

Virginia Provider Communications

Attention Professional Providers: Important update regarding timely filing requirement for Anthem's commercial and Medicare Advantage plans

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As required by the Ethics and Fairness in Carrier Business Practices Act, all health insurance companies licensed to do business in Virginia making material changes to existing agreements or exhibits must do so by way of a formal amendment process. Through an amendment dated July 15, 2019, Anthem Blue Cross and Blue Shield and affiliate HealthKeepers, Inc. notified professional providers about new timely filing requirements effective November 1, 2019. The July notification indicated that a 90-day timely filing requirement would apply to all professional claims - regardless of date of service - effective November 1, 2019.

Anthem has made the business decision to make the 90-day timely filing requirement effective for professional claims received with a date of service ON or AFTER November 1, 2019. We will NOT implement the requirement for professional claims with dates of service prior to November 1, 2019.

Please note that the 90-day timely filing requirement applies to commercial and Medicare Advantage professional claims only. Claims for members enrolled in Anthem HealthKeepers Plus benefit plans (Medicaid and the Commonwealth Coordinated Care Plus commonly referred to as Anthem CCC Plus) are not impacted. Additionally, the amendment does **NOT** apply to facility/hospital contracts.

If you have further questions, please contact your Anthem network manager.

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