



June 20, 2022

Web Announcement 2811

Update Regarding Behavioral Health Claims Denied if Recipient Was Covered by Medicare

Update to [Web Announcement 2638](#): Claims for procedure codes 90785 (Interactive complexity), H2011 (Crisis Intervention), H2011 with modifier GT and H2011 with modifier HT submitted by provider type 14 (Behavioral Health Outpatient Treatment) specialties 300 (Qualified Mental Health Professional), 306 (Licensed Marriage and Family Therapist) and 307 (Clinical Professional Counselor) that denied with error code 2502 (Client covered by Medicare B) have been reprocessed automatically. The impacted claims had dates of service on or after November 23, 2019, and were processed on or before November 23, 2021.

Results of the reprocessed claims appear on remittance advices dated June 24, 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.