

## Claims Payment Systemic Errors November 2023

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**.

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
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 were reprocessed.	06/22/2023	27-Chiropractor Individual  21-Professional Medical Group	07/05/2023	Chiropractic service codes were reprocessed on 07/07/2023  All other therapy codes 11/8/2023	1,536	Complete
<p>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.</p> <p>230814R000015-CONFIRMED CPSE: Anthem is continuing to solution for a long term exclusion for providers who hold a CLIA certificate above a Certificate of Waiver or a Certificate of PPMP from the QW modifier requirement. Anthem has implemented a short term solution for providers who have been vocal about receiving denials. If you are a provider who holds a CLIA certificate above a COW or PPMP please reach out to your provider experience representative to be included in the short term solution.</p> <p>If you are a provider who holds a CLIA certificate above a COW or PPMP and do not wish to bill with the QW modifier, please contact your Anthem BCBS provider representative. Anthem will manually implement a correction to prevent claim denials when billing CLIA waived tests without the QW modifier. Anthem will continue to pursue an automated resolution, this issue is no longer impacting 5 or more providers, this issue will be closed on the CPSE log.</p>	08/14/2023	01-Hospital (Inpatient and Outpatient IP & OP)  21-Professional Medical Group  80-Independent Laboratory  46-Ambulatory Surgery Center	Anthem has implemented a manual solution to bypass the QW modifier requirement when billing CLIA waived tests for providers who hold a CLIA type code above COW and PPMP	10/30/2023 – Please work with Provider Experience if you are a provider with a CLIA certificate above a COW or PPMP and do not wish to bill using the QW modifier for CLIA waived tests	55	Complete

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<p>231012R000173-POTENTIAL CPSE: Anthem is researching EAPG claims subject to multiple-procedure payment reduction for double reductions</p> <p>231012R000173-CONFIRMED CPSE: Internal claims editing applied the multiple-procedure payment reduction causing double reductions. The configuration to exclude outpatient hospital and Ambulatory surgery center claims from clinical editing was released on 9/26/23. Anthem has identified impacted claim to be reprocessed.</p>	08/14/2023	01-Hospital (Outpatient) 46-Ambulatory Surgery Center	09/26/2023	11/30/2023	10,482	CPSE fixed claims remediation in process
230823R000122-CONFIRMED CPSE Urgent Care claims billed in POS 20 were denying for no authorization Y3Z, Anthem will allow both in and out of network providers to bill in POS 20-Urgent Care without requesting prior authorization. Configuration was completed on 10/30/23 and claims remediation is in progress.	08/23/2023	01-Hospital (Outpatient)	10/30/2023	12/13/2023	2,309	CPSE fixed claims remediation in process
230913R000009-CONFIRMED CPSE: Claims for service codes T4527 and T4528 were denying for exceeding units. The unit allowable is 200 units per month for members 21 years & older and 300 units per month for members ages 3-20 years old. Anthem has updated the benefit and will reprocess claims.	09/13/2023	76-Durable Medical Equipment Supplier	10/1/2023	10/25/2023	169	Complete
230926R000210-CONFIRMED CPSE: Nursing Facility claims denied Rev code 0160 with NC03 services are not covered incorrectly. Anthem has corrected the benefit configuration and impacted claims have been reprocessed.	09/26/2023	86-Nursing Facility	10/1/2023	10/25/2023	19	Complete
231009R000005-CONFIRMED CPSE: Configuration error caused service code 98941 to deny for PS0-Not a covered service. The benefit has been corrected and impacted providers were notified. Claims will be reprocessed.	10/09/2023	21-Professional Medical Group	10/13/2023	10/23/2023	579	Complete

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<p>231009R000034-POTENTIAL CPSE: Anthem is researching claim denials for enteral supplies. The denial reason is for frequency limit exceeded. Anthem has notified potentially impacted providers and will have more details upon further research.</p> <p>231009R000034-CONFIRMED CPSE: Anthem is working on excluding DME claims billing 1 month supplies from exceeding frequency limits.</p>	10/09/2023	76-Durable Medical Equipment Supplier	11/30/2023	11/30/2023	1,563	In progress
<p>231009R000193-POTENTIAL CPSE: Anthem is reviewing duplicate denials for service codes S5000 and S5001</p> <p>231009R000193-CONFIRMED CPSE: Anthem has updated the claims system to exclude S5000 and S5001 from duplicate denials when billed with different NDC codes.</p>	10/09/2023	<p>84-Ohio Department of Mental Health (Community Mental Health) Provider</p> <p>95-ODADAS Certified/Licensed (SUD) Treatment Program</p>	11/06/2023	12/06/2023	407	CPSE fixed claims remediation in process
<p>231012R000156-POTENTIAL CPSE: Anthem is reviewing overpayments made on claims billing E&amp;M codes 99202-99499, excluding BH provider type 84/95.</p> <p>231012R000156-NON CPSE: Anthem is continuing to review potential overpayment examples on E&amp;M codes, at this time this issue is not impacting 5 or more providers</p>	10/12/2023	21-Professional Medical Group	11/30/2023	11/30/2023	TBD	Anthem is reviewing claim payments made on E&M codes
<p>231106R000150-CONFIRMED CPSE: Anthem is incorrectly denying CANS assessments and advising providers to submit to Aetna OhioRise when the date of service is the same date the member is enrolled into OhioRise. Anthem is configuring a short-term and a long-term solution. Impacted providers were notified and claims will be reprocessed.</p>	11/06/2023	<p>84-Ohio Department of Mental Health (Community Mental Health) Provider</p> <p>95-ODADAS Certified/Licensed (SUD) Treatment Program</p>	12/30/2023	12/06/2023	176	In progress