

## **Indiana Medicaid Resolutions Manual**

**NAME:** 4316 ANY DTL DIAG RSTN FOR PROC BILLING RULE (DTL)

**ERROR TYPE:** Rules Edit, Billing or Coverage

**HEADER/DETAIL:** Detail

**OVERRIDABLE:** N

**ALLOW DENIAL:** Y

### **DESCRIPTION:**

Set this edit if the procedure code billed is not allowed for the diagnosis restriction in the procedure billing rule.

### **CRITERIA:**

Set this edit if the procedure code is billed is not allowed for the diagnosis restriction in the procedure billing rule with, EOB 4037.

### **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:** Post

Location	Region	EOB	Disposition
04	00	4037	DENY

**EOB: 4037 - THIS PROCEDURE IS NOT CONSISTENT WITH THE DIAGNOSIS BILLED. PLEASE VERIFY AND RESUBMIT.**

ARC Code	ARC Description	Effective Date	End Date
11	The diagnosis is inconsistent with the procedure. Note: Refer to	19950101	22991231

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the 835 Healthcare Policy  
Identification Segment  
(loop 2110 Service  
Payment Information  
REF), if present.

<b>Remark Code</b>	<b>Remark Description</b>	<b>Effective Date</b>	<b>End Date</b>
N657	This should be billed with the appropriate code for these services.	20130715	22991231

### **METHOD OF CORRECTION:**

Claims setting this edit will be systematically denied with EOB 4037.