

Indiana Medicaid Resolutions Manual

NAME: 1051 RENDERING PROV NOT ON PROV DATABASE (DTL)

ERROR TYPE: Batch Edit, Hard Coded

HEADER/DETAIL: Detail

OVERRIDABLE: N

ALLOW DENIAL: Y

DESCRIPTION:

Set this edit if the claim was submitted with a rendering National Provider Identifier (NPI) and the NPI does not crosswalk to the rendering Medicaid ID.

CRITERIA:

Set this edit if the rendering NPI is reported to a Medicaid ID that does not crosswalk and multiple Medicaid ID's are found with, EOB 1121.

Edit 1051 will post on claim types D,M,B for any of the following conditions:

1. The Rendering Provider is not on the claim header, and the Billing Provider is not on file. (Failed attempt to use the billing provider as the rendering provider, since the rendering provider was not present).
2. The Rendering Provider on the claim header was not successfully found on the Provider Panel (table t_pr_identifier).
3. The Rendering Provider's Service Location was not successfully found on the Service Location Panels for the NPI on the claim (tables t_pr_svc_loc, and t_pr_prov)

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 |
|----------|--------|-----|-------------|
|----------|--------|-----|-------------|

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| | | | |
|----|----|------|---------|
| 01 | 00 | 9999 | SUSPEND |
|----|----|------|---------|

Claim Type: B - Professional Xover Claims

Member Plan: ALL **Status:** Post

| Location | Region | EOB | Disposition |
|----------|--------|------|-------------|
| 01 | 00 | 1121 | DENY |

Claim Type: D - Dental Claims

Member Plan: ALL **Status:** Post

| Location | Region | EOB | Disposition |
|----------|--------|------|-------------|
| 01 | 00 | 1121 | DENY |

Claim Type: M - Professional Claims

Member Plan: ALL **Status:** Post

| Location | Region | EOB | Disposition |
|----------|--------|------|-------------|
| 01 | 00 | 1121 | DENY |

EOB: 1121 - THE RENDERING PROVIDER NPI SUBMITTED IS REPORTED TO MULTIPLE LPIS. RESUBMIT THE CLAIM WITH THE TAXONOMY OF THE RENDERING PROVIDER IN ADDITION TO THE RENDERING NPI.

| ARC Code | ARC Description | Effective Date | End Date |
|----------|---|----------------|----------|
| 208 | National Provider Identifier - Not matched. | 20070709 | 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. Note: 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:

Claims setting this edit will be systematically denied with EOB 1121.

