Knaub](#), RKL Senior Living Services Partner at 717-590-8648 for transition questions and support.

PDPM Is Right Around The Corner, Are You Ready?

By now, medical billing professionals are acutely aware that a new Medicare reimbursement model, the Patient Driven Payment Model (PDPM), will take effect on October 1, 2019. It is imperative that your entire team are properly trained now so your reimbursement will not suffer under the new model. Contact [Stephanie Kessler](#), RKL Senior Living Services Partner at 717-843-3804 for training support. You may also [register here](#) for RKL's upcoming PDPM training on August 28, 2019.

*Questions about these updates? Need support to meet requirements?
Contact [Stefanie Knaub](#), RKL Senior Living Services Partner, at 717.590.8648.*



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