

June 7, 2022 Web Announcement 2797

Attention Provider Type 55 (Day and Residential Habilitation Services):

Some Claims that Adjudicated Incorrectly Have Been Reprocessed

Updates to <u>Web Announcement 2503</u>: Some claims submitted by provider type 55 (Day and Residential Habilitation Services) for recipients that were covered in a Managed Care Organization (MCO) adjudicated incorrectly. The following impacted claims have been reprocessed automatically.

- Paid claims: Professional or professional crossover claims with a PT 55 rendering provider for procedure code T2017 (Habilitation, residential, waiver; 15 minutes) with modifier UJ and dates of service on or after March 16, 2021 through January 11, 2022.
- Denied claims: Outpatient or outpatient crossover claims with a PT 55 billing provider and dates of service prior to March 16, 2021.

Results of the reprocessed claims appear on remittance advices dated June 10, 2022. Please note: 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 <u>Medicaid Services Manual Chapter 100</u> and the <u>Billing Manual</u> for information concerning the claim appeal process and time frames.