

December 19, 2022 Web Announcement 2961

Attention Provider Type 65 (Hospice, Long Term Care):

Claims Denied With Error Code 570 Have Been Reprocessed

Claims submitted by provider type 65 (Hospice, Long Term Care) that denied the discharge day when the patient's status was 41 (Expired in a medical facility) have been reprocessed automatically. The impacted claims denied with error code 570 (Header total days not equal to days billed) and had dates of service on or after September 20, 2021, and process dates on or after August 15, 2022, through October 17, 2022.

Results of the reprocessed claims appear on remittance advices dated December 23, 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.