



April 15, 2019

Dear Business Manager:

Please submit a copy of this letter with any inquiry or additional documentation.

Buckeye previously advised that during the course of our recent review, we identified a systemic error affecting claim payments. The identified error caused therapy related claims carrying a GN, GP, or GO modifier, to be incorrectly denied. We initially anticipated the issue to be resolved within 30 days. Remediation of the issue is now projected to require up to 60 days or more. We will continue to communicate the status updates to you no later than every 30 days via our provider portal.

If you have questions about this information, please call 866-296-8731, to speak to a Buckeye Health Plan Provider Claims Assistance Representative.

Sincerely,

Buckeye Health Plan
Payment Integrity Department