

October 27, 2021 (Updated March 8, 2022)
Web Announcement 2620

Update Regarding Claims for Procedure Codes with Duplicate Submissions

Claims processed on or after August 24, 2021, for some procedure codes with duplicate submissions were not denying correctly as duplicate services with error code 5035 (Exact duplicate – practitioner to practitioner). Effective with claims processed on or after October 27, 2021, these claims will deny appropriately with error code 5035.

Impacted claims for duplicate services that processed on or after August 24, 2021, through October 27, 2021, that did not deny correctly will be automatically reprocessed to recoup overpayments. A future web announcement will report the results of the reprocessed claims.

When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to Medicaid Services Manual Chapter 100 and the Billing Manual for information concerning the claim appeal process and time frames.