

Indiana Medicaid Resolutions Manual

NAME: 3760 PROC RSTCN ON REV REIMB RULE

ERROR TYPE: Rules Edit, Billing or Coverage

HEADER/DETAIL: Detail

OVERRIDABLE: Y

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit when a procedure code/revenue combination is not listed on the reimbursement rule.

CRITERIA:

Set this edit if a procedure code/revenue combination is not listed in the reimbursement rule.

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
80	00	9998	SUSPEND

Claim Type: C - Outpatient Xover Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
00	70	9998	DENY
00	72	9998	DENY
00	73	9998	DENY
00	74	9998	DENY
80	00	9998	SUSPEND

Claim Type: H - Home Health Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
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00	30	9998	DENY
00	32	9998	DENY
00	33	9998	DENY
00	34	9998	DENY
00	70	9998	DENY
00	72	9998	DENY
00	73	9998	DENY
00	74	9998	DENY
80	00	9998	SUSPEND

Claim Type: O - Outpatient Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
00	30	9998	DENY
00	32	9998	DENY
00	33	9998	DENY
00	34	9998	DENY
00	70	9998	DENY
00	72	9998	DENY
00	73	9998	DENY
00	74	9998	DENY
80	00	9998	SUSPEND

EOB: 9998 - CLAIM WAS PRICED IN ACCORDANCE WITH CURRENT INDIANA HEALTH COVERAGE PROGRAM POLICIES.

ARC Code	ARC Description	Effective Date	End Date
45	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement. Usage: This adjustment amount cannot equal the total service or claim charge amount; and must not duplicate provider adjustment amounts (payments and contractual reductions) that have resulted from prior	19950101	22991231

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payer(s) adjudication.
(Use only with Group
Codes PR or CO
depending upon
liability)

METHOD OF CORRECTION:

Suspended claims should be forwarded to the BPA unit for further review to analyze why the detail does not have a reimbursement rule.

