

Indiana Medicaid Resolutions Manual

NAME: 7500 BILLING PROV ON PREPAYMENT REVIEW

ERROR TYPE: Batch Edit, Hard Coded

HEADER/DETAIL: Header

OVERRIDABLE: Y

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit when the Provider Restricted Services screen is set to "A" (Active) for the billing provider number. This panel can be found in Core MMIS at Provider>Search>Select row from search results>Provider>Service Location> Restricted Services

This edit will set if the billing provider on a claim is restricted from billing specific claim types, procedure, revenue, or National Drug codes, or billing claims from a specific place of service.

CRITERIA:

If the following criteria applies to the claim set this edit with EOB 7500.

- Claim type on the window is blank or is equal to claim type being processed.
- When the date billed of the claim on the Claims search panel is equal to or greater than the effective date and equal to or less than the end date. The place of service on the window is blank or is equal to the place of service on the claim.
- The Include/Exclude indicator on the window is equal to "I".
- The procedure code or revenue code on the claim falls within the appropriate low/high range displayed on the panel.
- The modifier on the restricted services panel is blank or is equal to either the first, second, or third modifier on the claim.

SPECIAL CONSIDERATIONS FOR PROCEDURE AND REVENUE CODE:

- If the claim type being processed equals "M" (medical), "D" (dental) or "H" (home health), the billing provider would be restricted by a five-digit procedure code.
- If the claim type equals "I" (inpatient) or "L" (nursing home) or "O" (outpatient) it should be assumed that the provider would be restricted by a 3-digit revenue code.

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- If the Include/Exclude indicator is equal to "E", and the procedure code, revenue code on the claim falls within the appropriate range, bypass this edit.
- If the status field is "I" it indicates that the restriction is no longer in effect for the billing provider. The claim should bypass the edit.

OTHER CODING CONSIDERATIONS:

A provider can have more than one occurrence of a restriction; therefore, each occurrence must be checked for each detail.

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

Location	Region	EOB	Disposition
30	00	7500	SUSPEND
30	10	7500	DENY
30	20	7500	DENY
30	22	7500	DENY
30	30	7500	PAY
30	32	7500	PAY
30	33	7500	PAY
30	34	7500	PAY
30	55	9999	PAY
30	62	7500	DENY
30	64	9999	PAY
30	70	7500	PAY
30	72	7500	PAY
30	73	7500	PAY
30	74	7500	PAY
30	75	7500	PAY
30	76	7500	PAY
30	77	7500	PAY
30	78	7500	PAY
30	79	7500	PAY

Claim Type: A - Inpatient Xover Claims Member Plan: ALL Status: Do Not Post

Location	Region	EOB	Disposition
30	00	9999	PAY

Claim Type: B - Professional Xover Claims

Member Plan: ALL Status: Do Not Post

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Location	Region	EOB	Disposition
30	00	9999	PAY

Claim Type: C - Outpatient Xover Claims **Member Plan:** ALL **Status:** Do Not Post

Location	Region	EOB	Disposition
30	00	9999	PAY

Claim Type: D - Dental Claims **Member Plan:** ALL **Status:** Post

Location	Region	EOB	Disposition
30	00	7500	SUSPEND
30	20	7500	DENY
30	21	7500	SUSPEND
30	22	7500	DENY
30	23	7500	SUSPEND
30	30	9999	PAY
30	32	7500	PAY
30	33	9999	PAY
30	34	9999	PAY
30	50	7500	SUSPEND
30	51	7500	SUSPEND
30	52	9999	PAY
30	55	9999	PAY
30	61	7500	SUSPEND
30	62	7500	DENY
30	64	9999	PAY
30	70	9999	PAY
30	72	7500	PAY
30	73	9999	PAY
30	74	9999	PAY
30	75	7500	PAY
30	76	7500	PAY
30	77	7500	PAY
30	78	7500	PAY
30	79	7500	PAY

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

Location	Region	EOB	Disposition
30	00	7500	SUSPEND
30	20	7500	DENY
30	21	7500	SUSPEND
30	22	7500	DENY
30	23	7500	SUSPEND

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30	30	7500	PAY
30	32	7500	PAY
30	33	7500	PAY
30	34	7500	PAY
30	50	7500	SUSPEND
30	51	7500	SUSPEND
30	52	9999	PAY
30	55	9999	PAY
30	61	7500	SUSPEND
30	62	7500	DENY
30	64	9999	PAY
30	70	7500	PAY
30	72	7500	PAY
30	73	7500	PAY
30	74	7500	PAY
30	75	7500	PAY
30	76	7500	PAY
30	77	7500	PAY
30	78	7500	PAY
30	79	7500	PAY

Claim Type: M - Professional Claims

Member Plan: PASMR

Status: Do Not Post

Location	Region	EOB	Disposition
30	00	9999	PAY

Claim Type: M - Professional Claims

Member Plan: MRT **Status:** Do Not Post

Location	Region	EOB	Disposition
30	00	9999	PAY

Claim Type: M - Professional Claims

Member Plan: PASMI

Status: Do Not Post

Location	Region	EOB	Disposition
30	00	9999	PAY

EOB: 7500 - YOUR CLAIM IS BEING REVIEWED

ARC Code

133

ARC Description

The disposition of
this service line is
pending further

Effective Date

20140701

End Date

22991231

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review. (Use only with Group Code OA). Usage: Use of this code requires a reversal and correction when the service line is finalized (use only in Loop 2110 CAS segment of the 835 or Loop 2430 of the 837).

Remark Code	Remark Description	Effective Date	End Date
N35	Program integrity/utilization review decision.	20000101	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:

Suspended claims should be reviewed and processed according to the criteria.
 Specific EOB's have been created and associated to this edit by the prepayment review team.
THE MEDICAL RECORD IS A LEGAL DOCUMENT. TO REVISE AN ERROR, DRAW SINGLE LINE THROUGH IT, MAKE CORRECTION, WRITE THE WORD "ERROR" AND DATE ERROR WAS CORRECTED. INITIALS OR SIGNATURE BY STAFF MEMBER PROVIDING SERVICE REQUIRED.

Group's	New EOB's	New PROGRAM INTEGRITY EOB Descriptions (Denial Reason)
Group A	7511	DENIED-PROCEDURE CODE BILLED DOES NOT CORRECTLY DESCRIBE SERVICE DOCUMENTED/BILLED.
Group A	7512	DENIED-PRIOR AUTHORIZATION NOT RECEIVED FOR ITEMS/SERVICES BILLED.
Group A	7513	DENIED-DOCUMENTATION DOES NOT SUPPORT LEVEL OF CODE BILLED.
Group A	7514	DENIED-ILLEGIBLE DOCUMENTATION.
Group A	7515	DENIED-NO DOCUMENTATION SUBMITTED WITH CLAIM AS REQUIRED BY PREPAYMENT REVIEW.
Group A	7516	DENIED-PROVIDER WAS PAID FOR THIS SERVICE ON ANOTHER CLAIM SUBMISSION.
Group A	7517	DENIED-DOCUMENTATION IS INSUFFICIENT TO SUPPORT CODE BILLED, PER BILLING GUIDELINES.
Group A	7518	DENIED-DATE SERVICE/ITEM BILLED DOES NOT MATCH DATE SERVICE/ITEM DOCUMENTED AS RENDERED/DELIVERED.
Group A	7519	DENIED-WRITING OVER PREVIOUS ENTRIES TO CORRECT ERRORS IS INAPPROPRIATE.
Group A	7520	DENIED-DOCUMENTATION NOT AUTHENTICATED.
Group A	7521	DENIED-PHYSICIAN CONSULTANT REVIEW DETERMINATION. DOCUMENTATION DOES NOT CONTAIN CLINICAL SIGNS/SYMPTOMS TO SUPPORT MEDICAL NECESSITY OF SERVICE.
Group A	7522	DENIED-DOCUMENTATION HAS BEEN MODIFIED WHEN COMPARED TO PREVIOUS CLAIM SUBMISSIONS.
Group A	7523	DENIED-DATE OF SERVICE NOT DOCUMENTED OR DOES NOT INCLUDE COMPLETE MONTH/DAY/YEAR.
Group A	7524	DENIED-IF AN EVALUATION AND MANAGEMENT (E&M) CODE IS BILLED ON THE SAME DATE OF SERVICE AS AN OFFICE-ADMINISTERED DRUG, A DRUG ADMINISTRATION CODE SHOULD NOT BE BILLED SEPARATELY. REIMBURSEMENT FOR ADMINISTRATION IS INCLUDED IN THE E/M ALLOWED AMOUNT.
Group A	7525	DENIED-DOCUMENTATION DOES NOT INCLUDE PATIENT DEMOGRAPHICS.

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Group A	7526	DENIED-DOCUMENTATION IS AUTHENTICATED, BUT NO DATE OF AUTHENTICATION IS INDICATED.
Group A	7527	DENIED-NO PHYSICIAN ORDER.
Group A	7528	DENIED-QUANTITY BILLED EXCEEDS QUANTITY ORDERED/ALLOWED.
Group A	7529	DENIED-ILLEGIBLE DATE OF SERVICE ON PHYSICIAN ORDER.
Group A	7530	DENIED-NO DATE OF SERVICE ON PHYSICIAN ORDER.
Group A	7531	DENIED-PHYSICIAN ORDER IS NOT SIGNED AND DATED BY A PHYSICIAN.
Group A	7532	DENIED-NO PLAN OF CARE.
Group A	7533	DENIED-INVALID OR MISSING MEMBER SIGNATURE/NAME.
Group A	7534	DENIED-TIME DOCUMENTED DOES NOT SUPPORT UNITS BILLED.
Group A	7535	DENIED-PLAN OF CARE NOT DATED BY PHYSICIAN.
Group A	7536	DENIED-INVALID PLAN OF CARE.
Group A	7537	DENIED-INVALID NOTICE OF ACTION.
Group A	7538	DENIED-INCORRECT PHYSICIAN NATIONAL PROVIDER IDENTIFIER (NPI).
Group A	7539	DENIED-NO PROGRESS NOTE.
Group A	7540	DENIED-INCORRECT ELECTRONIC SIGNATURE FORMAT, PLEASE REFER TO RULE 20 IAC 3.
Group A	7541	DENIED-NO MEMBER ID (MEMBER'S IDENTIFICATION) NUMBER.
Group A	7542	DENIED-HP (HEWLETT PACKARD) DENIAL.
Group A	7543	DENIED-INCORRECT DIAGNOSIS CODE.
Group A	7544	DENIED-NO TREATMENT PLAN.
Group A	7545	DENIED-NO CREDENTIALS DOCUMENTED AFTER SERVICE PROVIDER'S SIGNATURE.
Group A	7546	DENIED-DOCUMENTATION HAS NOT BEEN AUTHENTICATED IN A TIMELY MANNER.
Group A	7547	DENIED-RENDERING PROVIDER NOT CERTIFIED TO PROVIDE SERVICE BILLED.
Group A	7548	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group A	7549	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group A	7550	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7551	DENIED-ITEM BILLED (SIZE, QUANTITY, OR PRODUCT TYPE) DOES NOT MATCH OR IS NOT CONSISTENT WITH ITEM ORDERED BY PHYSICIAN.
Group B	7552	DENIED-WHEN MEMBER IS UNABLE TO SIGN FOR SERVICES RENDERED, DOCUMENTATION MUST INCLUDE REASON FOR

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		MEMBER'S INABILITY TO SIGN AND ENDORSER'S RELATIONSHIP TO THE MEMBER.
Group B	7553	DENIED-NO PROOF OF DELIVERY
Group B	7554	DENIED-DELIVERY TICKET PRINTED AFTER DATE OF SERVICE.
Group B	7555	DENIED-INVALID PHYSICIAN ORDER FOR DATE OF SERVICE. PHYSICIAN ORDER APPEARS TO HAVE BEEN OBTAINED AFTER DATE OF SERVICE BILLED. (NOT DOCUMENTED AS VERBAL ORDER).
Group B	7556	DENIED-NO DOCUMENTATION OF LABOR PERFORMED TO SUPPORT SERVICE BILLED.
Group B	7557	DENIED-PHYICIAN ORDER LACKED FREQUENCY AND TYPE OF TREATMENT FOR WHICH GLOVES HAD BEEN ORDERED AS PART OF PLAN OF CARE.
Group B	7558	DENIED-UNABLE TO CONFIRM QUANTITY DELIVERED. UNABLE TO CONFIRM PACKAGING.
Group B	7559	DENIED-LABOR DOCUMENTATION DOES NOT SUPPORTS UNIT BILLED.
Group B	7560	DENIED-UNABLE TO VERIFY ITEMS DELIVERED. NO VENDOR INVOICE.
Group B	7561	DENIED-UNABLE TO VERIFY DELIVERY. TRACKING NUMBERS ON VENDOR INVOICE AND UPS/FEDEX INVOICE DON'T MATCH OR NO UPS TRACKING NUMBER/REFERENCE NUMBER ON VENDOR INVOICE.
Group B	7562	DENIED-QUANTITY OF ITEM NOT DOCUMENTED ON PHYSICIAN ORDER.
Group B	7563	DENIED-UNABLE TO VERIFY QUANTITY DELIVERED. BILLED MORE/ LESS UNITS THAN DELIVERY TICKET LISTS. UNABLE TO CONFIRM COUNT PER PACKAGE.
Group B	7564	DENIED-VENDOR INVOICE DOES NOT IDENTIFY HOW MANY ITEMS PER BOX.
Group B	7565	DENIED-CLAIM IS PAST THE TIMELY FILING LIMIT
Group B	7566	DENIED-NON COVERED SERVICE(S).
Group B	7567	DENIED-CPT OR HCPCS CODE DELETED/NOT VALID.
Group B	7568	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7569	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7570	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7571	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7572	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7573	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group B	7574	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT

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Group C	7575	DENIED-NO TREATMENT PLAN OR PHYSICIAN OVERSIGHT WITHIN 90 DAYS.
Group C	7576	DENIED-NO DOCUMENTATION OF MEDICATION MANAGEMENT
Group C	7577	DENIED-DURATION OF THERAPY NOT INDICATED.
Group C	7578	DENIED-DOCUMENTATION DOES NOT INDICATE INDIVIDUALS PRESENT IN THERAPY SESSION.
Group C	7579	DENIED-SERVICE AS DOCUMENTED DOES NOT REPRESENT A BILLABLE/COVERED SERVICE.
Group C	7580	DENIED-THE MID-LEVEL PRACTITIONER RENDERING SERVICES IS NOT CREDENTIALLED TO ADMINISTER THERAPY SERVICES PER THE IHCP PROVIDER MANUAL, CHPT 8, PGS 286-287.
Group C	7581	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7582	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7583	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7584	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7585	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7586	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7587	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7588	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group C	7589	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7590	DENIED-NO PHOTOCOPY OF BITEWING X-RAY.
Group D	7591	DENIED-NO PHOTOCOPY OF PERIAPICAL X-RAY.
Group D	7592	DENIED-NO PHOTOCOPY OF PANORAMIC X-RAY.
Group D	7593	DENIED-NO X-RAY EVIDENT ON PHOTOCOPY.
Group D	7594	DENIED-DOCUMENTATION DOES NOT MATCH TOOTH NUMBER BILLED.
Group D	7595	DENIED-DOCUMENTATION OF NITROUS OXIDE MUST INCLUDE CONCENTRATION (PERCENTAGE) AND DURATION OF ADMINISTRATION.
Group D	7596	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7597	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7598	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7599	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7600	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7601	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7602	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7603	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7604	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group D	7605	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT

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Group E	7606	DENIED-UNABLE TO VERIFY ALL REGIONS BILLED
Group E	7607	DENIED-UNABLE TO VERIFY ELECTRICAL MUSCLE STIMULATION, NO TIME INDICATED.
Group E	7608	DENIED-UNABLE TO VERIFY VASOPNEUMATIC DEVICE.
Group E	7609	DENIED-UNABLE TO VERIFY NEUROMUSCULAR REDUCTION.
Group E	7610	DENIED-UNABLE TO VERIFY THERAPEUTIC PROCEDURE, NO TIME INDICATED.
Group E	7611	DENIED-MANUAL THERAPY CODES CAN NOT BE BILLED WITH MANIPULATION CODES ON SAME BODY REGION AND SAME DATE OF SERVICE.
Group E	7612	DENIED-UNABLE TO VERIFY ULTRASOUND PROCEDURE, NO TIME INDICATED.
Group E	7613	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7614	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7615	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7616	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7617	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7618	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7619	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7620	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7621	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group E	7622	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7621	DENIED-DOCUMENTATION DOES NOT SUPPORT QUANTITY OF MILES BILLED.
Group F	7624	DENIED-DOCUMENTATION DOES NOT SUPPORT TRANSPORT OF AN ATTENDANT
Group F	7625	DENIED-DOCUMENTATION SUPPORTS ONE-WAY TRIP
Group F	7626	DENIED-DOCUMENTATION DOES NOT SUPPORT WAIT TIME
Group F	7627	DENIED-DRIVER'S NAME NOT DOCUMENTED
Group F	7628	DENIED-WHEN MEMBER IS UNABLE TO SIGN FOR SERVICES RENDERED, DOCUMENTATION MUST INCLUDE REASON FOR MEMBER'S INABILITY TO SIGN.
Group F	7629	DENIED-DOCUMENTATION SHOWS MEMBER TRANSPORTED IN SAME VEHICLE WITH OVERLAPPING ODOMETER READINGS AND/OR AT SAME TIME AS ANOTHER MEMBER. MODIFIER REQUIRED.
Group F	7630	DENIED-DROP-OFF AND/OR PICK-UP TIME(S) ARE NOT DOCUMENTED.

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Group F	7631	DENIED-PICK-UP AND/OR DROP-OFF ADDRESS(ES) ARE NOT DOCUMENTED.
Group F	7632	DENIED-ODOMETER READINGS AND PICK-UP/DROP-OFF TIMES DO NOT AGREE.
Group F	7633	DENIED-ODOMETER READING(S) DOCUMENTED INCORRECTLY OR MISSING.
Group F	7634	DENIED-DISCREPANCIES FOUND WHEN COMPARING DRIVER'S TICKET AND MEMBER'S FILE.
Group F	7635	DENIED-ACCORDING TO MAPPING SOFTWARE, MEMBER RESIDES FEWER MILES FROM PROVIDER'S OFFICE THAN BILLED.
Group F	7636	DENIED-VEHICLE USED TO TRANSPORT MEMBER NOT DOCUMENTED.
Group F	7637	DENIED-RELATIONSHIP OF ATTENDANT TO MEMBER AND REASON MEMBER REQUIRED ATTENDANT MUST BE DOCUMENTED.
Group F	7638	DENIED-TRANSPORTATION SERVICES MUST BE BILLED ACCORDING TO LEVEL OF SERVICE NOT PROVIDER'S LEVEL OF RESPONSE OR VEHICLE TYPE.
Group F	7639	DENIED-AMBULATORY (CAS) OR NONAMBULATORY (NAS) NOT DOCUMENTED OR DOCUMENTATION CONTAINS CONTRADICTING INFORMATION REGARDING MEMBER'S MOBILITY.
Group F	7640	DENIED-PROVIDER IS RESPONSIBLE TO VERIFY MEMBER IS TRANSPORTED TO/FROM A MEDICAID COVERED SERVICE/FACILITY.
Group F	7641	DENIED-ONE-WAY OR ROUND TRIP NOT DOCUMENTED.
Group F	7642	DENIED-MILEAGE AND OTHER SERVICES WILL ONLY BE PAID WITH A PAID BASE RATE FOR THE SAME DATE OF SERVICE.
Group F	7643	DENIED-NAME AND/OR ADDRESS OF MEDICAID PROVIDER MEMBER IS BEING TRANSPORTED TO/FROM IS NOT DOCUMENTED.
Group F	7644	DENIED-COMPLETE ADDRESS NOT DOCUMENTED
Group F	7645	DENIED-NAME, RELATIONSHIP, AND SIGNATURE OF ACCOMPANYING PARENT/ATTENDANT MUST BE DOCUMENTED.
Group F	7646	DENIED-PICK UP OR DROP-OFF ADDRESS IS NOT VALID.
Group F	7647	DENIED-TRANSPORT CONDUCTED OUTSIDE AREA CERTIFIED BY STATE OF INDIANA AND DEPARTMENT OF REVENUE.
Group F	7648	DENIED-DOCUMENTATION DOES NOT SUPPORT NUMBER OF UNITS BILLED. A STOP ALONG WAY IS NOT CONSIDERED A SEPARATE TRIP.

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Group F	7649	DENIED-DOCUMENTATION DOES NOT SUPPORT THE NUMBER OF UNITS BILLED. ONLY ONE TRIP TICKET IS SIGNED BY MEMBER, ONLY ONE UNIT MAY BE REIMBURSABLE.
Group F	7650	DENIED-DOCUMENTATION SUBMITTED FOR REVIEW SHOWS PATIENT WAS TRANSPORTED IN THE SAME VEHICLE WITH OVERLAPPING ODOMETER READINGS AS ANOTHER PATIENT.
Group F	7651	DENIED-NO CORRESPONDING MEDICAL CLAIM TO SUPPORT REASON FOR TRANSPORT.
Group F	7652	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7653	DENIED-DISCREPANCIES FOUND WHEN COMPARING DRIVERS TICKETS.
Group F	7654	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7655	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7656	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7657	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7658	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7659	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7660	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group F	7661	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group G	7662	DENIED-NO CURRENT TREATMENT PLAN
Group H	7671	DENIED-DOCUMENTATION SUBMITTED DOES NOT SUPPORT
Group H	7674	DENIED-TIME DOCUMENTED DOES NOT INDICATE IF SERVICES RENDERED IN A.M. OR P.M.
Group H	7675	DENIED-DOCUMENTATION DOES NOT LIST TIME-IN OR TIME-OUT.
Group H	7676	DENIED-DOCUMENTATION DOES NOT INDICATE WHICH SERVICES ARE BEING PERFORMED
Group H	7677	DENIED-SERVICES RENDERED HAVE OVERLAPPING TIMES
Group H	7678	DENIED-WAIVER TRANSPORTATION ALLOWS TWO ONE-WAY TRIPS PER DAY
Group H	7679	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7680	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7681	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7682	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7683	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7684	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group H	7685	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT

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Group I	7686	DENIED-NO INDIVIDUALIZED SUPPORT PLAN
Group I	7687	DENIED-DOCUMENTATION DOES NOT SUPPORT RN'S SERVICES
Group I	7688	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group I	7689	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group I	7690	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group I	7691	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group I	7692	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group I	7693	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group I	7694	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group I	7695	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group I	7696	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group I	7697	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7698	DENIED NO 450 B OR 450 B SA/DE FORM
Group J	7699	DENIED-DATE OF SERVICE IS AFTER DATE PATIENT WAS TRANSFERRED TO ANOTHER IHCP PROVIDER.
Group J	7700	DENIED-PROVIDER NUMBER WAS DECERTIFIED BY THE INDIANA STATE DEPARTMENT OF HEALTH (ISDH).
Group J	7701	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group J	7702	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group J	7703	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group J	7704	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group J	7705	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7706	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7707	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7708	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7709	RESERVED FOR THE PROGRAM INTEGRITY DEPARTMENT
Group J	7710	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7711	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, PATIENT'S FULL NAME, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7712	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, DATE PRESCRIBED, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7713	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, DRUG NAME, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7714	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, STRENGTH, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7715	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, QUANTITY, IS NOT INCLUDED ON THE PRESCRIPTION.

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Group K	7716	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, DIRECTIONS FOR USE, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7717	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, REFILLS IF APPLICABLE, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7718	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, PHYSICIAN'S SIGNATURE, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7719	DENIED-PLEASE REFER TO BT201024, THE REQUIRED ELEMENT, PHYSICIAN'S INFORMATION, IS NOT INCLUDED ON THE PRESCRIPTION.
Group K	7720	DENIED-NO ORIGINAL WRITTEN ORDER OR PRESCRIPTION FORM FROM PRESCRIBER.
Group K	7721	DENIED-NO SIGNATURE LOG.
Group K	7722	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7723	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7724	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7725	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7726	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7727	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7728	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7729	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7730	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group K	7731	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group L	7732	DENIED-DOCUMENTATION DOES NOT SUPPORT INTENSIVE SKILL BUILDING REQUIRED FOR HABILITATION SERVICES, (CA-PRTF).
Group M	7733	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION IS NOT AUTHENTICATED.
Group M	7734	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-WHEN A MEMBER IS UNABLE TO SIGN FOR SERVICES RENDERED, THE DOCUMENTATION MUST INCLUDE THE REASON FOR THE MEMBER'S INABILITY TO SIGN AND THE RELATIONSHIP TO THE PATIENT OF THE PERSON SIGNING. DELIVERY TICKETS SHOULD ALSO BE DATED.
Group M	7735	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER

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		CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION- PLEASE REFER TO BT200130 IN REGARDS TO DOCUMENTATION REQUIREMENTS FOR ALL INCONTINENCE SUPPLIES.
Group M	7736	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION SHOULD NOT BE ALTERED OR CREATED AFTER THE FACT. ALTERING DOCUMENTATION COULD BE VIEWED AS ATTEMPTING TO OBTAIN PAYMENT INAPPROPRIATELY BY SUBMITTING FALSE CLAIMS TO FULFILL THE NEEDS OF PREPAYMENT REVIEW.
Group M	7737	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-PHYSICIAN ORDER MUST BE SIGNED AND DATED BY THE ORDERING PHYSICIAN.
Group M	7738	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DELIVERY TICKET MUST CONTAIN A FULL ITEM DESCRIPTION (INCLUDING ITEM SIZE AND/OR PACKAGING) IN ORDER TO CONFIRM ITEMS DELIVERED MATCH ITEMS BILLED.
Group M	7739	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-INSUFFICIENT DOCUMENTATION TO SUPPORT SERVICES RENDERD. UNABLE TO VERIFY ULTRASOUND PROCEDURE, NO TIME INDICATED.
Group M	7740	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-WHEN A MEMBER IS UNABLE TO SIGN THE DRIVER'S TICKET, THE DRIVER'S TICKET MUST INCLUDE THE REASON FOR THE MEMBER'S INABILITY TO SIGN.
Group M	7741	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION DOES NOT LIST DROP-OFF OR PICK-UP TIMES.
Group M	7742	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION DOES NOT HAVE A COMPLETE PICK-UP OR DROP-OFF ADDRESS. PLEASE REFER TO BT200505.

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Group M	7743	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-WRITING OVER PREVIOUS ENTRIES TO CORRECT ERRORS IS INAPPROPRIATE. THE MEDICAL RECORD IS A LEGAL DOCUMENT. TO REVISE ERROR, DRAW SINGLE LINE THROUGH IT, MAKE CORRECTION, WRITE THE WORD "ERROR" AND THE DATE ERROR WAS CORRECTED. INITIALS OR SIGNATURE BY STAFF MEMBER PROVIDING SERVICE REQUIRED.
Group M	7744	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION SUBMITTED DOES NOT LIST THE VEHICLE USED TO TRANSPORT THE MEMBER.
Group M	7745	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION SUBMITTED DOES NOT HAVE THE APPROPRIATE ODOMETER READING.
Group M	7746	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-RENDERING PROVIDER'S NAME IS NOT DOCUMENTED, PLEASE REF TO BT200505.
Group M	7747	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-WHEN AN ATTENDANT OR PARENT IS BILLED AS PART OF THE TRANSPORT, THE PARENT OR ATTENDANT MUST ALSO SIGN THE DRIVER'S TICKET.
Group M	7748	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-WHEN A MEMBER PICKS UP MORE THAN ONE PRESCRIPTION, A SIGNATURE IS REQUIRED FOR EACH PRESCRIPTION IN THE SIGNATURE LOG. MISSING SIGNATURES MAY RESULT IN DENIED CLAIMS.
Group M	7749	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-NO RID (RECIPIENTS IDENTIFICATION) NUMBER.
Group M	7750	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-SIGNATURE LOG STATES RECEIVED. NO PROOF THAT THE PRESCRIPTION WAS RECEIVED BY THE MEMBER. PLEASE PROVIDE A MEMBER SIGNATURE.

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Group M	7751	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION- WHEN A MEMBER IS UNABLE TO SIGN THE SIGNATURE LOG, THE SIGNATURE LOG MUST INCLUDE THE RELATIONSHIP OF THE PERSON SIGNING THE LOG.
Group M	7752	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION- WHEN USING PRE-FILLED IN PICK-UP/DROP-OFF TIMES, PLEASE VERIFY THE TIME FILLED IN IS CORRECT.
Group M	7753	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION- INCORRECT PROCEDURE CODE. PLEASE REFER TO BT200505, PAGES 8-9, WHEN BILLING ACCOMPANYING PARENT/ATTENDANT OR THE ADDITIONAL ATTENDANT CODES.
Group M	7754	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-BEHAVIOR MANAGEMENT CODES SHOULD BE DOCUMENTED "BY REPORT".
Group M	7755	PLEASE NOTE: PREPAYMENT REVIEW HAS PROCESSED THIS CLAIM FOR PAYMENT AND IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION OF MEDICAL NECESSITY IS REQUIRED FOR EACH SERVICE RENDERED.
Group M	7756	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-DOCUMENTATION HAS NOT BEEN AUTHENTICATED IN A TIMELY MANNER.
Group M	7757	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-NO CREDENTIALS DOCUMENTED AFTER SERVICE PROVIDER'S SIGNATURE.
Group M	7758	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-ADDRESS(ES) IS MISSING A REQUIRED ELEMENT(S). REVIEW DOCUMENTATION REQUIREMENTS IN BT200505, P 13 & 14.
Group M	7759	PREPAYMENT REVIEW EDUCATION-NO DOCUMENTATION TO VERIFY IF MEMBER IS CAS/AMBULATORY OR NAS/NONAMBULATORY.

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Group M	7760	PREPAYMENT REVIEW EDUCATION-NO DOCUMENTATION TO VERIFY IF THIS IS ONE-WAY OR ROUND TRIP.
Group M	7761	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-INSUFFICIENT DOCUMENTATION TO SUPPORT SERVICES RENDERED. UNABLE TO VERIFY PROCEDURE, DUE TO TIME ELEMENT MISSING.
Group M	7762	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION-PHYSICIAN ORDER MUST BE SIGNED AND DATED BY THE SUPERVISING PHYSICIAN.
Group M	7763	PREPAYMENT REVIEW DETERMINATION. PHYSICIANS ORDER LACKS SPECIFICITY: FREQUENCY AND/OR TYPE OF TREATMENT NOT DOCUMENTED.
Group M	7764	PREPAYMENT REVIEW IS EDUCATING THE PROVIDER CONCERNING FUTURE PAYMENTS REGARDING THIS ISSUE. EDUCATION - DOCUMENTATION SUPPORTS A HIGHER LEVEL OF CARE; CLAIM POSSIBLY UNDERCODED.
Group M	7765	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7661	DENIED-DOCUMENTATION DOES NOT SUPPORT MEMBER'S PRESENCE AT AFC. (MFP)
Group N	7664	DENIED-NO GOAL AND/OR INTERVENTION TECHNIQUE DOCUMENTED. (CA-PRTF)
Group N	7665	DENIED-NO DOCUMENTATION OF RENDERING PROVIDER, HANDWRITTEN DATE, OR SIGNATURE OF PROGRESS NOTES. (CA-PRTF)
Group N	7666	DENIED-SERVICES RENDERED HAVE OVERLAPPING TIMES, OR TRAVEL TIME BETWEEN APPOINTMENTS IS INSUFFICIENT. (CA-PRTF)
Group N	7667	DENIED-DATE OF SERVICE NOT DOCUMENTED ON ATTENDANCE SHEET. (MFP)
Group N	7668	DENIED-START AND STOP TIMES ON PROGRESS NOTES DO NOT CORRESPOND WITH TRANSPORTATION ARRIVAL AND DEPARTURE TIMES. (MFP)
Group N	7669	DENIED-DOCUMENTATION DOES NOT SUPPORT MEMBER'S PRESENCE AT ADC. (MFP)
Group N	7670	DENIED-DAILY RESPITE MUST BE BILLED FOR OVER 7 HOURS BUT NOT OVERNIGHT. HOURLY RESPITE CANNOT BE BILLED FOR MORE THAN 7 HOURS A DAY. (CA-PRTF)
Group N	7671	DENIED-ACCORDING TO CONTRADICTING INFORMATION ON THE ACD AND AFC NOTES, THIS ITEM/CLAIM IS BEING DENIED. (MFP)

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Group N	7672	DENIED-ACCORDING TO THE NOA, DATE (S) OF SERVICE BILLED ARE APPROVED FOR A DIFFERENT PROVIDER (CA-PRTF)
Group N	7766	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7767	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7768	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7769	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7770	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7771	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7772	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7771	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7774	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group N	7775	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7800	DENIED-INCORRECT NUMBER OF DRUG CLASSES BILLED.
Group O	7801	DENIED-INCORRECT NUMBER OF DRUG CLASSES BILLED.
Group O	7802	DENIED-PROVIDER CAN BILL ONLY ONE SERVICE PER DAY, PER MEMBER.
Group O	7801	DENIED-DIAGNOSIS LACKS APPROPRIATE V CODE.
Group O	7804	DENIED-V CODE NEEDS ADDITIONAL DIAGNOSIS CODE TO SHOW MEDICAL NECESSITY.
Group O	7805	DENIED-PHYSICIAN'S ORDER DOES NOT CLEARLY DEFINE REQUEST FOR PROCEDURE.
Group O	7806	DENIED-MEDICAL REVIEW/CONSULT MUST BE A SEPARATE WRITTEN REPORT PREPARED AND AUTHENTICATED BY AN MD.
Group O	7807	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7808	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7809	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7810	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7811	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7812	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7811	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7814	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7815	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7816	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7817	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7818	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT
Group O	7819	RESERVED FOR PROGRAM INTEGRITY DEPARTMENT

