



UPDATES OF REPORTED CLAIMS PAYMENT SYSTEMIC ERRORS

Updated: March 15th, 2022

Listed below are current Claims Payment Systemic Errors (CPSE). The issues are reported in ascending order with the most recently identified issue listed last. This log is updated bi-monthly. Buckeye Health Plan encourages you to review this log often and prior to contacting Buckeye Health Plan Provider Contact Center. If you still have questions, please call 866-296-8731 to speak to a Buckeye Health Plan Provider Claims Assistance Representative.

Description of CPSE	Date CPSE was First Identified	Status	Billing Provider Type(s) Impacted by CPSE (select all that apply)	All Date(s) and Method(s) Providers Notified of CPSE	Timeline for Fixing CPSE	Date(s) and/ or date span(s) of Corrected Claims Adjustments	Number of Claims Impacted
Issue 232: CIA-4308 Hearing aid claims billed for members over 21 years old are overpaying in error as directed in OAC 5160-10-11.	05/25/21	Fix is Complete & Adjustments are in Process	76-Durable Medical Equipment Supplier	Initial notification posted to website on 07/15/21. Status update posted on website on 09/15/21, 11/15/21, 01/15/22, and by 03/15/22.	System fix completed on 10/12/21. 01/15/21 Update: It was determined that claims were being manually underpriced in error after the system fix was completed which caused claims to be priced at 50% of the correctly reduced pricing. Education was completed on 01/07/22.	Manual work-around in process on 07/12/21. Claims which were manually underpriced in error were adjusted between 02/12/22 - 03/04/22. Claim recoupments were partially completed between 02/22/22 - 03/04/22. We estimate remaining recoupments to be completed between 03/15/22 - 04/15/22.	Recoupment Claim Count: 1092 Underpaid claim Count: 158

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<p>Issue 235: CIA-2628/4177 Immunizations for VFC and non-VFC Providers are denying in error on claims after DOS 04/15/21.</p>	<p>06/04/21</p>	<p>Resolved</p>	<p>24-Physician Assistant 20-Physician/osteopath, individual 72-Nurse Practitioner Individual 21-Professional Medical Group</p>	<p>Initial notification posted to website on 07/15/21. Status update posted on website on 09/15/21, 11/15/21, 01/15/22, and by 03/15/22.</p>	<p>System fix completed on 07/15/21. 01/15/22 Update: It was determined that an additional system fix is required for full resolution of issue. We estimate the additional fix to be completed by 01/20/22. 03/15/22 Update: Additional system fix completed on 02/03/22.</p>	<p>Updated description to include VFC providers in addition to non-VFC providers. A manual work on 06/07/21. Claim adjustments were completed between 09/15/21 - 09/24/21, 10/02/21 - 10/08/21, and 10/16/21 - 10/21/21. Second round of claim adjustments were completed between 02/12/22 - 03/05/22. This issue is resolved and will be removed from the May 2022 submission.</p>	<p>1,777</p>

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<p>Issue 250: Participating Behavioral Health Provider's claims are denying for no authorization in error when no authorization is needed for Participating Providers.</p>	<p>07/19/21</p>	<p>System fix and claim adjustments are in process</p>	<p>84-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program</p>	<p>Initial notification posted to website on 09/15/21. Status update posted on website on 11/15/21, 01/15/22, and by 03/15/22.</p>	<p>A single, systemic fix is unavailable for this issue as all impacted rendering practitioners' participating status must be verified and potentially updated. A multi-tiered fix is in process to update incorrect practitioner setups and adjust impacted claims.</p> <p>01/15/22 Update: The remaining impacted Providers' setups were submitted on 12/20/21 through an autoloader process. Currently, we are reviewing and updating the fallout from the autoloader. This is expected to be complete by 01/31/22.</p> <p>03/15/22 Update: The updates to the remaining fallout providers continues to be worked. An extended amount of time is needed for this manual process which is expected to be completed by 03/31/22.</p>	<p>Claim adjustment projects are submitted periodically as practitioners participating status are updated. Claim adjustments were partially completed between 07/27/21 - 07/30/21, 08/02/21 - 8/04/21, 08/10/21 - 08/18/21, 08/20/21 - 08/24/21, 08/31/21 - 09/03/21, 09/15/21 - 10/01/21, 10/05/21 - 10/08/21, 10/19/21 - 10/21/21, 11/01/21 - 11/10/21, 11/23/21 - 12/14/21, 12/20/21 - 12/29/21, 01/27/22 - 02/25/22 and 03/01/22 - 03/07/22. Claim adjustments will continue until all provider's participating status has been updated which is causing adjustments to span over 30 days. We estimate adjustments to be completed between 04/01/22 - 05/01/22.</p>	<p>Pending</p>

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<p>Issue 252: CIA-4262 MyCare Medicaid claims are denying as non-covered in error when primary Medicare claim has paid.</p>	<p>07/26/21</p>	<p>Fix is Complete & Adjustments are in Process</p>	<p>76-Durable Medical Equipment Supplier</p>	<p>Initial notification posted to website on 09/15/21. Status update posted on website on 11/15/21, 01/15/22, and by 03/15/22.</p>	<p>System fix completed on 11/21/21.</p>	<p>Manual work-around in place starting 08/31/21. Claim adjustments were partially completed between 10/29/21 - 11/05/21, 11/15/21 - 11/23/21, 12/03/21 - 12/17/21, 12/20/21 - 01/10/22, and 01/18/22 - 03/07/22. Remaining claim adjustments are estimated to be complete between 03/15/22 - 04/15/22. The adjustments have spanned over 30 days due to the complexity of the issue and review of fallout reporting.</p>	<p>23,876</p>
<p>Issue 265: CIA-4461 Inappropriate duplicate line denials for nursing facility claims.</p>	<p>08/24/21</p>	<p>System fix and claim adjustments are in process</p>	<p>86-Nursing Facility</p>	<p>Initial notification posted to website on 09/15/21. Status update posted on website on 11/15/21, 01/15/22, and by 03/15/22.</p>	<p>11/15/21 Update: System fix completed on 11/10/21. 01/15/22: It was determined an additional fix is needed. We estimate this to be completed by 02/15/22. 03/15/22: System fix requires additional time for completion due to competing priorities. We estimate this to be complete by 04/15/22.</p>	<p>Claims are being identified for adjustment while the system fix is in process. We estimate adjustments to be completed between 04/15/22 - 05/15/22.</p>	<p>Pending</p>

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<p>Issue 267: CIA-4239 Outpatient EAPG claims are denying procedure codes Q5119, Q5120, J0791, and J9177 as not reimbursable per state guidelines in error.</p>	<p>09/22/21</p>	<p>Resolved</p>	<p>01-Hospital (Outpatient)</p>	<p>Initial notification posted to website on 11/15/21. Status update posted to website on 01/15/22 and by 03/15/22.</p>	<p>System fix completed on 11/17/21.</p>	<p>Claim adjustments were partially completed between 12/04/21 - 12/10/21, 12/21/21 - 12/31/21, 01/05/22 - 01/10/22, 01/18/22- 01/28/22, 02/02/22 - 02/04/22, and 02/25/22 - 03/07/22. Claim adjustments have spanned over 30 days due to the identification of additional claims and resolving claim adjustment fallout reports. This issue is resolved and will be removed from the May 2022 submission.</p>	<p>177</p>
<p>Issue 274: CIA-4880 MyCare Providers are billing NDCs electronically, but claims are denying for missing or invalid NDC in error.</p> <p>Updated Description: Issue 274: CIA-4880 MyCare Providers are billing NDCs on paper claims, but claims are denying for missing or invalid NDC in error.</p>	<p>10/15/21</p>	<p>Fix in process</p>	<p>24-Physician Assistant 72-Nurse Practitioner Individual 24-Physician Assistant 20-Physician/osteopath, individual 21-Professional Medical Group</p>	<p>Initial notification posted to website on 11/15/21. Status update posted to website on 01/15/22 and by 03/15/22.</p>	<p>Additional research was needed on scope of issue for system fix. The system fix is now estimated to be complete by 04/01/22.</p>	<p>During scope research, it was determined the issue was only impacting paper claims. The description of the issue has been updated. We estimate claim adjustments to be complete between 05/01/22 - 06/01/22.</p>	<p>Pending</p>

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<p>Issue 279: CIA-4635 Claims billing T1019 are underpaying for certain providers after date of service 11/01/21.</p>	<p>11/09/21</p>	<p>Resolved</p>	<p>25-Non-Agency Personal Care Aide</p>	<p>Initial notification posted to website on 11/15/21. Status update posted to website on 01/15/22 and by 03/15/22.</p>	<p>System fix completed on 11/19/21.</p>	<p>Claim adjustments were completed between 12/18/21 - 01/08/22, 02/11/22 - 02/22/22, and 03/03/22 - 03/04/22. The adjustments will span over 30 days due to the review of fall out claims. This issue is resolved and will be removed from the May 2022 submission.</p>	<p>873</p>
<p>Issue 282: CIA-4699 Claims received in October, 2021 for 340B providers were incorrectly denied EXFX.</p>	<p>12/09/21</p>	<p>Fix is Complete & Adjustments are in Process</p>	<p>72-Nurse Practitioner Individual 20-Physician/osteopath, individual 24-Physician Assistant</p>	<p>Initial notification posted to website on 01/15/22. Status update will be posted to website by 03/15/22.</p>	<p>System fix completed on 12/15/21</p>	<p>Initial claim adjustments were completed between 02/04/22 - 03/07/22. Adjustment of fall out claims are currently in process and expected to be complete between 03/15/22 - 04/15/22. Adjustments have spanned over 30 days due to the identification and review of fall out claims.</p>	<p>3152</p>
<p>Potential Issue 283 CIA-4723: Claims submitted electronically are rejecting for invalid member information in error.</p> <p>Upon further review, this was determined not to be a CPSE issue.</p>	<p>01/04/22</p>	<p>Resolved</p>	<p>01-Hospital (Outpatient)</p>	<p>Initial notification posted to website on 01/15/22. Status update will be posted to website by 03/15/22.</p>	<p>No system fix required.</p>	<p>Claim rejection caused by discrepant member demographics which needed to be corrected. This is not a CPSE Issue and will be removed from the May 2022 submission.</p>	<p>NA</p>

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Issue 285: CIA-4768 Claims billing CPT L3809 is denying as non-covered in error.	01/06/22	Resolved	76-Durable Medical Equipment Supplier	Initial notification posted to website on 01/15/22. Status update will be posted to website by 03/15/22.	System fix completed on 01/21/22.	Claim adjustments were completed between 02/15/22 - 03/05/22. This issue is resolved and will be removed from the May 2022 submission.	207
Issue 286: CIA-4786 Claims billing CPT L1833 are denying as non-covered in error.	01/20/22	Fix is Complete & Adjustments are in Process	76-Durable Medical Equipment Supplier	Initial notification will be posted to website by 03/15/22.	System fix completed on 02/10/22.	Claim adjustments are in process and estimated to be completed between 04/01/22 - 05/01/22.	798
Issue 287: A small portion of Hospital claims for dates of service on or after 01/01/2022 were not held for and are paying incorrect rate.	01/21/22	Fix is Complete & Adjustments are in Process	01-Hospital (IP & OP)	Initial notification will be posted to website by 03/15/22.	System fix was completed on 02/04/22.	Claims are currently being identified for claim adjustment project. We estimate claim adjustments to be completed between 04/15/22 - 05/15/22.	Pending
Issue 288: CIA-4796 Outpatient claims billing M0245 are denying for missing or invalid NDC in error.	01/25/22	Fix in process	01-Hospital (Outpatient)	Initial notification will be posted to website by 03/15/22.	System fix in process and estimated to be complete by 05/15/22.	A manual work-around was put into place on 02/04/22. A claims adjustment project will be submitted and completed within 60 days of system fix implementation. We estimate claim adjustments to be completed between 06/15/22 - 07/15/22.	Pending

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<p>Issue 289: CIA-4883 Claims billed for FQHC Practitioners in place of service code 50 are denying for no authorization and/or place of service code incompatible with services billed in error.</p>	01/28/22	Fix is Complete & Adjustments are in Process	12-Federally Qualified Health Center	Initial notification will be posted to website by 03/15/22.	System fix completed on 02/15/22.	Claim adjustments are in process and estimated to be completed between 04/01/22 - 05/01/22.	418
<p>Potential Issue 290: Incorrect pricing applied to manually priced nursing facility claims causing potential over- and under-payments.</p> <p>Upon further review, this was determined not to be a CPSE issue.</p>	02/02/22	Fix is Complete & Adjustments are in Process	86-Nursing Facility	Initial notification will be posted to website by 03/15/22.	Issue was determined to be a manual processing error. Education provided on 02/11/22.	<p>Less than 25 providers were impacted. Claim adjustments for additional payment were partially completed between 03/04/22 - 03/07/22. Additional payment adjustments are estimated to be complete between 04/01/22 - 05/01/22. Claim recoupment adjustments are estimated to be complete between 05/01/22 - 06/01/22 to allow time for provider notification. Issue will be removed from the May 2022 submission.</p>	99
<p>Issue 291: MyCare Medicare home health claims are denying for missing or invalid HHA claims data in error.</p>	02/02/22	Fix in process	16 & 60-Home Health Agency	Initial notification will be posted to website by 03/15/22.	System fix is currently being researched. We estimate fix to be complete by 03/31/22.	A claims adjustment project will be submitted and completed within 60 days of completion of authorizations being processed. We estimate this to be completed between 05/01/22 - 06/01/22.	Pending

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<p>Issue 292: Claims billing provider administered pharmaceuticals are denying for no authorization in error when authorized by New Century Health.</p>	<p>02/04/22</p>	<p>Fix in process</p>	<p>72-Nurse Practitioner Individual 20-Physician/osteopath, individual 24-Physician Assistant</p>	<p>Initial notification will be posted to website by 03/15/22.</p>	<p>No system fix required. Issue caused by backlog for creating authorization in claims processing system and is estimated to be complete by 03/31/22.</p>	<p>A claims adjustment project will be submitted and completed within 60 days of completion of authorizations being processed. We estimate this to be completed between 05/01/22 - 06/01/22.</p>	<p>Pending</p>
<p>Potential issue 293: CIA-4885 MyCare Medicaid claims for Opt-Out members are denying for needing primary EOP in error.</p> <p>Upon further review, this was determined not to be a CPSE issue.</p>	<p>02/28/22</p>	<p>Fix in process</p>	<p>01-Hospital (Outpatient)</p>	<p>Initial notification will be posted to website by 03/15/22.</p>	<p>System fix is under review and estimated to be complete by 04/15/22.</p>	<p>There were less than 25 providers impacted. Claim adjustment project will be submitted with 60 days of system fix implementation. This issue will be removed from the May 2022 submission.</p>	<p>Pending</p>
<p>Issue 294: Behavioral Health claims billing H0015 with U6 modifier are denying for missing or invalid modifier in error</p>	<p>03/01/22</p>	<p>Fix is Complete & Adjustments are in Process</p>	<p>84-Ohio Department of Mental Health (Community Mental Health) Provider 95-ODADAS Certified/Licensed (SUD) Treatment Program</p>	<p>Initial notification will be posted to website by 03/15/22.</p>	<p>Issue was caused by manual processing error. Education provided on 03/03/22.</p>	<p>Claims are currently being identified for adjustment. We estimate adjustments to be completed between 04/01/22 - 05/01/22.</p>	<p>Pending</p>