

June 17, 2016

Announcement 1167

Attention Provider Type 54: Explanation of Benefits from Other Health Care Provider Not Required

Effective with claims processed on or after June 20, 2016, provider type 54 (Targeted Case Management) is no longer required to submit an Explanation of Benefits (EOB) or denial letter from the other health care (OHC) coverage provider. The Billing Guidelines for provider type 54 have been updated with this information.