

July 27, 2021 Web Announcement 2550

Professional, Professional Crossover, Outpatient and Outpatient Crossover Claims with National Drug Codes (NDC) that Denied in Error Have Been Reprocessed

Claims for Healthcare Common Procedure Coding System (HCPCS) codes submitted with a National Drug Code (NDC) that processed on or after February 1, 2019, through September 14, 2020, and denied in error with error codes 3340, 4149, 4871 and/or 4150 have been automatically reprocessed. Professional, Professional Crossover, Outpatient and Outpatient Crossover claims were impacted. This claim reprocessing effort excluded the following procedure codes: 90460, 90461, 90471, 90473, 90474 and Q9967.

Results of the reprocessed claims appear on remittance advices dated July 30, 2021, or August 6, 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.