

Indiana Medicaid Resolutions Manual

NAME: 3335 ADMIT DX NOT ALLOWED FOR DOS (HDR)

ERROR TYPE: Batch Edit, Hard Coded

HEADER/DETAIL: Header

OVERRIDABLE: N

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit if the admitting DX is not allowed for the date of service billed.

CRITERIA:

Set this edit on inpatient claims if there is no entry on the diagnosis limits table for the admitting diagnosis code for the header "TO" date of service and it is between the beginning and end dates on the diagnosis limits table, with EOB 4052.

For all other institutional claim types Set this edit if there is no entry on the diagnosis limits table for the admitting diagnosis codes where header "From" date of service and it is between the beginning and end dates on the diagnosis limits table with, EOB 4052.

DISPOSITION:

Note: EOB 9999 with a Do Not Post status is for internal system use only. This EOB is used to avoid potential system processing abends. This EOB is not posted on the RA and the disposition may be ignored.

Claim Type: 0 - All Claim Types **Member Plan:** ALL **Status:** Do Not Post

Location	Region	EOB	Disposition
04	00	9999	PAY

Claim Type: A - Inpatient Xover Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
04	00	4052	DENY
04	21	4052	SUSPEND
04	23	4052	SUSPEND
04	50	9999	PAY

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04	51	9999	PAY
04	52	9999	PAY
04	55	9999	PAY
04	61	4052	SUSPEND
04	64	9999	PAY
04	70	4052	PAY
04	72	4052	PAY
04	73	4052	PAY
04	74	4052	PAY

Claim Type: H - Home Health Claims

Member Plan: ALL Status: Post

Location	Region	EOB	Disposition
04	00	4052	DENY
04	21	4052	SUSPEND
04	23	4052	SUSPEND
04	30	4052	PAY
04	32	4052	PAY
04	33	4052	PAY
04	34	4052	PAY
04	50	9999	PAY
04	51	9999	PAY
04	52	9999	PAY
04	55	9999	PAY
04	61	4052	SUSPEND
04	64	9999	PAY
04	70	4052	PAY
04	72	4052	PAY
04	73	4052	PAY
04	74	4052	PAY

Claim Type: I - Inpatient Claims

Member Plan: ALL Status: Post

Location	Region	EOB	Disposition
04	00	4052	DENY
04	21	4052	SUSPEND
04	23	4052	SUSPEND
04	30	4052	PAY
04	32	4052	PAY
04	33	4052	PAY
04	34	4052	PAY
04	50	9999	PAY
04	51	9999	PAY
04	52	9999	PAY
04	55	9999	PAY

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04	61	4052	SUSPEND
04	64	9999	PAY
04	70	4052	PAY
04	72	4052	PAY
04	73	4052	PAY
04	74	4052	PAY

Claim Type: L - Long Term Care Claims

Member Plan: ALL **Status:** Post

Location	Region	EOB	Disposition
04	00	4052	DENY
04	21	4052	SUSPEND
04	23	4052	SUSPEND
04	30	4052	PAY
04	32	4052	PAY
04	33	4052	PAY
04	34	4052	PAY
04	50	9999	PAY
04	51	9999	PAY
04	52	9999	PAY
04	55	9999	PAY
04	61	4052	SUSPEND
04	64	9999	PAY
04	70	4052	PAY
04	72	4052	PAY
04	73	4052	PAY
04	74	4052	PAY

EOB: 4052 - THE ADMITTING DIAGNOSIS CODE IS NOT A VALID DIAGNOSIS CODE. PLEASE VERIFY AND RESUBMIT.

ARC Code

16

ARC Description

Claim/service lacks information or has submission/billing error(s). Usage: Do not use this code for claims attachment(s)/other documentation. At least one Remark Code must be provided (may be

Effective Date

19950101

End Date

22991231

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comprised of either
the NCPDP Reject
Reason Code, or
Remittance Advice
Remark Code that is
not an ALERT.)
Refer to the 835
Healthcare Policy
Identification
Segment (loop 2110
Service Payment
Information REF), if
present.

Remark Code	Remark Description	Effective Date	End Date
MA65	Missing/incomplete/invalid admitting diagnosis.	19970101	22991231

EOB: 9999 - PROCESSED PER POLICY.

ARC Code	ARC Description	Effective Date	End Date
97	The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

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METHOD OF CORRECTION:

Claims setting this edit will be systematically denied with EOB 4052.

