

Indiana Medicaid Resolutions Manual

NAME: 6114 DME LIMITED TO \$5000 PER MEMBER PER LIFETIME

ERROR TYPE: Limit Audit

HEADER/DETAIL: Detail

OVERRIDABLE: N

ALLOW DENIAL: N

DESCRIPTION:

This limitation audit will set when reimbursement for durable medical equipment (DME) exceeds \$5,000 per member per lifetime.

CRITERIA:

When DME (see procedure codes within the audit rules) reimbursement exceeds \$5,000 per lifetime by any provider, set this audit with EOB 6114.

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: M - Professional Claims

Member Plan: ALL **Status:** Post

Location	Region	EOB	Disposition
21	00	6114	PAY

Claim Type: M - Professional Claims

Member Plan: ALL **Status:** Post

Location	Region	EOB	Disposition
21	00	6114	DENY

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21	30	6114	PAY
21	32	6114	PAY
21	33	6114	PAY
21	34	6114	PAY
21	70	6114	PAY
21	72	6114	PAY
21	73	6114	PAY
21	74	6114	PAY

EOB: 6114 - REIMBURSEMENT FOR DURABLE MEDICAL EQUIPMENT IS LIMITED TO \$5,000 PER MEMBER PER LIFETIME.

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. Usage: Refer to the 835 Healthcare Policy Identification Segment (loop 2110 Service Payment Information REF), if present.	19950101	22991231

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METHOD OF CORRECTION:

Full Failure:

Claims setting this audit will systematically process according to IHCP Policy.

Cutback:

Claims setting this audit will systematically cutback until the \$5000.00 per lifetime has been met.

