

## TOP TEN EDITS and Solutions for TRICARE claims submitted to PGBA, LLC in legacy formats

<b>AAT</b>	<p><b>MODIFIER INDICATING SERVICE PROVIDER LEVEL REQUIRED</b></p> <p><b>Problem:</b> All anesthesia claims require a valid modifier.</p> <p><b>Corrective action:</b> Check FA0 record field 10 and FA0 record field 11 to make sure a valid anesthesia modifier is being submitted.</p>
<b>AW2</b>	<p><b>RTC PROVIDER ADMIT/DISCHARGE DATES REQUIRED</b></p> <p><b>Problem:</b> If provider type is Residential Treatment Center then "Begin" Date must not equal spaces or low values.</p> <p><b>Corrective action:</b> If Provider Type (on the Provider Master Database) equals '39' (Residential Treatment Center - RTC) and Provider Specialty Code (on the Provider Master Database) equals 'DF' (RTC), then Hospital Confinement "Begin" Date (EA0-28) must <b>not</b> equal spaces or low values.</p>
<b>OOJ</b>	<p><b>OUT OF JURISDICTION, ZIP NOT FOUND ON ZIP FILE</b></p> <p><b>Problem:</b> The patient address zip code, CA0 record field 15, does not fall into a TRICARE region processed by PGBA, LLC.</p> <p><b>Corrective action:</b> Check the zip code of the patient and file claim to appropriate TRICARE region claims processor. Check the <a href="http://www.mytricare.com">www.mytricare.com</a> website for the TRICARE regions PGBA, LLC processes.</p>
<b>B06</b>	<p><b>INVALID SOURCE OF ADMISSION</b></p> <p><b>Problem:</b> Type of Bill Code is not valid.</p> <p><b>Corrective action:</b> Check appendix A of the UB92 manual to make sure the 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> digit of the Type of Bill are valid values.</p>
<b>AW1</b>	<p><b>RENDERING PHYSICIAN EIN/SSN IS REQUIRED</b></p> <p><b>Problem:</b> For the professional claim there is no rendering doctor ID number in the FA0 record field 23.</p> <p><b>Corrective action:</b> All professional TRICARE claims submitted to PGBA, LLC must have a rendering doctor ID number in the FA0 record field 23. Check FA0-23 to make sure it is not spaces or low values.</p>

<p><b>TBO</b></p>	<p><b>ORIGINAL TRICARE/MEDICAID PROVIDER NOT ON FILE</b></p> <p><b>Problem:</b> TRICARE Provider Number (DA0-13) must be on the Provider Master Database.</p> <p><b>Corrective action:</b> Make sure the original provider of services provider number is in the DA0-13 and loaded on the PGBA Provider Master Database.</p>
<p><b>HA9</b></p>	<p><b>INVALID REND PHYSICIAN SSN</b></p> <p><b>Problem:</b> The rendering physician number submitted in the FA0 record field 24 is not affiliated with the group number submitted in the BA0 record field 02 at PGBA, LLC, or it is invalid and not on file with PGBA, LLC. The rendering physician number is usually the doctor SSN. The rendering physician number must be submitted on all professional claims except those in which the doctor is setup as a solo practice with PGBA, LLC.</p> <p><b>Corrective action:</b> Check to make sure there is a number in the FA0-23 and it does not match the group number submitted in the BA0-02. Check with PGBA, LLC to make sure the rendering number submitted is the correct rendering number setup at PGBA, LLC. Also, check with PGBA, LLC to make sure the rendering number is affiliated with the group number submitted in BA0-02 for the TRICARE region responsible for the claim.</p>
<p><b>A71</b></p>	<p><b>NON-PROFESSIONAL BASE PROVIDER NO.</b></p> <p><b>Problem:</b> The specialty of the group provider number submitted in the BA0 record field 02 is not setup at PGBA, LLC as a professional provider specialty.</p> <p><b>Corrective action:</b> Check with PGBA, LLC for the correct professional provider number to use for the group.</p>
<p><b>B34</b></p>	<p><b>PAT STATUS - FREQ OF TYPE BILL INCONSISTENT</b></p> <p><b>Problem:</b> Patient status and bill type are not consistent.</p> <p><b>Corrective action:</b> Patient status, record 20 field 21, must match frequency code of bill type, record 40 field 4.</p>
<p><b>EB5</b></p>	<p><b>TYPE SVC NOT COMPATIBLE W/DIAGNOSIS CODE</b></p> <p><b>Problem:</b> Type of service performed is not compatible with diagnosis code.</p> <p><b>Corrective action:</b> Check FA0 record field 8 for TOS and field 9 for procedure code, and make sure it is compatible with diagnosis codes in EA0 record fields 32 – 35.</p>