



Claims Payment Systemic Errors August 2024

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

Unique ID and Description of CPSE	Line of Business	Date CPSE was first identified	Billing Provider Type(s) impacted by CPSE	Timeline for fixing CPSE	Dates and/or date spans(s) of Corrected Claims Adjustments	CPSE status
240604R000195: CONFIRMED CPSE: VFC denials Anthem will allow payment to be made on toxoid codes covered under the VFC program when billed in the outpatient setting per OAC rule 5160-2-75. Anthem has completed the configuration and claims were reprocessed.	Medicaid	6/4/2024	01-Hospital (Outpatient)	6/28/2024	7/22/2024	Complete
240617R000251- CONFIREMD CPSE: Anthem updated fee schedule to include service codes that are unlisted or do not have a fee assigned on the Ohio Medicaid Fee schedules. Impacted providers were notified and claims were reprocessed.	Medicaid	7/12/2024	21-Professional Medical Group	7/15/2024	7/25/2024	Complete
240715R000087-CONFIRMED CPSE: Anthem identified incorrect claims denials for invalid NDC code for CPT codes 90677, 90697 & 90681.	Medicaid	7/15/2024	21-Professional Medical Group	7/20/2024	8/5/2024	Complete
240813R000191-CONFIRMED CPSE: Anthem was incorrectly editing inpatient claims for missing HCPCs code when billed with a Revenue code that requires a HCPCs code in the outpatient setting. Anthem has discontinued the editing on inpatient claims and is working on repaying the impacted claims.	Medicaid	7/17/2024	01-Hospital (inpatient)	7/20/2024	8/30/2024	In progress