

## Indiana Medicaid Resolutions Manual

**NAME:** 4096 OBSOLETE - MODIFIER 99 22 (DTL)

**ERROR TYPE:** Form Edit

**HEADER/DETAIL:** Detail

**OVERRIDABLE:** N

**ALLOW DENIAL:** Y

### DESCRIPTION:

Obsolete - Set this form edit if Modifier "99" or "22" is present on an Anesthesia claim (indicating that more modifiers apply to the pricing of the service) and no supporting documentation or modifier is present to price the claim.

### CRITERIA:

Obsolete - Set this edit if a modifier "99" or "22" is present on a detail line in modifier fields 1, 2, 3, or 4 of an Anesthesia claim with, EOB 4096.

### 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:** M - Professional Claims **Member Plan:** PASM R **Status:** Do Not Post

Location	Region	EOB	Disposition
04	00	9999	PAY

**Claim Type:** M - Professional Claims **Member Plan:** PASM I **Status:** Do Not Post

Location	Region	EOB	Disposition
04	00	9999	PAY

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**Claim Type:** M - Professional Claims

**Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
04	00	4096	SUSPEND
04	20	4096	DENY
04	22	4096	DENY
04	30	4096	PAY
04	32	4096	PAY
04	33	4096	PAY
04	34	4096	PAY
04	50	4096	DENY
04	51	4096	DENY
04	52	4096	DENY
04	55	4096	DENY
04	62	4096	DENY
04	64	4096	DENY
04	70	4096	PAY
04	72	4096	PAY
04	73	4096	PAY
04	74	4096	PAY

**Claim Type:** M - Professional Claims

**Member Plan:** MRT **Status:** Do Not Post

Location	Region	EOB	Disposition
04	00	9999	PAY

**EOB: 4096 - CLAIM BEING REVIEWED.**

ARC Code	ARC Description	Effective Date	End Date
4	The procedure code is inconsistent with the modifier used. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

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**EOB: 9999 - PROCESSED PER POLICY.**

<b>ARC Code</b>	<b>ARC Description</b>	<b>Effective Date</b>	<b>End Date</b>
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

### **METHOD OF CORRECTION:**

Obsolete - The analyst will review the claim and/or any documentation to identify if other modifiers for anesthesia pricing are present. If there are they must manually price per the Anesthesia pricing documentation and override the edit.  
If no supporting evidence is present to price the claim, set the edit for lack of documentation.

