



Claims Payment Systemic Errors (CPSE) Update Report

Confidential and Proprietary

As of: July 15, 2023

Listed below are current Claims Payment Systemic Errors (CPSE). This log is updated monthly. Please review this log for CPSE updates on status, target dates for reprocessing and resolutions. If you still have questions after reviewing the log, please call Provider Services at 1-800-488-0134.

| Unique ID and Description of CPSE | Date CPSE was First Identified | Billing Provider Type(s) Impacted by CPSE (select all that apply) | Timeline for Fixing CPSE | Date(s) and/or Date Span(s) of Corrected Claims Adjustments | CPSE Status |
|--|--------------------------------|---|---|---|-------------|
| <p>Unique ID TFS878672: Confirmed CPSE</p> <p>Claims billed with Place of Service preceding '0' (i.e., 01-09) are denying X50 (Codes does not have a contract fee) incorrectly and should not deny if billed as 2-digit values.</p> | 4/5/2023 | 00-All provider types | <p>4/27/2023 5/17/2023</p> | <p>Target claims reprocessing date 5/31/2023 – 6/7/2023 Target claims reprocessing date 6/21/2023 - 6/28/2023 Claims reprocessed on 6/27/2023</p> | Completed |
| <p>Unique ID CS00296191: Confirmed CPSE</p> <p>Pathology claims for MyCare Opt in enrollees were not applying the 20% Medicare coinsurance that would then be the liability of the enrollee's Medicaid plan. The Medicare coinsurance is not billable to the enrollee.</p> | 4/7/2023 | <p>01-Hospital (Outpatient) 79-Independent Diagnostic Testing Facility 80-Independent Laboratory</p> | 5/17/2023 | <p>Target claims reprocessing date 5/31/2023 – 6/28/2023 Target claims reprocessing date 6/21/2023 - 6/28/2023 Claims reprocessed on 6/23/2023</p> | Completed |
| <p>Unique ID CS00313966: Confirmed CPSE</p> <p>Oxygen concentrator HCPCS codes E1390U1 and E1392 billed together should not be denied and pay per diem \$140.</p> | 4/20/2023 | 76-Durable Medical Equipment Supplier | 5/10/2023 | <p>Target claims reprocessing date 6/14/2023 - 6/21/2023 Claims reprocessed on 6/20/2023</p> | Completed |
| <p>Unique ID CS00313867: Confirmed CPSE</p> <p>Physician services billed with code 90792 (Psychiatric diagnostic evaluation with medical services) in Place of Service 21 are currently processing without an inpatient prior authorization. This is a potential overpayment.</p> | 4/27/2023 | <p>20-Physician/osteopath, individual 21-Professional Medical Group 24-Physician Assistant 65-Clinical Nurse Specialist Individual 72-Nurse Practitioner Individual</p> | 5/24/2023 | <p>Target claims reprocessing date 6/28/2023 – 7/5/2023 The system has been corrected on 5/24/2023 and claims will not be reprocessed. CareSource made a business decision not to reprocess claims that would result in a recoupment.</p> | Completed |
| <p>Unique ID CS00305798: Confirmed CPSE</p> <p>Procedure code 92065 (Orthoptic training; performed by a physician or other qualified health care professional) billed with Place of Service 31, 32, and 33 is denying VCP (Please submit the vision claim to correct payer) and should process as covered.</p> | 4/27/2023 | <p>20-Physician/osteopath, individual 35-Optometrist Individual</p> | 5/31/2023 | <p>Target claims reprocessing date 7/5/2023 - 7/12/2023 Claims reprocessed on 6/22/2023</p> | Completed |
| <p>Unique ID CS00309528: Confirmed CPSE</p> <p>Covid-19 lab test HCPCS codes U0003, U0004, and U0005 are no longer covered effective 4/1/2023. This is a potential overpayment.</p> <p>Unique ID TFS927171:</p> <p>After further review by CareSource Team, Covid-19 lab test HCPCS codes U0003, U0004, and U0005 are no longer covered effective after 5/11/2023. Claims with date of services 4/1/2023 - 5/11/2023 should not deny as non-covered.</p> | 5/2/2023 | <p>20-Physician/osteopath, individual 72-Nurse Practitioner Individual 80-Independent Laboratory</p> | <p>5/31/2023 7/26/2023</p> | <p>Target claims reprocessing date 7/5/2023 – 7/12/2023 Target claims reprocessing date 8/25/2023 - 9/1/2023</p> | In Process |
| <p>Unique ID TFS903852: Confirmed CPSE</p> <p>Anesthesia claims billed with additional modifiers should not deny for X55 (Proc/Mod Combination Not Valid).</p> | 5/5/2023 | <p>20-Physician/osteopath, individual 21-Professional Medical Group</p> | 5/25/2023 | <p>Target claims reprocessing date 7/5/2023 - 7/12/2023 Claims reprocessed on 6/30/2023</p> | Completed |
| <p>Unique ID CS00320072: Confirmed CPSE</p> <p>The 2% Medicare sequestration is being applied to MyCare Waiver claims in error. The 2% reduction is to be applied to Medicare Payments. MyCare Waiver services are a Medicaid benefit therefore, the reduction should not be applied.</p> | 5/17/2023 | <p>45-Waiver Services Organization 74-Assisted Living Facilities 76-Durable Medical Equipment Supplier 83-Wheelchair Van</p> | 6/1/2023 | <p>Target claims reprocessing date 7/5/2023 - 7/12/2023 Claims reprocessed 6/29/2023</p> | Completed |
| <p>Unique ID CS00316111: Confirmed CPSE</p> <p>Effective 11/1/2022, breast augmentation codes 15736, 15830, 19350, and 21172 should deny as non-covered and codes 11970, 15777, 19325, 55980, and 57292 should no longer deny for non-covered.</p> | 5/18/2023 | <p>01-Hospital (Outpatient) 20-Physician/osteopath, individual 24-Physician Assistant</p> | 6/19/2023 | <p>Target claims reprocessing date 7/19/2023 - 7/26/2023 Claims reprocessed on 7/10/2023</p> | Completed |
| <p>Unique ID CS00319824: Confirmed CPSE</p> <p>Effective 5/1/2022, code T1001 (Nursing assessment/evaluation) should be covered 1 visit every 56 days.</p> | 5/19/2023 | 16 & 60-Home Health Agency | <p>6/19/2023 7/5/2023</p> | <p>Target claims reprocessing date 7/19/2023 – 7/26/2023 Target claims reprocessing date 8/9/2023 - 8/16/2023</p> | In Process |

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|---|--------------------------------|---|--------------------------|--|---------------------|
| <p>Unique ID CSO0322279: Confirmed CPSE Not CPSE</p> <p>Claims billed with code H2019 in Place of Service 11 & 53 are pricing at the community rate and pays at a higher rate rather than the office rate causing an overpayment.</p> <p>After further review by the CareSource Team, this item is not a CPSE; the number of billing providers impacted was less than five.</p> | 5/22/2023 | 84-Ohio Department of Mental Health (Community Mental Health) Provider- 95-ODADAS Certified/Licensed (SUD) Treatment Program | 6/22/2023 | Target claims reprocessing date 7/19/2023 - 7/26/2023 | Remove from the Log |
| <p>Unique ID CSO0319387: Confirmed CPSE</p> <p>Behavioral health claims were matched with prior authorization on file but system did not process the claims causing claims to deny incorrectly.</p> | 5/23/2023 | 84-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program | 6/23/2023 | Target claims reprocessing date 7/28/2023 - 8/4/2023 Claims reprocessed on 6/23/2023 | Completed |
| <p>Unique ID CSO0321972: Confirmed CPSE</p> <p>MyCare Opt In Home Health Services should be applying the 20% Medicare coinsurance only for equipment and all other Home Health Services should be \$0 for the Medicare portion.</p> | 5/24/2023 | 17 & 60-Home Health Agency | 7/3/2023 | Target claims reprocessing date 8/9/2023 - 8/16/2023 | In Process |
| <p>Unique ID CSO0323550: Confirmed CPSE</p> <p>Claims rejecting for invalid information and procedure code when billed with modifiers JA, JB, and JE.</p> | 5/30/2023 | 00-All provider types | 6/8/2023 7/7/2023 | Target claims reprocessing date 7/12/2023 - 7/19/2023 The system has been corrected on 7/7/2023 and claims will not be reprocessed. The impacted providers will need to resubmit the rejected claims. | Completed |
| <p>Unique ID CSO0325530: Confirmed CPSE</p> <p>E&M codes 99418, 99425, 99427, 99437, G0316-G0318, G3003 are denying P06 (E-M code inappropriately reported) in error and should process.</p> | 5/30/2023 | 20-Physician/osteopath, individual 21-Professional Medical Group 24-Physician Assistant 72-Nurse Practitioner Individual | 6/28/2023 | Target claims reprocessing date 8/2/2023 - 8/9/2023 Claims reprocessed on 6/30/2023 | Completed |
| <p>Unique ID CSO0322056: Confirmed CPSE</p> <p>Hearing code V5160 for MyCare Opt In is paying and should deny as non covered since this code is not covered under Medicare.</p> | 6/5/2023 | 20-Physician/osteopath, individual 43-Audiologist, individual | 6/14/2023 | Target claims reprocessing date 7/19/2023 - 7/26/2023 | In Process |
| <p>Unique ID CSO0318580: Confirmed CPSE</p> <p>Claims are denying for X94 (Service Requires Authorization) when the provider ID is not matching to the authorization on file.</p> | 6/7/2023 | 00-All provider types | 7/7/2023 | Target claims reprocessing date 8/9/2023 - 8/16/2023 Claims reprocessed on 7/11/2023 | Completed |
| <p>Unique ID TFS922673: Confirmed CPSE</p> <p>Depression Screening code G0444 for MyCare Opt in claims are applying cost share and should not since this is a preventive service and not subject to a member cost share.</p> | 6/12/2023 | 20-Physician/osteopath, individual 24-Physician Assistant 72-Nurse Practitioner Individual | 7/12/2023 7/13/2023 | Target claims reprocessing date 8/16/2023 - 8/23/2023 | In Process |
| <p>Unique ID CSO0330402: Unique ID CSO0336054: Confirmed CPSE</p> <p>Hemoglobin code 83036 billed with diagnosis codes Z68.53 and Z68.54 is denying for AV7 (Avalon Proc invalid with diagnosis) in error and should process.</p> | 6/13/2023 | 80-Independent Laboratory | 7/13/2023 | Target claims reprocessing date 8/16/2023 - 8/23/2023 | In Process |
| <p>Unique ID CSO0325566: Confirmed CPSE</p> <p>FQHC and Rural clinic claims billed with services and diagnosis codes not related to behavior health are denying with denial reason code BOL (Bill to Ohio Rise) and should not deny since these are not Ohio Rise services.</p> | 6/20/2023 | 05-Rural Health Clinic 12-Federally Qualified Health Center | 7/3/2023 | Target claims reprocessing date 8/9/2023 - 8/16/2023 | In Process |

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| Unique ID CSO0327381: Confirmed CPSE Dialysis claims did not pay the full member's liability when Medicare is the primary payer. | 6/22/2023 | 01-Hospital (IP & OP) 46-Ambulatory Surgery Center | 8/2/2023 | Target claims reprocessing date 9/1/2023 - 9/15/2023 | In Process |
| Unique ID CSO0331741: Confirmed CPSE Claims denied for BOL (Bill to Ohio Rise) in error once the member reaches 21 years of age. Ohio Rise is for members who are 0-20 years of age. | 6/27/2023 | 01-Hospital (IP & OP) 20-Physician/osteopath, individual 24-Physician Assistant 37-Licensed Independent Social Worker (LISW) 42-Psychologist, individual 47-Professional Clinical Counselor 52-Independent Marriage and Family Therapist 54-Licensed Independent Chemical Dependency Counselor 72-Nurse Practitioner Individual 84-Ohio Department of Mental Health (Community Mental Health) Provider | 7/27/2023 | Target claims reprocessing date 8/23/2023 - 8/30/2023 | In Process |
| Unique ID CSO0335869: Confirmed CPSE The following pain management codes 64490, 64491, 64492, 64493, 64494, 64495, 64633, 64634, 64635, and 64636 are denying for UM1 (no authorization) and should not deny when authorization is on file. | 6/30/2023 | 01-Hospital (Outpatient) 20-Physician/osteopath, individual 46-Ambulatory Surgery Center | 8/2/2023 | Target claims reprocessing date 9/1/2023 - 9/15/2023 | In Process |
| Unique ID CSO0326710: Confirmed CPSE The following hearing aid codes are processing using the incorrect rates and should pay based on the member's age. V5171, V5172, V5181, V5211, V5212, V5213, V5214, V5215, V5221, V5247, V5252, V5253, V5256, V5257, V5260, and V5261 | 7/5/2023 | 43-Audiologist, individual | 7/20/2023 | Target claims reprocessing date 8/18/2023 - 9/1/2023 | In Process |
| Unique ID CSO0334114: Confirmed CPSE Inpatient hospice professional claims are denying for authorization when there is an inpatient hospice authorization on file. | 7/5/2023 | 20-Physician/osteopath, individual 72-Nurse Practitioner Individual | 8/2/2023 | Target claims reprocessing date 9/1/2023 - 9/15/2023 | In Process |
| Unique ID CSO0337258: Confirmed CPSE 2023 diagnosis, procedure codes, and modifier codes updates effective 4/1/2023 were not configured correctly and claims are denying and/or paid incorrectly. This is a potential overpayment/underpayment. | 7/5/2023 | 01-Hospital (IP & OP) | 7/10/2023 | Target claims reprocessing date 8/9/2023 - 8/16/2023 | In Process |
| Unique ID TFS932841: Confirmed CPSE Prior authorization is not required for the following procedure codes and DME codes billed with Place of Service 31, 32, or 33 that includes both participating and out-of-network providers. However, prior authorization is required for both participating and out-of-network providers if the codes itself requires prior authorization in an outpatient setting. 11604, 11719, 15273, 15274, 27613, 72040, 73140, 74019, 80305, 93923, 97606, 99291, 99344, 99345, 99347, 99348, 99417, 99437, 99453, 99484, 99496, 99498, A4394, A4419, A6445, E0960, E0995, E2222, E2390, E2391, K0018, K0042, K0044, K0047, K0051, K0071, K0072, K0733 | 7/7/2023 | 72-Nurse Practitioner Individual 76-Durable Medical Equipment Supplier | 8/9/2023 | Target claims reprocessing date 9/8/2023 - 9/22/2023 | In Process |
| Unique ID CSO0336682: Confirmed CPSE Effective 1/1/2023, the following vision codes should not deny for VCP (Pls submit vision claim to correct payer) if billed with a routine vision service as a primary diagnosis code. 92002, 92004, 92012, 92014, 92015, 92310, 92311, 92312, 92313, 92314, 92315, 92316, 92317, 92325, 92326, 92358, 92065, S0620, S0621, T1015, 99172, 99173, 99174, S3000, and S9150 | 7/7/2023 | 35-Optometrist Individual 75-Optician | 8/7/2023 | Target claims reprocessing date 8/8/2023 - 8/22/2023 | In Process |

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|--|--------------------------------|---|--------------------------|---|-------------|
| <p>Unique ID CSO0335477: Confirmed CPSE</p> <p>The following Covid vaccine codes should deny as non-covered effective 4/18/2023. This is a potential overpayment to providers.</p> <p>91300, 0001A, 0002A, 0003A, 0004A, 91301, 0011A, 0012A, 0013A, 91305, 0051A, 0052A, 0053A, 0054A, 91306, 0064A, 91307, 0071A, 0072A, 0073A, 0074A, 91308, 0081A, 0082A, 0083A, 91309, 0091A, 0092A, 0093A, 0094A, 91311, 0111A, 0112A, 0113A</p> | 7/11/2023 | <p>01-Hospital (IP & OP) 20-Physician/osteopath, individual 21-Professional Medical Group 24-Physician Assistant 50-Clinic 72-Nurse Practitioner Individual 80-Independent Laboratory</p> | 8/11/2023 | Target claims reprocessing date 9/13/2023 - 9/20/2023 | In Process |
| <p>Unique ID CSO0336740: Confirmed CPSE</p> <p>The following Covid vaccine codes are denying with denial reason code X50 (Code does not have a contracted fee) and should be payable effective 4/18/2023.</p> <p>0171A 0172A 0141A 0142A 0121A 0151A</p> | 7/11/2023 | <p>01-Hospital (IP & OP) 20-Physician/osteopath, individual 21-Professional Medical Group 24-Physician Assistant 50-Clinic 72-Nurse Practitioner Individual 80-Independent Laboratory</p> | 8/11/2023 | Target claims reprocessing date 9/13/2023 - 9/20/2023 | In Process |
| <p>Unique ID CSO0323981: Confirmed CPSE</p> <p>The following codes S9482, S9485, and S9884, are denying with denial reason code 2NG (Reprocess when error is corrected) and should be payable effective 7/1/2022.</p> | 7/13/2023 | <p>37-Licensed Independent Social Worker (LISW) 54-Licensed Independent Chemical Dependency Counselor 84-Ohio Department of Mental Health (Community Mental Health) Provider</p> | 7/17/2023 | Target claims reprocessing date 8/18/2023 - 9/1/2023 | In Process |