



Federally Qualified Health Centers (FQHC) Provider Alert

Issue

When Procedural Terminology (CPT) Code T1015 is not on the first service detail line for Clinic Visits/ Encounter rate, claims are denied with the Explanation of Benefits (EOB) message, "29h - Non-Covered." The EOB message is not clear.

Solution

Effective December 20, 2019, the new EOB message for claims denied because CPT Code T1015 is not on the first service detail line for Clinic Visits/ Encounter rate, will state "Invalid sequence of T1015 service-Please correct and resubmit the claim." CPT code T1015 for Clinic Visits/Encounters must be billed by providers on the first service detail line to avoid denials.

Action Needed by Provider

Code T1015 **MUST** be billed on the first service line for Clinic Visits/Encounters in order to be reimbursed. If not billed appropriately providers must resubmit denied claims to BCBSTX upon receipt of the EOB message indicating that the T1015 code is not on the first service line.

Have Questions?

Contact	Phone Number	Web/Email/Mail
Customer Service STAR and CHIP	1-877-560-8055	
Customer Service STAR Kids	1-877-784-6802	
Provider Relations	1-855-212-1615	TexasMedicaidNetworkDepartment@bcbstx.com www.bcbstx.com/provider/medicaid
STAR, CHIP and STAR Kids Claims	1-877-560-8055	Electronic Data Interchange (EDI): www.availity.com Payor ID: 66001
Appeals and Complaints	1-877-560-8055 Provider	Appeal Form: www.bcbstx.com/provider/pdf/provider_dispute.pdf GDPTXMedicaidAG@bcbsnm.com Blue Cross and Blue Shield of Texas Complaints and Appeals P.O. Box 660717 Dallas, TX 75226-0717 State Email: HPM_Complaints@hpsc.state.tx.us

By clicking this link, you will go to a new website/app ("site"). This new site may be offered by a vendor or an independent third party. The site may also contain non-Medicare related information. In addition, some sites may require you to agree to their terms of use and privacy policy.