

**From:** [Petre, Lori](#)  
**To:**

**Cc:**  
**Subject:** MSIC Issues/Concerns - Response Requested  
**Date:** Monday, December 24, 2018 11:53:00 AM  
**Importance:** High

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We recently received some concerns from the MSIC's related to issues with payment and processing of claims. In order to allow us to assess these concerns, please provide responses to the below questions for your plan by no later than COB Monday 1/7.

Thank you in advance for your responses and let us know if you have questions.

Are you experiencing any issues with the following MSIC specific Billing rules, which are resulting in incorrect or non-payment of MSIC claims?

- The MSIC may include all services provided to a member on a single date of service on one or multiple claim forms. If multiple claim forms, the MSIC NPI must be used as the rendering provider on each claim. *(please note that these claims must be recognized to ensure that they are not inappropriately bundled or failed as duplicates)*
- MSIC-eligible visits may be billed with a T1015 procedure code once per day, per MSIC, and only when the member is a current CRS or former CRS member.
- The T1015 procedure code may be added to any of the claims which account for the member's visit on a single date of service, or may stand alone on a separate claim form.

Are you able to appropriately apply value based payments (IC enhanced %; APSI enhanced %, etc.) when applicable to the MSIC?

Are there other issues or questions impacting the correct processing and payment of MSIC claims by your plan?