

## **Indiana Medicaid Resolutions Manual**

**NAME:** 6182 T1029 AND T1029 TS LEAD INVEST LIM 1 PER 12 MOS

**ERROR TYPE:** Limit Audit

**HEADER/DETAIL:** Detail

**OVERRIDABLE:** N

**ALLOW DENIAL:** Y

### **DESCRIPTION:**

This limitation audit will fail when a provider bills for more than one comprehensive environmental lead investigation visit or for more than one follow-up visit for a recipient within a rolling 12 month period.

### **CRITERIA:**

If a provider bills for comprehensive environmental lead investigation, not including laboratory analysis, per dwelling (T1029) or follow-up visit (T1029 with a TS modifier) and payment has been made to any provider for the same service for the same recipient within a rolling 12 month period of the date of service on the claim, fail this audit with EOB 6182.

### **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 |
|----------|--------|------|-------------|
| 00       | 00     | 6182 | DENY        |
| 00       | 30     | 6182 | PAY         |
| 00       | 32     | 6182 | PAY         |

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|    |    |      |     |
|----|----|------|-----|
| 00 | 33 | 6182 | PAY |
| 00 | 34 | 6182 | PAY |
| 00 | 70 | 6182 | PAY |
| 00 | 72 | 6182 | PAY |
| 00 | 73 | 6182 | PAY |
| 00 | 74 | 6182 | PAY |

**Claim Type:** M - Professional Claims

**Member Plan:** ALL **Status:** Post

| <b>Location</b> | <b>Region</b> | <b>EOB</b> | <b>Disposition</b> |
|-----------------|---------------|------------|--------------------|
| 00              | 00            | 6182       | PAY                |

**EOB: 6182** - REIMBURSEMENT FOR COMPREHENSIVE ENVIRONMENTAL LEAD INVESTIGATION INITIAL VISIT (T1029) AND FOLLOW-UP INVESTIGATION (T1029 TS) IS LIMITED TO ONCE EVERY TWELVE ROLLING MONTHS.

| <b>ARC Code</b> | <b>ARC Description</b>   | <b>Effective Date</b> | <b>End Date</b> |
|-----------------|--|-----------------------|-----------------|
| 119             | Benefit maximum for this time period or occurrence has been reached. | 19950101              | 22991231        |

| <b>Remark Code</b> | <b>Remark Description</b>                        | <b>Effective Date</b> | <b>End Date</b> |
|--------------------|--|-----------------------|-----------------|
| M90                | Not covered more than once in a 12 month period. | 19970101              | 22991231        |

**EOB: 9999** - PROCESSED PER POLICY.

| <b>ARC Code</b> | <b>ARC Description</b>  | <b>Effective Date</b> | <b>End Date</b> |
|-----------------|---|-----------------------|-----------------|
| 97              | The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated. Usage: | 19950101              | 22991231        |

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

### **METHOD OF CORRECTION:**

Full Failure: Claims failing this audit will be systematically denied.

Cutback: Claims failing this audit will be systematically cutback to the approved number of units allowed.

