



March 22, 2021

Web Announcement 2453

**Attention Provider Type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies):**

**Update Regarding Claims for Procedure Codes E1399 and K0108**

Claims submitted by provider type 33 (Durable Medical Equipment, Prosthetics, Orthotics and Supplies) for procedure codes E1399 (Durable medical equipment, miscellaneous) and K0108 (Wheelchair component or accessory, not otherwise specified) with dates of service on or after March 18, 2019, through September 21, 2020, may have denied in error with error code 5035 (Exact duplicate practitioner to practitioner).

The impacted claims for procedure codes E1399 and K0108 for the same recipient, with the same rendering provider ID, same modifier, same detail and same date of service that had a different prior authorization number than the paid claim in history have been automatically reprocessed. Results of the reprocessed claims appear on remittance advices dated March 26, 2021.

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 [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.