



September 16, 2020 (Updated June 22, 2021)

Web Announcement 2306

## Inpatient Institutional Medicare Part B Claims

The following issues regarding inpatient institutional Medicare Part B claims adjudication have been resolved.

- Some inpatient institutional claims were not being reviewed for Medicare Part B payment information when Part A had exhausted or was not on file. Effective May 18, 2020, these claims for inpatient charges are reviewed appropriately. Impacted paid inpatient Medicare A exhaust claims, or claims that denied or paid incorrectly for recipients that did not have Part A coverage or that were submitted within the 365 limit and denied incorrectly with error code 676 (Date of service exceeds timely filing), will be automatically reprocessed. See [Web Announcement 2527](#) for an update.
- Inpatient claims for recipients who have Medicare Part B only and not Part A must be submitted **as other insurance (Third Party Liability)** within 365 days. Some Inpatient institutional claims with only Medicare Part B submitted as TPL over 180 days but less than 365 days that denied due to timeliness with error codes 676 (Date of service exceeds timely filing) and 677 (Timely filing limit exceeded) will be automatically reprocessed. A future remittance advice will report the results of the reprocessed claims. Effective September 8, 2020, these claims will not deny in error. **Update to this web announcement: This recycle occurred December 10, 2020, and was reported on remittance advices dated December 18, 2020.**