



UPDATES OF REPORTED CLAIMS PAYMENT SYSTEMIC ERRORS

Updated: November 15th, 2023

Listed below are current Claims Payment Systemic Errors (CPSE). The issues are reported in ascending order with the most recently identified issue listed last. This log is updated monthly. Buckeye Health Plan encourages you to review this log often and prior to contacting Buckeye Health Plan Provider Contact Center. If you still have questions, please call 866-296-8731 to speak to a Buckeye Health Plan Provider Claims Assistance Representative.

Unique ID and Description of CPSE	Line of Business	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>Confirmed Issue 360: CIA-5898 E&M Services billed by Chiropractors are denying when billed on the same day as treatment is rendered.</p> <p>Updated Description: Confirmed Issue 360: CIA-5898 E&M and related diagnostic imaging services billed by Chiropractors are denying when billed on the same day as treatment is rendered.</p>	Medicaid & MyCare	06/08/23	27-Chiropractor Individual	Initial system fix went into production on 09/19/23. However, it was discovered that related diagnostic imaging services require further configuration. Additional time is needed for this fix. This is estimated to be complete by 01/31/24. The description for the issue has been updated.	Manual work-around in place since 07/14/23. Claim adjustments were completed between 07/24/23 - 07/31/23 and on 08/28/23. Further claim adjustments will be completed after the additional system fix is in production for the diagnostic imaging services. Fallout claims not captured through manual work-around will be adjusted between 03/01/24 - 04/15/24.	Fix in process
Confirmed Issue 368: CIA-6076 Claims are applying incorrect amount to patient liability in error.	MyCare	08/15/23	86-Nursing Facility; 55-Waivered Services Individual ; 45-Waivered Services Organization; 44-Hospice	System fix completed on 08/17/23.	Claim adjustments were completed between 08/21/23 - 09/11/23, 09/18/23 - 10/13/23, and 10/16/23 - 10/26/23. Adjustments have spanned over 30 days due to identification and correction of fallout claims. This issue is resolved and will be removed from the December 2023 submission.	Resolved

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Confirmed Issue 369: CIA-6019 MyCare Inpatient claims are paying incorrect 2023 rates.	MyCare	08/17/23	01-Hospital (Inpatient)	System fix completed on 09/19/23.	Claims adjustments were completed between 10/17/23 - 11/02/23. This issue is resolved and will be removed from the December 2023 submission.	Resolved
Confirmed Issue 372: CIA-6107 Claims billing CPT 20610 are paying in error.	Medicaid & MyCare	08/28/23	73-Certified Registered Nurse Anesthetist (CRNA) Individual, 20-Physician/osteopath, individual	System fix is in process and estimated to be completed by 11/30/23.	Manual work-around in place as of 09/29/23. Due to additional time needed for system fix, claim adjustments are estimated to be completed between 02/01/24 - 02/28/24.	Fix in Process
Confirmed Issue 374: CIA-6138 Inpatient claims billing primary diagnosis code beginning with letter "Z" are denying for inappropriate diagnosis code billed in the primary position in error. Updated Description: Confirmed Issue 374: CIA-6138 Claims billing primary diagnosis code beginning with letter "Z" are denying for inappropriate diagnosis code billed in the primary position in error.	Medicaid & MyCare	08/07/23	01-Hospital (IP & OP)	After extensive analysis of this edit, it was determined that there is a secondary diagnosis code edit which appropriately denies claims for diagnosis code incorrectly coded. We determined the diagnosis code edit is valid, but providers may experience more CARC 16/RARC M64 denials vs the current CARC 16/RARC MA63 denials for diagnosis editing	As a result of the additional analysis, claim adjustments are not needed. This issue is resolved and will be removed from the December 2023 submission.	Resolved

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Confirmed Issue 375: CIA-6091 A portion of the July 1, 2023, Nursing Facility rates were not loaded timely due to receiving multiple versions.	Medicaid	10/04/23	86-Nursing Facility	System fix on 10/05/23	Claim adjustments were partially completed between 10/16/23 - 11/06/23. Remaining fallout claims are estimated to be complete between 11/15/23 - 12/15/23.	Fix is complete and claim adjustments are in process.
Confirmed Issue 377: CIA-6091 Nursing Facility claims for dates of service on or after 07/01/23 are paying over billed charges in error.	Medicaid & MyCare	10/04/23	86-Nursing Facility	System fix completed on 10/23/23	Claim adjustments are in process and estimated to be completed between 01/15/24 - 02/15/24 due to Providers' contractual notification period.	Fix is complete and claim adjustments are in process.
Confirmed Issue 378: CIA-6254 Claims billing for therapy services are denying for no authorization in error.	Medicaid & MyCare	10/16/23	39-Physical Therapist, Individual; 41-Occupational Therapist, Individual; 40-Speech Language Pathologist, Individual	System fix in process and estimated to be completed by 12/22/23.	Manual work around in place as of 10/25/2023. Claim adjustment project will be submitted with 60 days of system fix implementation. We estimate adjustments to be completed between 01/22/24 - 02/22/24.	Fix in process
Confirmed issue 379: CIA-6230 A portion of claims for MyCare members are not processing through Medicare and Medicaid appropriately	MyCare	10/19/23	84-Ohio Department of Mental Health (Community Mental Health) Provider; 95-ODADAS Certified/Licensed (SUD) Treatment Program	Due to the complexity of the issue, we estimate the system fix to be completed by 01/31/24.	Claim adjustment project will be submitted with 60 days of system fix implementation. We estimate adjustments to be completed between 03/01/24 - 04/01/24.	Fix in process

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Confirmed issue 380: CIA-6286 Claims billing transportation CPT T2025 paid in error when member is receiving adult day health center services, CPT S5102.	MyCare	10/25/23	16 & 60-Home Health Agency; 45-Waivered Services Organization	System fix in process and estimated to be completed by 12/31/23.	Claim adjustment project will be submitted with 60 days of system fix implementation. We estimate recovery adjustments to be completed between 02/01/24 - 03/01/24 due to Providers' contractual notification period	Fix in process
Confirmed Issue 381: CIA-6335 Claims with date of service between 10/01/23 – 10/16/23 are denying for invalid diagnosis code in error.	Medicaid & MyCare	10/06/23	21-Professional Medical Group; 80-Independent Laboratory; 01-Hospital (Outpatient)	The initial discovery of the issue was indicated to only impact other Centene Health Plans, however upon review of all impacted diagnosis codes, this was found to impact additional plans, including Buckeye Health Plan. System fix completed on 10/16/23.	Claim adjustments were completed on 10/23/23 and 11/06/23. This issue is resolved and will be removed from the December 2023 report.	Resolved
Confirmed Issue 382: CIA-6329 Behavioral Health claims billing under a supervising provider are underpaying in error.	Medicaid & MyCare	11/01/23	84-Ohio Department of Mental Health (Community Mental Health) Provider; 95-ODADAS Certified/Licensed (SUD) Treatment Program	System fix in process and estimated to be completed by 01/15/24.	Manual work-around in place as of 11/09/23. Claim adjustment project will be submitted with 60 days of system fix implementation. We estimate adjustments to be completed between 02/15/24 - 03/15/24.	Fix in process

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<p>Confirmed Issue 383: CIA-6336 Participating Behavioral Health Provider's claims are denying for no authorization in error when no authorization is needed for Participating Providers.</p>	<p>Medicaid & MyCare</p>	<p>11/06/23</p>	<p>84-Ohio Department of Mental Health (Community Mental Health) Provider; 95-ODADAS Certified/Licensed (SUD) Treatment Program</p>	<p>A single, systemic fix is unavailable for this issue as all impacted rendering practitioners' participating status must be verified and potentially updated. A multi-tiered process has been in place since 05/01/22 to update incorrect practitioner setups and adjust impacted claims.</p>	<p>Claim adjustments are routinely performed on an adjustment cycle which identifies and reprocesses claims which are impacted by updated provider participation statuses. These claim adjustments are a part of our standard work processes and will continue to be in place for the foreseeable future. This issue will be removed from the December 2023 submission.</p>	<p>Resolved</p>
<p>Confirmed Issue 384: CIA-6267 Post-partum E/M claims billed without modifier TH are denying as non-covered in error instead of denying for missing modifier.</p>	<p>Medicaid</p>	<p>10/18/23</p>	<p>20-Physician/Osteopath, Individual; 24-Physician Assistant; 72-Nurse Practitioner, Individual; 71-Nurse Midwife Individual</p>	<p>System fix in process and estimated to be completed by 12/15/23.</p>	<p>Claim adjustment project will be submitted with 60 days of system fix implementation. We estimate adjustments to be completed between 01/15/24 - 02/15/24.</p>	<p>Fix in process</p>