

Indiana Medicaid Resolutions Manual

NAME: 4151 BILLING PT/PS RSTN ON REV CODE BILLING RULE (DTL)

ERROR TYPE: Rules Edit, Billing or Coverage

HEADER/DETAIL: Detail

OVERRIDABLE: N

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit if the billing provider (type/specialty) is not valid for the restriction on the revenue billing rule.

CRITERIA:

Set this edit if the revenue code and provider type/specialty is not a valid for the restriction on the revenue billing rule with, EOB 0532.

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	0532	DENY

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

Location	Region	EOB	Disposition
01	00	0532	DENY

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

Location	Region	EOB	Disposition
01	00	0532	DENY

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

Location	Region	EOB	Disposition
01	00	0532	DENY

Claim Type: L - Long Term Care Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
01	00	0532	DENY

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

Location	Region	EOB	Disposition
01	00	0532	DENY

EOB: 0532 - BILLING PROVIDER'S SPECIALTY IS NOT APPROVED TO BILL THIS REVENUE CODE. PLEASE VERIFY AND RESUBMIT.

ARC Code	ARC Description	Effective Date	End Date
170	Payment is denied when performed/billed by this type of provider. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	20050630	22991231

Remark Code	Remark Description	Effective Date	End Date
N95	This provider type/provider specialty may not bill this service.	20010731	22991231

METHOD OF CORRECTION:

Claims setting this edit will be systematically denied with EOB 0532.

For special batch claims, follow special instructions to adjudicate the claim.

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