

Indiana Medicaid Resolutions Manual

NAME: 6068 EXCESS. THERAP. LEAVE DAYS (ICF/IID)

ERROR TYPE: Limit Audit

HEADER/DETAIL: Detail

OVERRIDABLE: Y

ALLOW DENIAL: N

DESCRIPTION:

This limitation audit will set when the member is on therapeutic leave for more than the allowed number of days.

CRITERIA:

When therapeutic leave (revenue code 180 or 183) is billed more than the allowed number of days, set this audit with EOB 6068. Effective 3/19/2020, allow a maximum of 120 days per calendar year for ICF/IID therapeutic leaves from intermediate care facilities for individuals with intellectual disabilities (ICFs/IIDs). Prior to 3/19/2020 the maximum number was 60 days. The number of allowable days need not be consecutive. All leaves should be accumulated to arrive at the total leave days taken for the calendar year.

Provider specialty 212 (CSHCS Care Coordinator) will bypass this audit.

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
00	00	9999	PAY

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

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Location	Region	EOB	Disposition
21	00	6068	PAY

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

Location	Region	EOB	Disposition
21	00	6068	DENY
21	30	6068	PAY
21	32	6068	PAY
21	33	6068	PAY
21	34	6068	PAY
21	70	6068	PAY
21	72	6068	PAY
21	73	6068	PAY
21	74	6068	PAY

EOB: 6068 - EXCEEDS ALLOWABLE THERAPEUTIC LEAVE DAYS FOR ICF/IID PATIENTS UNDER THE INDIANA HEALTH COVERAGE PROGRAMS. MAXIMUM ALLOWABLE DAYS IS 60 PER CALENDAR YEAR.

ARC Code	ARC Description	Effective Date	End Date
119	Benefit maximum for this time period or occurrence has been reached.	19950101	22991231

Remark Code	Remark Description	Effective Date	End Date
N640	Exceeds number/frequency approved/allowed within time period.	20130715	22991231

EOB: 9999 - PROCESSED PER POLICY.

ARC Code	ARC Description	Effective Date	End Date
97	The benefit for this service is included in the	19950101	22991231

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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.

METHOD OF CORRECTION:

Full Failure:

Claims setting this audit will process according to IHCP policy.

Cutback:

Claims setting this audit will systematically cutback to the approved number of units allowed.

