

# PACE

## PROVIDER BULLETIN

December 14, 2001

### Other Prescription Coverage EDIT

Effective December 10, 2001, PACE began receiving membership data identifying those cardholders possessing full or partial prescription coverage with Aetna US Healthcare.

Any claim identified by an insurance carrier as being fully or partially compensable and submitted erroneously to PACE with the Other Coverage Code of "0" "[Other Coverage] Not Specified" or "1" "No Other Coverage Identified" is denied. The denial is accompanied with the response of NCPDP code "41," **"BILLABLE TO OTHER PROCESSOR OR PRIMARY PAYOR"**; PACE code "043," "SUBMIT CLAIM TO PRIMARY PAYOR."

Providers *may* resubmit a denied claim **if** they have complied with the Program's regulations using the following "Other Coverage" Codes in accordance with the applicable definitions:

#### OTHER COVERAGE CODES

2 - Other Coverage Exists. Payment collected \*.

(PACE / PACENET is the Secondary Payor.)

*[\*Payment from the other insurance should be included in the claim submission to PACE and appear in the "Other Payor Amount" field.]*

3 - Other Coverage Exists. This claim not covered.

(PACE / PACENET is the Primary Payor.)

4 - Other Coverage Exists. Payment not collected.

(PACE / PACENET is the Primary Payor.)

Providers may direct questions to Provider Services at 1-800-835-4080.

