



Part B IVR Operating Guide (877) 567-9230

Operating Hours:

<http://www.trailblazerhealth.com/Tools/Notices.aspx?ID=13470>

Provider Authentication Elements Required

- National Provider Identifier (NPI).
- Provider Transaction Access Number (PTAN).
- Last five digits of the Tax Identification Number (TIN).

Steps for Entering the Provider Elements

- To enter an NPI, simply press the numbers on your telephone keypad followed by # (pound key).
- To enter a PTAN, the following telephone pad identifies the appropriate sequence that should be keyed to represent the alphabetic characters indicated.

Example: The PTAN Z01234 should be entered as *1201234#.

A *21	B *22	C *23	D *31	E *32	F *33	G *41	H *42	I *43	J *51	K *52	L *53	M *61
N *62	O *63	P *71	Q *11	R *72	S *73	T *81	U *82	V *83	W *91	X *92	Y *93	Z *12

- An IVR PTAN conversion tool was created to assist providers entering the PTAN into the IVR. In the conversion tool, simply type the PTAN, press the convert button, and the tool will automatically convert the PTAN to the numbers/characters required by the IVR.
<http://www.trailblazerhealth.com/Tools/IVRTools.aspx>
- To enter the TIN, simply press the last five digits of the TIN.

Patient's Medicare Number

- The IVR accepts all Medicare numbers except those ending in a double-letter suffix starting with the letter T. Example: TA, TB, TM.
- The Medicare number will be entered as an alphanumeric number. The provider will need to make three selections to enter a letter:
 1. Press * (star key). (This tells the system you are about to enter a letter.)
 2. Select the number on the telephone keypad that corresponds to the letter you want to enter.
 3. Select the position where the letter is located.

Example: To enter the letter **H**, press *42. To enter the letter **V**, press *83.

Medicare Number Examples:

Suffix: 123456789A would be entered as: 123456789*21#.

123456789AB would be entered as: 123456789*21*22#.

A *21	B *22	C *23	D *31	E *32	F *33	G *41	H *42	I *43	J *51	K *52	L *53	M *61
N *62	O *63	P *71	Q *11	R *72	S *73	T *81	U *82	V *83	W *91	X *92	Y *93	Z *12

- If a patient's Medicare number begins with a letter, it is a Railroad Medicare number. Please call Railroad Medicare at (877) 288-7600. For Indian Health Service (IHS) railroad claims, please call the IHS customer service line at (866) 448-5894.

Steps for Entering the Patient Name

- Enter the first six letters of the patient's last name (as shown on the Medicare card) followed by # (pound key). Next, enter the first letter of the patient's first name.
- An IVR name conversion tool was created to assist providers with entering the patient's name into the IVR. In the conversion tool, simply type the patient's last name (including titles such as Jr., Sr. and III), press the **Convert** button, and the tool will automatically convert the name into the numbers required by the IVR.
<http://www.trailblazerhealth.com/Tools/IVRTools.aspx>

Note: Names that contain special characters such as hyphens or apostrophes cannot be entered into the IVR. Callers should contact Customer Service for assistance if the patient's name contains special characters.

Main Menu of the IVR

- Press **1** for Medicare **eligibility** and benefits.
- Press **2** for Medicare **claim** status.
- Press **3** for Medicare **payment** status.
- Press **4** to request a copy of a **remittance notice**.
- Press **5** for **general Medicare** information.
- Press **7** for **Provider Enrollment**.
- Press **#** to **repeat** this menu.

Eligibility

Because of the Privacy Act, correct patient information must be provided to receive eligibility information. The information provided is current at the time of the IVR call.

The following eligibility menu is available:

- Press **1** for a **complete list** of all eligibility information.
- Press **2** for **Part B benefits** (effective/termination dates and deductible remaining to be met for current and prior year).
- Press **3** for **Medicare Advantage** managed care plans and **Medicare secondary payer** status for employer group health plan:
 - Press **1** for Medicare Advantage plans.
 - Press **2** for Medicare secondary payer plans.
- Press **4** for **preventive services**. (Please check all codes.)
- Press **5** for **home health benefits**.

- Press **6** for **hospice benefits**.
- Press **7** for **Part A benefits** (effective/termination dates, date of last billing, hospital days remaining, skilled nursing days, psychiatric days and lifetime reserve days).
- Press **8** for **speech, physical and occupational therapy caps**.
- Press **9** to check benefits under a different Medicare number.
- Press * (star key) to return to the main menu.
- Press # to repeat.

Preventive Services options

The following selections are available for verification:

- Press **1** for colorectal cancer screening.
- Press **2** for mammography screening.
- Press **3** for pelvic exam screening.
- Press **4** for Pap screening.
- Press **5** for pneumonia vaccine.
- Press **6** for prostate cancer screening.
- Press **7** for fecal occult blood test.
- Press **8** for cardiovascular disease screening.
- Press **9** for glaucoma screening.

Once an option is chosen the IVR will provide a list of procedure codes for the caller to choose to receive status on.

Eligibility Tips

- If the PTAN is terminated, the caller will not be able to get eligibility status.
- If the patient has a current MSP, home health or hospice record and an older record is also on file, the IVR will only give the most current insurance information to the caller.

Claim Status

Once the caller has received claim status, the following claims menu is available:

- Press **1** for detailed claim information.
- Press **2** to request a duplicate remittance. (IVR will now allow callers to request a duplicate remittance on unprocessable claims.)
- Press **3** for more claims on this date.
- Press **4** to change the service date.
- Press **5** to change the HICN.
- Press **6** to change the NPI and PTAN.
- Press # to repeat the claim information.
- Press * to return to the main menu.

Claim Status Tips

- If the PTAN is terminated, the IVR will allow the caller to get claim status.
- If the claim in question falls during an incarcerated, deported or alien period on the Common Working File (CWF), the IVR will refer the caller to the penal authorities (incarcerated) or Social Security (alien or deported). If the claim has a QJ modifier (which allows Medicare to approve the claim and allow the penal authority to reimburse later), the

- The IVR will not give claim status on claims that are Demo 54 services.
- Beginning January 2011, the IVR has been enhanced to give callers the opportunity to request a duplicate remittance on unprocessable claims.

Financial Information

The following check menu is available:

- Press **1** for the number of pending claims and the pending claims amount.
- Press **2** for the number of claims approved to pay and the approved-to-pay amount.
- Press **3** for the last five checks issued.
- Press **4** for Financial Control Number (FCN) information.
- Press **5** for payment information by check number.

Financial Information Tips

- If the PTAN is terminated, the IVR will allow the caller to get financial information.
- Callers may request to receive status on up to 25 checks. These will be given in increments of five.

General Information

The IVR will provide the following:

- Press **1** for important notices.
- Press **2** for important telephone numbers and related hours of operation.
- Press **3** for important address information.
- Press **4** for a remittance code lookup.
- Press **5** for appeal rights.
- Press ***** to return to the main menu.

Provider Enrollment

The following is available through the IVR:

- Press **1** to check the status of your NPI in the Provider Enrollment, Chain and Ownership System (PECOS).
- Press **2** to check the status of your enrollment application.
- Press **3** to receive the mailing address for paper applications.
- Press **4** to receive the mailing address for Web applications.
- Press **5** to receive information on confirmation letters and written inquiries.
- Press **6** to receive information on corrective action appeals.
- Press **7** to receive information on provider enrollment corrections.