

Claims Payment Systemic Errors (CPSE) Update Report Confidential and Proprietary

As of: May 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
Unique ID CSO0245103: Confirmed CPSE	2/10/2023	21-Professional Medical Group	3/15/2023	Target claims reprocessing date 4/19/2023 - 4/26/2023 The system has been corrected on 3/15/2023 and claims will not be reprocessed.	Completed
Claims for providers with specialty code PA (Anatomic Pathology) were pricing at 100% of allowed charges instead of the providers' contracted rate.				CareSource made a business decision not to reprocess claims that would result in a recoupment.	
Unique ID CS00287567: Confirmed CPSE As of 1/1/23 E&M codes are now payable as inpatient or observation. Prior to 1/1/23 these codes were payable as inpatient only. This applies to the following codes:	2/15/2023	72-Nurse Practitioner Individual 20-Physician/osteopath, individual	3/23/2023 3/27/2023	Target claims reprocessing date 4/26/2023 - 5/3/2023 Claims reprocessed on 4/19/2023	Completed
99221-99236 99231-99236 99238-99239 99252-99255					
Unique ID CS00275050: Confirmed CPSE Dialysis claims for OH MyCare Opt Out members with Medicare primary submitted electronically are not processing the full patient liability.	2/21/2023	01-Hospital (Outpatient) 59-End-Stage Renal Disease (Dialysis) Clinic	2/24/2023	Farget claims reprocessing date 3/29/2023 - 4/5/2023 Target claims reprocessing date 4/5/2023 - 5/3/2023 Claims reprocessed on 4/19/2023	Completed
Unique ID TFSSS8284: Confirmed CPSE Effective 1/1/2021 Physician services billed in POS 31,32, and 33 do not require a prior authorization for PAR and Non-PAR providers. This impacts the following codes:10140, 11104, 11307, 15272, 20605, 28805, 36589, 51102, 64855, 64615, 65222, 66984, 68761, 77263, 77290, 77334, 86880, 88738, 90677, 90684, 90785, 90792, 90935, 92552, 92556, 93010, 96372, 97597, 99324, 99325, 11030, 11100, 04159, 43385, 99491.	2/23/2023	72-Nurse Practitioner Individual 43-Audiologist, Individual 42-Psychologist, Individual	4/5/2023 4/10/2023	Target claims reprocessing date 5/5/2023 - 5/12/2023 Claims reprocessed on 4/27/2023	Completed
Unique ID TFS863556: Confirmed CPSE Claims Billed with A0425 (Ambulance service) are denying for prior authorization in error and should not deny when a prior authorization is not required for both in and out of network providers.	3/3/2023	82-Ambulance	4/10/2023	Target claims reprocessing date 5/10/2023 - 5/17/2023 Claims reprocessed on 5/1/2023	Completed
Unique ID TFS857953: Confirmed CPSE Claims that are billed with Q1 2023 new codes are denying incorrectly.	3/3/2023	00-All provider types	3/27/2023	Target claims reprocessing date 5/3/2023 - 5/10/2023 Claims reprocessed on 5/10/2023	Completed
Unique ID CS00292170: Confirmed CPSE Adjusted claims are denying for Z15 (Duplicate Line by Provider) and should not deny when it has two different NDC.	3/13/2023	16 & 60-Home Health Agency 20-Physician/osteopath, individual 21-Professional Medical Group 72-Nurse Practitioner individual	3/23/2023	Target claims reprocessing date 4/26/2023 - 5/3/2023 Claims reprocessed on 4/21/2023	Completed
Unique ID CS00297922: Confirmed CPSE Claims billed by participating providers and with A4305 (Disposable drug delivery system, flow rate of 50 ml or greater per hour) are denying for prior authorization in error.	3/15/2023	76-Durable Medical Equipment Supplier	4/12/2023	Target claims reprocessing date 5/17/2023 - 5/24/2023 Claims reprocessed on 4/17/2023	Completed
Unique ID C500303760: Confirmed CPSE Radiology code 72157 and 72148 billed with modifier 26 and Place of Service 19, 22, and 23 are denying XTF (Correct modifier required) and should process as covered.	3/24/2023	01-Hospital (Outpatient)	4/19/2023	Target claims reprocessing date 5/24/2023 - 5/31/2023 Claims reprocessed on 4/25/2023	Completed
Unique ID CS00307605: Confirmed CPSE Procedure code 96372 (Therapeutic, prophylactic, or diagnostic injection) billed with Place of Service 53 is denying P10 (Place of Service is missing or invalid) and should process.	3/29/2023	34-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program	4/26/2023	Target claims reprocessing date 6/2/2023 - 6/9/2023	In Process

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Unique ID CS00300401: Confirmed CPSE MyCare Opt Out claims billed with behavioral health services codes H0011, H2017, and H2019 are denying with denial reason code CBI (COB information not received) incorrectly and should process since the codes are on the Third-Party Liability (TPL) Bypass.	3/31/2023	84-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program	4/10/2023	Target claims reprocessing date 5/12/2023 - 5/19/2023 Claims reprocessed on 5/1/2023	Completed
Unique ID CS00305296: Confirmed CPSE Claims billed with V5221 (Hearing aid, contralateral routing system, binaural, BTE/BTE) are denying X50 (Code does not have a contract fee) incorrectly and should not deny since it is a covered code as of 7/1/2021.	3/31/2023	43-Audiologist, Individual 76-Durable Medical Equipment Supplier	5/1/2023	Target claims reprocessing date 6/7/2023 - 6/14/2023 Claims reprocessed on 5/9/2023	Completed
Unique ID TFS881817: Confirmed CPSE PT/OT/ST visit 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.	4/4/2023	39-Physical Therapist, Individual 40-Speech Language Pathologist, Individual 41-Occupational Therapist, Individual	5/8/2023	Target claims reprocessing date 6/14/2023 - 6/21/2023	In Process
Unique ID TFS878672: Confirmed CPSE Claims Billed with Place of Service preceding 'O' (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.	4/5/2023	00-All provider types	4/27/2023 5/17/2023	Target claims reprocessing date 5/31/2023 – 6/7/3023 Target claims reprocessing date 6/21/2023 - 6/28/2023	In Process
Unique ID CS00309461: Confirmed CPSE Claims billed with H0005 or H0006 (Alcohol and/or drug services) are denying for W37 V[Medicaid MUE exceeded]. Per ODM requirements effective 1/1/2019, MUE should not apply if multiple units are billed.	4/6/2023	01-Hospital (Outpatient)	5/3/2023	Target claims reprocessing date 6/7/2023 - 6/14/2023	In Process
Unique ID CS00296191: Confirmed CPSE 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.	4/7/2023	01-Hospital (Outpatient) 79-Independent Diagnostic Testing Facility 80-Indepedendent Laboratory	5/17/2023	Target claims reprocessing date 5/21/2023 - 5/28/2023	In Process
Unique ID TFS884651: Confirmed CPSE Anesthesia and lab codes are denying XNC (Invalid procedure code) incorrectly and should process as covered.	4/10/2023	01-Hospital (inpatient) 20-Physician/osteopath, individual 21-Professional Medical Group 72-Nurse Practitioner individual	5/22/2023	Target claims reprocessing date 6/28/2023 - 7/5/2023	In Process
Unique ID CS00300242: Confirmed CPSE FQHC and Rural clinic claims billed with BH dx codes with provider specialty codes other than 213 (Psychiatric), 227 (Addiction Psychiatry), and 234 (Child & Adolescent Psychiatry) should not deny BOL (Bill to Ohio Rise). FQHC and Rural clinic claims should only deny BOL: If servicing or rendering provider type 24 with supervising provider specialty 213 and 224 or. If claims are billed with a servicing provider or rendering provider type 65 or 72 with a provider specialty code 213 or 996.	4/11/2023	05-Rural Health Clinic 12-Federally Qualified Health Center	4/21/2023	Target claims reprocessing date 5/24/2023 - 5/31/2023	In Process
Unique ID CS00305S06: Confirmed CPSE Skilled Nursing Facility claims are denying for no authorization incorrectly.	4/13/2023	86-Nursing Facility	4/26/2023	Target claims reprocessing date 6/14/2023 - 6/21/2023	In Process
Unique ID CS00313780: Confirmed CPSE Claims are denying for ZDS (Suspended/Excluded Provider) in error and should not be denied since providers have been reinstated.	4/17/2023	21-Professional Medical Group	4/20/2023	Target claims reprocessing date 5/24/2023 - 5/31/2023	In Process

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Unique ID CS00313966: Confirmed CPSE	4/20/2023	76-Durable Medical Equipment Supplier	5/10/2023	Target claims reprocessing date 6/14/2023 - 6/21/2023	In Process
Oxygen concentrator HCPCS codes E1390U1 and E1392 billed together should not be denied and pay per diem \$140.					
Unique ID CS00313867: Confirmed CPSE 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.	4/27/2023	20-Physician/osteopath, individual 21-Professional Medical Group 42-Physician Assistant 65-Clinical Nurse Specialist Individual 72-Nurse Practitioner Individual	5/24/2023	Target claims reprocessing date 6/28/2023 - 7/5/2023	In Process
Unique ID CS00305798: Confirmed CPSE 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.	4/27/2023	20-Physician/osteopath, individual 35-Optometrist Individual	5/31/2023	Target claims reprocessing date 7/5/2023 - 7/12/2023	In Process
Inique ID CSO0309275: onlfirmed CPSE Laims billed with code T1001 (Nursing assessment/evaluation) are priced t the incorrect rate causing an overpayment.	4/27/2023	21-Professional Medical Group	5/18/2023	Target claims reprocessing date 6/21/2023 - 6/28/2023	In Process
Unique ID CS00309528: Confirmed CPSE Covid-19 lab test HCPCS codes U0003, U0004, and U0005 are no longer covered effective 4/1/2023. This is a potential overpayment.	5/2/2023	20-Physician/osteopath, individual 72-Nurse Practitioner Individual 80-Indepedendent Laboratory	5/31/2023	Target claims reprocessing date 7/5/2023 - 7/12/2023	In Process
Unique ID TF5903852: Confirmed CPSE Anesthesia claims billed with additional modifiers should not deny for X55 Proc/Mod Combination Not Valid).	5/5/2023	20-Physician/osteopath, individual 21-Professional Medical Group	5/25/2023	Target claims reprocessing date 7/5/2023 - 7/12/2023	In Process
Unique ID CS00316448: Confirmed CPSE WyCare Skilled Nursing Facility claims are processed by line level instead of laim level causing claims to apply the incorrect cost share.	5/9/2023	86-Nursing Facility	5/15/2023	Target claims reprocessing date 6/21/2023 - 6/28/2023	In Process