

October 7, 2024

## IMPORTANT BULLETIN

**REVISED**

**Regarding Billing Changes for Medicare Advantage**

### **Revised Bulletin on Billing Changes for Medicare Advantage**

Please note the following updates regarding billing requirements for Medicare Advantage claims, effective for claims processed on or after October 1, 2024, as mandated by CMS.

#### **Required Codes for ALL Medicare Advantage Claims (Episodic and Fee for Service)**

- Value code 61 with the appropriate 5-digit CBSA code.
- Value code 85 with the appropriate FIPS code.

*Occurrence codes are not mandatory for Fee-for-Service Medicare Advantage claims, but they may be included if desired.*

#### **Additional Requirements for Episodic Medicare Advantage Claims (Medical Mutual of Ohio)**

- Occurrence Code- 50 with the correct Assessment date.
- Value Code 61: Include the appropriate 5-digit CBSA code.
- Value Code 85: Include the appropriate FIPS code.

\*Note: If claims are not billed per guidelines, they will reject and will require your agency to correct and re-submit.

If you have any questions, please contact:

**CSI Network Department; 440-717-1700 Option 6, or email:  
[agencyupdategroup@optioncare.com](mailto:agencyupdategroup@optioncare.com)**

