Attachment 4.19E

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: <u>TENNESSEE</u>

TIMELY - CLAIMS PAYMENT - DEFINITION OF CLAIM

I. The State of Tennessee defines a claim as either [1] a bill for services, or [2] a line item of service. Tennessee accepts the following HIPAA-compliant standardized formats in either hard copy [paper] or electronically for claims of services.

Paper Claims:

<u>Claim Type</u> Professional Institutional Dental <u>Claim Format</u> CMS 1500 CMS 1450 (UB-92) ADA-2000

Electronic Claims:

<u>Claim Type</u> Professional Institutional Dental Pharmacy <u>Claim Format</u> ANSI X.12 837P version 4010A1 ANSI X.128371 version 4010A1 ANSI X.12 837D version 4010A1 NCPDP version 5.1 for POS transaction NCPDP version 1.1 for batch transactions

- II. Claim Signature/Certification In submitting claims for reimbursement the claim signature/certification block must contain one of the following signature methods:
 - Handwritten signature
 - Typewritten signature
 - Rubber stamp signature
 - Computer printed signature
 - Electronic signature

Note: Either full name or initials is acceptable.

Provider authorization for the signature on claims submitted to Tennessee is receipt and acceptance of payment with an itemized remittance advice for these claims; i.e., check endorsement.

Effective Date: 04/01/06