



## Tips for Submitting Clean Claims

- **Make sure you are using the correct form: Residential Facility or Family Care Services.** If there is any question about which form to use. Contact NorthernBridges provider network development for clarification.
- **Follow the associated claim form “key” to determine where the information for each field is found – some fields use codes indicated on the keys.** The key contains certain information that must be entered, i.e. on the residential form “Type of Bill” and “Discharge Status”, are three digit codes, not words.
- **The statement period spaces on the form are for the time period for which you are billing.** It can be a week, 2 weeks, or a month, or even an odd number of days. Make sure your service “From” and “To” dates, are within the statement period, and do not put down a statement period end date that is in the future. Also, do not submit claims for overlapping statement periods. If your claim is for services from the 1<sup>st</sup> to the 15<sup>th</sup>, then your next claim statement period should start on the 16<sup>th</sup>.
- **Service Codes and HIPAA codes refer to the same thing – the alphanumeric code for the service you will be delivering to the NorthernBridges member.** The line item(s) on the second page of your authorization letter lists the code you are authorized to submit claims for. It is the same as the service / HIPAA code listed in your contract.
- **Do not submit claims for times in the “future” – we can only accept claims for services after they have been rendered.** Your authorizations may be for several months, but the statement period, and service “From” and “To” dates need to be for services and time periods already delivered.
- **Be sure to check with your care management team to receive sufficient number of authorized units and time period for services being claimed for each HIPAA / SERVICE code.** For any questions regarding authorizations, contact the care manager on the authorization letter.
- **Enter the Service / HIPAA code exactly as it is on the authorization letter.** On some services, there may be one or more “two digit” modifiers shown on the authorization letter if they are associated with that code. If there is a modifier on your authorization letter, copy it into the modifier space. If there is no modifier, leave that space blank
- **Claim for units of service exactly as they appear on your authorization letter – i.e. some codes are in 15 minute segments rather than by the hour, and / or authorized in other units of service.** Look in the description column on your authorization letter to determine the unit of service for your service / HIPAA code.

- **Claim for whole units of service only, not fractional units – claims with fractional units will be rejected.**
- **Make sure your Rendering Service Location is on file with NorthernBridges, and fill that space out fully on the form. If it is the same as the billing address, just write “same” in that space.**
- **Make sure you use the same Tax Identification Number that is on file with NorthernBridges.**
- **Mail Claims to:**  
**NorthernBridges Claims Processing**  
**PO Box 309**  
**Theinsville, WI 53092**
- **Do not mail claims to Hayward, or any of the hub offices. NorthernBridges headquarters and Hubs We cannot handle claims, and must return them to the sender.**
- **Do not submit invoices to NorthernBridges . We cannot process invoices, only claims. If you need help becoming familiar with the claims submission process, contact NorthernBridges provider network development department.**
- **When calling about the status of claims, please call NorthernBridges claims processing at: 800 508 6967. It is best if you have the member identification number, full name, and date of birth to properly identify the claim in question when you call.**