

August 8, 2022 Web Announcement 2863

Attention Provider Type 12 (Hospital, Outpatient): Duplicate Outpatient Crossover Claims Reprocessed

Update to <u>Web Announcement 2862</u>: The following duplicate outpatient hospital crossover claims submitted by provider type 12 (Hospital, Outpatient) that may have paid or denied in error have been reprocessed automatically to adjudicate correctly.

- Duplicate claims with dates of service on or after February 1, 2019, through May 30, 2022, that processed on or before May 31, 2022, and paid in error.
- Claims with dates of service on or after February 28, 2022, through May 23, 2022, that processed on or before May 24, 2022, and denied in error with error code 5027 (Possible duplicate – outpatient crossover to outpatient crossover).

Results of the reprocessed claims appear on remittance advices dated August 12, 2022, or August 19, 2022. 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.