



Molina Healthcare of Ohio Claims Payment Systemic Errors

March 2021

The current Claims Payment Systemic Errors (CPSEs) are listed below. Resolved issues previously reported will be removed from this log, and may be found in archived reports.

Please review the log for updates prior to contacting Provider Services at (855) 322-4079.

Description of CPSE	Date CPSE was First Identified	Billing Provider Type(s) Impacted by CPSE (select all that apply)	Timeline for Fixing CPSE	Date(s) and/or date span(s) of Corrected Claims Adjustments	Number of Claims Impacted	Status
Confirmed CPSE Some claims are paying in error when the rendering provider is a LPN and there is no ordering provider present when a certain scenario occurs.	5/20/2020	95-ODADAS Certified/Licensed (SUD) Treatment Program 84-Ohio Department of Mental Health (Community Mental Health) Provider	11/19/2020	Workaround started 05/21/2020	0- claims due to workaround	Completed
Confirmed CPSE There are several oral NDC numbers that were not configured which caused claims to incorrectly deny.	8/17/2020	01-Hospital (IP & OP) 21-Professional Medical Group	Partial fix 09/01/2020 Overall fix 11/18/2020	Batch 1 - Adjustments completed 01/25/2021 Batch 2 - Adjustments completed 02/01/2021 - 02/08/2021	Batch 1 -50 Claims Batch 2 - 51 claims	Completed
Confirmed CPSE Claims are incorrectly denying for BH services for CPT codes 90832, 90833, 90834, 90836, 90837 and 90838 for invalid place of service.	8/24/2020	12-Federally Qualified Health Center 50-Clinic 21-Professional Medical Group 05-Rural Health Clinic	Partial fix 09/9/2020 Overall fix 09/20/2020	Batch 1- Adjustments completed 10/01/2020 - 10/28/2020 Batch 2 Adjustments completed 10/21/2020 - 10/26/2020 Batch 3 - Adjustments completed 10/22/2020 - 11/06/2020 Batch 4 - Adjustments completed 11/12/2020 - 12/10/2020 Batch 5- Adjustments completed 01/12/2021 - 01/25/2021	Batch 1 - 1210 claims Batch 2- 329 claims Batch 3- 1057 claims Batch 4- 756 claims Batch 5- 169 claims	Completed
Confirmed CPSE Claims for only one MyCare Opt In member was only processing on the MMP Medicare line of business due to a loading eligibility issue which caused incorrect payments/denials.	9/24/2020	82-Ambulance 76-Durable Medical Equipment Supplier 12-Federally Qualified Health Center 01-Hospital (IP & OP) 21-Professional Medical Group	9/24/2020	Batch 1- Adjustments completed 11/23/2020 - 01/11/2021 Adjustments outside of 30 days, due to processing adjustments manually. Batch 2- Adjustments completed 11/25/2020 - 12/11/2020	Batch 1 -237 claims Batch 2- 41 claims	Completed

Confirmed CPSE The 10.1.20 Provider-Administered Pharmaceutical fee schedule was received by ODM on 9/17/20. Optum advised these updates will be completed beyond ODM's 25 calendar day requirement.	10/7/2020	01-Hospital (Outpatient)	11/5/2020	Adjustments completed 01/12/2021 - 02/08/2021 Recovery letters completed 03/05/2021	960 claims 222 claims	Completed
Confirmed CPSE E&M claims have denied in error with a remit message "Payer deems the information submitted does not support this level of service." for providers that should have been excluded from this edit.	10/16/2020	21-Professional Medical Group	10/27/2020	Adjustments completed 12/22/2020- 01/11/2021	27 claims	Completed
Confirmed CPSE A few behavioral health codes were configured incorrectly to require prior authorization effective 10/01/2020. Claims are denying for a prior authorization in error.	10/27/2020	95-ODADAS Certified/Licensed (SUD) Treatment Program 84-Ohio Department of Mental Health (Community Mental Health) Provider	1/16/2021	Batch 1 - Adjustments completed 02/09/2021 - 02/17/2021 Batch 2 - Adjustments completed 02/09/2021 - 02/12/2021	Batch 1 - 322 claims Batch 2 - 116 claims	Completed
Confirmed CPSE Behavioral Health claims for an LPN have denied incorrectly for no ordering provider, due to examiner error.	11/11/2020	95-ODADAS Certified/Licensed (SUD) Treatment Program 84-Ohio Department of Mental Health (Community Mental Health) Provider	1/8/2021	ETA for adjustments 03/01/2021 -03/26/2021	1376 claims	Fix is complete
Confirmed CPSE Claims did not take patient liability and/or did not cap the total payment at the billed charges, when applicable, due to a custom solution timing issue causing overpayments.	11/23/2020	44-Hospice 01-Hospital (IP & OP) 86-Nursing Facility 02-Psychiatric Hospital	11/24/2020	Batch 1 - Recovery letters completed 12/11/2020 Batch 2- Recovery letters completed 01/12/2021	Batch 1 - 64 claims Batch 2- 39 claims	Completed
Confirmed CPSE Behavioral Health Opioid Treatment Program (OTP) claims are denying "The provider type/provider specialty may not bill this service" in error.	12/1/2020	95-ODADAS Certified/Licensed (SUD) Treatment Program	12/8/2020	Adjustments completed 01/04/2021 - 01/21/2021	10,151 claims	Completed
Confirmed CPSE Hospice room and board claims billed on a UB claim form did not take patient liability when applicable, causing overpayments.	12/7/2020	44-Hospice	2/4/2021	Recovery letters completed 3/02/2021	204 claims	Completed
Confirmed CPSE: Claims are paying \$0.00 in error due to a cob mapping issue.	12/21/2020	82-Ambulance 50-Clinic 76-Durable Medical Equipment Supplier 12-Federally Qualified Health Center 44-Hospice 01-Hospital (Outpatient) 80-Independent Laboratory 16 & 60-Home Health Agency 95-ODADAS Certified/Licensed (SUD) Treatment Program 84-Ohio Department of Mental Health (Community Mental Health) Provider 21-Professional Medical Group 05-Rural Health Clinic 45-Waivered Services Organization	ETA 06/07/2021	Workaround started 03/04/2021	TBD	Ongoing remediation
Confirmed CPSE Claims are denying surgical code 58661 in error requiring an anatomical modifier.	12/22/2020	46-Ambulatory Surgery Center 50-Clinic 12-Federally Qualified Health Center 21-Professional Medical Group 05-Rural Health Clinic 01-Hospital (IP & OP)	2/3/2021	Adjustments completed 02/23/2021 -03/03/2021	93 claims	Completed

Confirmed CPSE: Claims for code E1390 are incorrectly paying causing overpayments.	1/19/2021	76-Durable Medical Equipment Supplier	2/1/2021	ETA for recovery 04/30/2021	7218 claims	Fix is complete
Confirmed CPSE: As a result of a CMS audit, claims for MMP Medicaid line of business (Opt-In) are not being reversed if/when the Medicare claim has been reversed, due to examiner error. This has caused overpayments.	2/3/2021	82-Ambulance 76-Durable Medical Equipment Supplier 01-Hospital (IP & OP) 16 & 60-Home Health Agency 95-ODADAS Certified/Licensed (SUD) Treatment Program 84-Ohio Department of Mental Health (Community Mental Health) Provider 21-Professional Medical Group	2/25/2021	Recovery letters completed 3/05/2021	288 claims	Completed
New Potential CPSE: Hospital claims that were being held, while rate updates were in process, were released in error which caused overpayments.	2/8/2021	01-Hospital (IP & OP)	ETA 07/26/2021	ETA 10/18/2021	TBD	Ongoing remediation
Confirmed CPSE: Molina has recovered dollars on claims that were identified as being billed with 72 hours of an inpatient stays. The error that was made was that the date that was used to calculate the 72 hours was the From date in the inpatient claim vs the admit date of the inpatient claim.	2/18/2021	01-Hospital (Inpatient)	2/18/2021	ETA for adjustments 03/02/2021 - 03/27/2021	951 claims	Fix is complete.
New Potential CPSE: Some ESRD Facilities are contracted with Molina to pay ESRD services and TDAPA HCPCS Codes J0604, J0606 according to custom rates and flat fees instead of being reimbursed in accordance with "Medicare Program Allowable Rates". Configuration was present to apply the Federal 2% Sequestration reduction for the TDAPA codes incorrectly, which caused underpayments.	2/18/2021	59-End-Stage Renal Disease (Dialysis) Clinic	3/2/2021	ETA 05/25/2021	TBD	Fix is complete.
New Potential CPSE: Claims are denying surgical code 64493 in error requiring an anatomical modifier.	3/5/2021	46-Ambulatory Surgery Center	TBD	TBD	TBD	Ongoing remediation