



Network Notification

Notice Date: February 19, 2020
To: Ohio Medicare, MyCare, D-SNP and Exchange FQHC Providers
From: CareSource
Subject: Use of Uniform Billing Form UB 04

Summary

CareSource is informing Federal Qualified Health Centers (FQHC) providers who are billing for MyCare Opt-in, Medicare, and Exchange and who are contracted for a percentage of Medicare PPS (prospective payment system) of billing guidance. These provider types should use form UB-04 for all services EXCEPT transportation when billing for the above plans. Medicaid billing **is not** affected by this notice.

Impact

The use of form UB-04 will be required for FQHCs in order to ensure proper processing and payment. Failure to use the form will result in claim denial.

Importance

In an effort to make our process more efficient, CareSource is automating claim payment via the use of the Medicare PPS for FQHCs. The PPS requires that the billing be submitted using the uniform billing form UB-04.

Questions?

For questions around this issue, please contact Provider Services at **1-800-488-0134** (Monday through Friday, 8 a.m. to 6 p.m. Eastern Standard Time).

OH-SP-0236