

| Status | Date Issue Identified | Category | Provider Type |
|--------|-----------------------|-----------------------|---------------|
| Open | 3/28/25 | Cost Share Job | All |
| Open | 2/6/25 | Claims; Configuration | All |
| Open | 3/21/25 | Claims; Configuration | Physician |

| Number of Impacted Prov Estimated Fix Date | |
|--|---------|
| TBD | 6/28/25 |

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| TBD | 5/19/25 |
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| TBD | 5/12/25 |
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Issue Description

There is a discrepancy between the BRD (Business Requirements Document) and State guidance on copay exclusions. The BRD aligns with the State Guidance but does not include all exclusions listed in the State website. Issue relates to procedure code S0109 (which appears to be the Methadone Assisted Treatment (MAT)).

Codes not on the state file (HCPC requiring NDC) are being denied EXN5 in error.

Sleep studies can be billed globally or separately using 26 (professional) and TC (technical) modifiers. When billed separately by different providers on different dates, the first claim pays, while the second pends and is manually denied (EX-DZ: Service Exceeds Authorized Limit).

Resolution

System Configuration updates needed, pending requirements. Once requirements are identified a manual process to prevent claim from applying cost share inappropriately will be implemented.

System configuration updates in progress. Once complete, all impacted claims will be reprocessed.

Authorization logic will be updated to accommodate both professional and technical services when billed by separate providers.

| Date Resolved |
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