

Important CareAdvantage Provider Announcement

Date: September 1, 2010

**Subject: Change in Timely Submission for
CareAdvantage Claims**

Effective January 1, 2011, the maximum time period for submission of Medicare claims is one year after the date of service, per an amendment by the Center for Medicare and Medicaid Services (CMS).

What You Need to Know

To receive full approved payment amounts, all CareAdvantage claims must be submitted to the Health Plan of San Mateo (HPSM) within one year from the date of service. Claims received after one year will be denied.

Adjustments to Claims Edits

HPSM will adjust our claims edits to reflect the following:

Claims with dates of service:

- **Prior to October 1, 2009** will be subject to the previous timely filing rules
- **October 1, 2009 through December 31, 2009** received after **December 31, 2010**, will be denied as being past due the timely filing deadline
- **January 1, 2010 and later** received more than one calendar year beyond the date of service, will be denied as being past due the timely filing deadline

If you have any questions about this change, please call HPSM's Claims CareAdvantage Development Unit at 650-616-2137 or HPSM's Claims Department at 650-616-2056.