



November 7, 2022

Web Announcement 2934

Emergency Medicaid Only Professional Claims That Paid Discharge Date in Error Have Been Reprocessed

The date of discharge, i.e., the day after the last day of the hospital prior authorization, is not covered on Emergency Medicaid Only (EMO) professional claims for recipients in the Federal Emergency Service (FES) Program. EMO-related professional claims that paid the non-covered discharge day in error have been automatically reprocessed. Impacted claims were paid in error on or after February 17, 2021, through January 18, 2022.

Effective with claims processed on or after January 18, 2022, EMO-related professional claims for the discharge day deny correctly with error code 4224 (No inpatient prior authorization for non-emergent non-citizen services).

Results of the reprocessed claims appear on remittance advices dated November 11, 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.