

Indiana Medicaid Resolutions Manual

NAME: 6021 T2022 HA LIMITED TO 1 UNIT PER MONTH

ERROR TYPE: Limit Audit

HEADER/DETAIL: Detail

OVERRIDABLE: N

ALLOW DENIAL: Y

DESCRIPTION:

This limitation audit will set when the same or different provider bills more than one unit of service in one month for procedure code T2022 HA (Case Management, per month).

CRITERIA:

When case management per month (T2022 HA) is billed more than 1 unit in a month by the same or different provider, set this audit with EOB 6021. The system will calculate the units, set the audit and cutback, as appropriate, to allowed amount. Once one unit has been met for that month, the system will deny claims with EOB 6021.

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
21	00	9999	PAY

Claim Type: M - Professional Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
21	00	6021	DENY
21	70	6021	PAY
21	72	6021	PAY

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Claim Type: M - Professional Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
21	00	6021	PAY

EOB: 6021 - T2022 HA-WRAPAROUND FACILITATION LIMITED TO 1 UNIT PER MONTH

ARC Code	ARC Description	Effective Date	End Date
119	Benefit maximum for this time period or occurrence has been reached.	19950101	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. Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

METHOD OF CORRECTION:

Full Failure:

Claims billed with more than one unit of service in one month (same or different provider) for procedure code T2022 HA will systematically deny, posting EOB 6021.
Related history will validate the denial.

Cutback:

Claims billed with more than one unit of service in one month (same or different provider) for procedure code T2022 HA will cutback and pay one, posting EOB 6021.

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