

## Internal Medicine Coding Alert

### Reminder: Medicare Requires Claims to be Submitted With Eight-Digit Date Format by April

The Health Care Financing Administration (HCFA) recently mailed a letter from Administrator **Nancy Ann Min-DeParle** indicating that, despite previous concerns, Medicare will be able to process claims on Jan. 1, 2000. Now, the administration wants to be sure you will be ready too.

For those of you who rely on computer systems, we believe the greatest risk is that your systems will not be able to bill [Medicare] for services, reads the letter, included in a HCFA notice published in the Federal Register on Feb. 4, 1999.

According to the notice, any claims submitted to Medicare carriers after April 5 of this year without an eight-digit date format (xx/xx/xxxx) will be returned to the provider.

Although HCFA originally made the longer format a requirement of all claims submitted by January 1, 1999, practices were given an extension to allow more time to get their billing systems up to date.

Now, HCFA is taking even more steps to ensure that practices are bringing their computers systems into Y2K compliance and that billing operations and patient care are not affected, says **Joe Broseker**, the administrations Y2K coordinator.

For practices that dont have software capable of submitting claims with an eight-digit format, Medicare contractors are making compliant billing software available at no cost or minimal cost.

Part B contractors should contact their carriers provider representative for more information, Broseker says.

In addition to the letter to providers and information posted on its Web site [www.hcfa.gov](http://www.hcfa.gov) the administration has established a Y2K Speakers Bureau and will make speakers available to health care provider organizations that need more detailed information about preparing for the year 2000, Broseker says.

For more information, providers should contact their local Medicare carrier representative.