

(Medicaid) Denied Claims

Overview

The Medicaid process makes it possible to automatically generate claim forms for children/youth on an IEP or IFSP being served by Medicaid eligible providers, and for Service Coordination for IFSP children. In addition, if the AEA is keeping track of children/youth who are receiving services, such as an evaluation, or an I-Plan from Medicaid eligible support staff person, a claim will be generated.

This part of the manual addresses denied claims.

Uniform Data Entry Procedure

At this time, there are no Uniform Data Entry Procedures related to Medicaid.

Access to Screen

From the Main Menu, select the appropriate link under the Medicaid section. Since there are several different screens, screens will appear within appropriate set of instructions.

Troubleshoot Denied Claims

The common Medicaid denial codes, their description and the subsequent action are:

| | | |
|-----|---|--|
| 020 | Recipient number is missing | Re-submit with the student's Medicaid |
| 045 | Diagnosis code is missing entered | Re-submit with the diagnosis code |
| 085 | Recipient number not on file number | Re-submit with the correct recipient |
| 097 | Service not covered for recipient | Re-submit only if eligibility for month is verified |
| 144 | Procedure billed is not valid for provider type | Re-submit with correct procedure code |
| 147 | Procedure Code not valid for the provider | Re-submit with correct procedure code |
| 170 | Place of Service is missing or invalid | Re-submit if code was missing, otherwise contact Dann Stevens at the Department of Education (DE) for assistance |
| 178 | Recipient is enrolled in a HMO | Contact Dann Stevens at DE for assistance |
| 365 | Procedure Code not allowed in Place of Service | Contact Dann Stevens at DE for assistance |
| 499 | Missing or invalid MediPASS referral | Contact Dann Stevens at DE for assistance |