



Claims Payment Systemic Errors August 2023

The current Claims Payment Systemic Errors (CPSEs) for Anthem Blue Cross and Blue Shield are reported below. If you have any questions, please contact your Provider Relationship Management representative or call Provider Services at **844-912-1226**.

Description of CPSE	Date CPSE was 1st identified	Billing Provider Type(s) impacted by CPSE	Timeline for fixing CPSE	Dates and/or date spans(s) of Corrected Claims Adjustments	Number of claims impacted	CPSE status
<p>230313R000056-POTENTIAL CPSE: Based on provider feedback Anthem is researching the rates Behavioral Health providers who are not associated with a CMHC and/or SUD entity are receiving for discrepancies.</p> <p>230405R000210-CONFIRMED CPSE: Updated ticket due to CPSE confirmation. Anthem identified 116,992 individual providers who were internally flagged as affiliated with a 84/95 provider type incorrectly and were receiving the BH redesign rates causing a mixture of overpayments and underpayments. Anthem has removed the incorrect internal flags and are working to identify and reprocess impacted claims. Due to the volume of providers this has impacted Anthem is working to pull our overpayments from underpayments to prevent processing delays.</p> <p>Underpaid claims were reprocessed and are completed. Overpaid claims are in the recoupment process. Providers will have 30 days from the overpayment notice to dispute the recoupment.</p>	3/10/2023	21-Professional Medical Group	Provider internal flags were removed on 3/19/23 and 3/24/23	Claims identified as recoupments: Impacted providers received initial notice on 6/28/23 claims offsetting will begin 90 days from the initial notification	9,579 claims were overpaid	recoupment is in process
230602R000233-CONFIRMED CPSE: Yearly allowances for well visit CPT codes 99382-99383-99385-99385 99386-99387-99391-99392-99393-99394-99395-99396, were not configured by age group causing claims to deny G02-benefits limit reached, Anthem has completed the benefit configuration and impacted claims have been reprocessed.	6/2/2023	01-Hospital (Inpatient and Outpatient IP & OP), 21-Professional Medical Group	6/9/2023	8/1/2023	456	complete
230607R000064-CONFIRMED CPSE: Anthem identified an error with the pricing configuration for CPT codes H2019 and H2017 when billed with a community place of service code, the rate defaulted to the office rate. It was brought to the plan that not all impacted claims were corrected prior to claim adjudication. Impacted claims have been reprocessed.	6/7/2023	84-Ohio Department of Mental Health (Community Mental Health) Provider	3/31/2023	8/10/2023	39,319	complete

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230626R000056-CONFIRMED CPSE: A system update reverted logic to bypass authorization requirements for therapy and chiropractic procedure codes that do not require authorization for the first 15 or 30 visits, depending on the members age per calendar year. This caused claims to deny for no authorization incorrectly. Impacted providers have been outreached and claims will be reprocessed.	6/22/2023	27-Chiropractor Individual, 21-Professional Medical Group	7/7/2023	8/30/2023	519	in progress
230627R000157-CONFIRMED CPSE: Claims billing E&M procedure codes with modifier 25 were denied G02-Benefit limits reached. The configuration has been corrected, impacted providers were notified and identified claims were reprocessed.	6/22/2023	21-Professional Medical Group	6/26/2023	7/28/2023	443	complete
230622R000012-Anesthesia claims were denying ZAU for missing NDC code in error. Anthem has corrected the configuration. Impacted providers were notified and claims were reprocessed.	6/22/2023	01-Hospital (IP & OP), 21-Professional Medical Group, 68-Anesthesia Assistant Individual, 73-Certified Registered Nurse Anesthetist (CRNA) Individual	6/26/2023	8/2/2023	469	complete
230703R000031-CONFIRMED CPSE: Anthem incorrectly denied claims for ZIX missing pregnancy length indicator. Anthem has updated the configuration to recognize the required diagnosis codes for gestational age. Impacted providers were notified and claims were reprocessed.	6/30/2023	01-Hospital (Inpatient and Outpatient IP & OP), 21-Professional Medical Group	7/5/2023	8/2/2023	763	complete
230719R000057-CONFIRMED CPSE: QW and SA modifier was not recognized for CPT codes: 87811,87426, 87428 ,8742,87426, 87635, causing incorrect claim denials for inappropriate modifier. The configuration has been corrected, impacted providers were notified, and claims were reprocessed.	7/19/2023	01-Hospital (Inpatient and Outpatient IP & OP), 21-Professional Medical Group, 80-Independent Laboratory, 46-Ambulatory Surgery Center	8/1/2023	8/11/2023	514	complete

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230803R000003-CONFIRMED CPSE: Anthem incorrectly denied add on procedure codes for primary procedure not billed. These denials occurred when the primary procedure code was packaged into EAPG pricing, appearing as a 0.00 payment. Anthem has completed the system configuration, impacted providers were notified and claims will be reprocessed.	7/28/2023	01-Hospital (Outpatient), 46-Ambulatory Surgery Center	7/28/2023	8/27/2023	2,909	in progress
230731R000177-CONFIRMED CPSE: Behavioral Health claims for service code 90791 were manually priced at the incorrect rate. Impacted providers were notified and claims will be reprocessed.	7/28/2023	84-Ohio Department of Mental Health (Community Mental Health) Provider	Analyst education no system fix was needed	9/8/2023	487	in progress
230807R000146-CONFIRMED CPSE: Internal system update removed tiered pricing logic that reduced the payment for BH codes that are discounted after a certain number of units are billed, causing incorrect 0.00 payments. Anthem has implemented a short term pricing correction until the system release in October. Impacted providers have been notified and claims will be reprocessed.	8/7/2023	84-Ohio Department of Mental Health (Community Mental Health) Provider, 95-ODADAS Certified/Licensed (SUD) Treatment Program	10/1/2023	9/7/2023	958	in progress
230808R000013-Potential CPSE: Anthem is reviewing claim denials for H69-Invaild from and through dates	8/8/2023	01-Hospital (Inpatient and Outpatient IP & OP)	9/15/2023	9/15/2023	20	in progress
230811R000006-CONFIRMED CPSE: Internal benefit migration defaulted K0001 to the purchase allowable of 1 per 5 years when billed with the rental modifier. The benefit has been corrected, impacted providers were notified and claims will be reprocessed.	8/9/2023	76-Durable Medical Equipment Supplier	8/11/2023	9/9/2023	45	in progress
230802R000217 & 230802R000186-POTENTIAL CPSE: Anthem is reviewing claim denials for no authorization when billing CPT codes 96127, 90791 and 99309	8/10/2023	84-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program	8/27/2023	8/27/2023	234	in progress

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230811R000172-POTENTIAL CPSE: Anthem denied outpatient claims when billed with the GT modifier incorrectly. The configuration is in progress and impacted claims will be reprocessed.	8/11/2023	01-Hospital (Outpatient)	9/30/2023	9/30/2023	78	in progress
230814R000015-POTENTIAL CPSE: Anthem was configured to require the QW modifier for lab tests listed on the Medicaid fee schedule as CLIA waived. Per additional guidance from the state the QW modifier is only applicable to providers who hold a CLIA certificate of waiver or certificate of PPMP. Anthem is correcting the configuration and reviewing impacted claims.	8/14/2023	01-Hospital (Inpatient and Outpatient IP & OP), 21-Professional Medical Group, 80-Independent Laboratory, 46-Ambulatory Surgery Center	9/30/2023	9/30/2023	TBD	in progress
POTENTIAL CPSE: Anthem is researching EAPG claims subject to multiple-procedure payment reduction for double reductions	8/14/2023	01-Hospital (Outpatient), 46-Ambulatory Surgery Center	9/30/2023	9/30/2023	TBD	in progress