

## **Indiana Medicaid Resolutions Manual**

**NAME:** 552 INVALID ADJUSTMENT MEMBER NOT FOUND

**ERROR TYPE:** Batch Edit, Hard Coded

**HEADER/DETAIL:** Header

**OVERRIDABLE:** N

**ALLOW DENIAL:** Y

### **DESCRIPTION:**

Set this edit if the member ID is not found on the adjustment.

### **CRITERIA:**

Set this edit if the member ID is not found on the adjustment with, EOB 2001.

### **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:** Post

<b>Location</b>	<b>Region</b>	<b>EOB</b>	<b>Disposition</b>
00	00	2001	DENY

**EOB: 2001 - MEMBER NUMBER NOT ON FILE. PLEASE VERIFY NUMBER AND RESUBMIT.**

<b>ARC Code</b>	<b>ARC Description</b>	<b>Effective Date</b>	<b>End Date</b>
31	Patient cannot be identified as our insured.	19950101	22991231

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### **METHOD OF CORRECTION:**

Claims Setting this edit will be systematically denied with EOB 2001.