



Alaska Medical Assistance
Xerox State Healthcare, LLC
PO Box 240808
Anchorage, AK 99524-0808
Phone: 907.644.6800
Toll-free: 800.770.5650
<http://medicaidalaska.com>

Remittance Advice (RA) Message

Title: **NOS codes Require Descriptor**

Issue Date: 06/09/2014

Run Length: 8 weeks

Provider Type(s): 008, 010, 020, 021, 025, 033, 034, 035, 036, 039, 040, 041, 042, 043, 044, 045, 046, 047, 048, 049, 050, 051, 054, 055, 056, 057, 058, 061, 063, 064, 066, 068, 071, 072, 074, 075, 076, 078, 080, 081, 095, 105, 108, 114, 116, 117

Message: Reminder: **Electronic** claims submitted with a "Not Otherwise Classified", "Unspecified" or other non-specific CPT procedure code must include a descriptor. Failure to include a descriptor will result in rejection of the claim.

Questions? Contact Provider Inquiry at 907.644.6800, option 1, 1, or 800.770.5650, option 1, 1, 1 (toll-free in Alaska).