

Indiana Medicaid Resolutions Manual

NAME: 595 OBSOLETE REGION 91 CLAIMS SUSPEND FOR REVIEW (HDR)

ERROR TYPE: Batch Edit, Hard Coded

HEADER/DETAIL: Header

OVERRIDABLE: Y

ALLOW DENIAL: Y

DESCRIPTION:

09/05/2008 - State Approved

CRITERIA:

OBSOLETE.

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
80	00	9999	PAY

Claim Type: 0 - All Claim Types **Member Plan:** ALL **Status:** Do Not Post

Location	Region	EOB	Disposition
80	00	9999	SUPER-SUSPEND

EOB: 9999 - PROCESSED PER POLICY.

ARC Code	ARC Description	Effective Date	End Date
97	The benefit for this service	19950101	22991231

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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.

METHOD OF CORRECTION:

Edit 595

Payer = Medicaid, WCDP and WWWP

Claim Type = All

Adjudication

1. Override Edit 595 and adjudicate according to special batch instructions.