

Indiana Medicaid Resolutions Manual

NAME: 672 WAITING TIME NOT PAYABLE W/LESS THAN 50 MILES
DTL

ERROR TYPE: Batch Edit, Hard Coded

HEADER/DETAIL: Detail

OVERRIDABLE: N

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit if transportation waiting time is billed with mileage, and the mileage is less than 50 miles for the same date of service.

CRITERIA:

Set this edit if the procedure code billed is in procedure group 9-Transportation Waiting and more than 0 miles are billed but less than 50 miles for a procedure code from procedure group 1-Transportation Mileage when billed on the claim for the same date of service with, EOB 4017.

Reference Procedure Group 1-Transportation Mileage and 9-Transportation Waiting can be located in Core MMIS under Main Menu>BPA>Related Data>Open Tab>Other>HCPCS Procedure Group Type.

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 | 9999 | PAY |

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

| Location | Region | EOB | Disposition |
|----------|--------|------|-------------|
| 04 | 00 | 4017 | DENY |

Indiana Medicaid Resolutions Manual

Claim Type: M - Professional Claims **Member Plan:** PASMI **Status:** Do Not Post

| Location | Region | EOB | Disposition |
|-----------------|---------------|------------|--------------------|
| 04 | 00 | 9999 | PAY |

Claim Type: M - Professional Claims **Member Plan:** PASMR **Status:** Do Not Post

| Location | Region | EOB | Disposition |
|-----------------|---------------|------------|--------------------|
| 04 | 00 | 9999 | PAY |

Claim Type: M - Professional Claims **Member Plan:** MRT **Status:** Do Not Post

| Location | Region | EOB | Disposition |
|-----------------|---------------|------------|--------------------|
| 04 | 00 | 9999 | PAY |

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

| Location | Region | EOB | Disposition |
|-----------------|---------------|------------|--------------------|
| 04 | 00 | 4017 | DENY |

EOB: 4017 - WAITING TIME IS NOT PAYABLE W/LESS THAN 50 MILES

| ARC Code | ARC Description | Effective Date | End Date |
|-----------------|---|-----------------------|-----------------|
| 96 | Non-covered charge(s). At least one Remark Code must be provided (may be comprised of either the NCPDP Reject Reason Code, or Remittance Advice Remark Code that is not an ALERT.) Note: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present. | 19950101 | 22991231 |

| Remark Code | Remark Description | Effective Date | End Date |
|--------------------|--|-----------------------|-----------------|
| N159 | Payment denied/reduced because mileage is not covered when the patient | 20030228 | 22991231 |

Indiana Medicaid Resolutions Manual

is not in the ambulance.

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:

Claims setting this edit will be systematically denied with EOB 4017.

Encounters claims are Set to post and pay for this edit.

