

March 30, 2021 Web Announcement 2460

Claims Denied with Error Codes 5003 and 5004 or Explanation of Benefits Code 8223 Have Been Reprocessed

Some claims submitted by provider type (PT) 20 (Physician, M.D., Osteopath, D.O.) with specialties 146 (Psychiatry) and 147 (Psychiatry Child), PT 47 (Indian Health Program), PT 52 (Indian Health Services Outpatient Tribal) and PT 79 (Indian Health Services Hospital Outpatient Non-Tribal) and processed after December 2, 2019, denied incorrectly with error codes 5003 (Possible conflict: PT 13 psychiatric hospital inpatient vs others) and 5004 (Possible conflict: PT 63 Residential Treatment Centers (RTC) vs others), or voided incorrectly with Explanation of Benefits (EOB) code 8223 (Services included in inpatient stay).

The impacted claims that processed on or after December 3, 2019, through July 21, 2020, have been automatically reprocessed. Results of the reprocessed claims appear on remittance advices dated April 2, 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.