



Wellpoint system configuration updates

Iowa | Medicaid • Children’s Health Insurance Program

The table below provides information related to claims issues impacting several providers. This information will be updated weekly on Fridays. Continue to follow the existing process by reaching out to your provider relationship management representative for concerns.

Known system issue	Brief description	Date issue identified	Status	Provider types impacted	Number of providers impacted	Expected completion date	Expected claims reprocessing date
Code 96372	CPT® 96372 was mapped as no coverage for all dx for ages 3-999.	1/9/2024	In progress	Medical	287	3/22/2024 Complete	4/19/2024 Complete
Invalid DSNP rejections	Mapping caused supplemental record from provider data team, which impacted our code to bring records over to reference tables.	2/13/2024	In progress	Atypical	6	3/18/2024 Complete	4/18/2024 Complete
State master file Issues, invalid enrollment rejections	Wellpoint uses the Iowa Medicaid provider file to determine whether to accept or reject claims based on a provider's Medicaid enrollment status. Recent changes to a supplementary file have unintentionally affected our claim approval system edits, causing some valid claims to be mistakenly rejected. Wellpoint is now identifying the problem and is in process to accept and reimburse any correctly submitted claim from enrolled providers.	3/12/2024	In progress	Select atypical providers and some with traditional NPIs.	91	3/17/2024 Complete	4/2/2024 Complete
Over applied diagnostic restriction, procedure 19318	During an investigation into claim denials, Wellpoint found that select ICD-10-CM diagnosis, N62 is being denied in relation to procedure code 19318 (Breast reduction). Wellpoint is implanting a systematics fix to move this diagnosis to a covered benefit,	3/13/2024	Complete	Outpatient hospital	3	3/25/2024 Complete	4/12/2024 Complete

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	which will involve reprocessing any clean submission, impacted claims.						
Client participation claims	LTSS providers are noticing CP is being overpaid on claims as of March 2024. Wellpoint is implanting a systematic fix to be completed by April 16, 2024, to stop any additional overpayments.	4/10/2024	In progress	LTSS	TBD	4/14/2024 Complete	Overpayments
Home Health Overpayment	Home Health providers were experiencing overpayments when a specialty update occurred. Wellpoint has made the fix as of April 11, 2024.	3/29/2024	In progress	Home Health	155	4/11/2024 Complete	Overpayments

The below are routine, non-defect-based updates being provided for further insight into large complex projects.

Update	Brief description and status update	Date detail is available to MCOs/ partners	Status	Provider types impacted	Number of providers impacted	Expected completion date	Expected claims reprocessing date
July 2023 Nursing Facility Updates	<p>Wellpoint received rate files for the July 2023 rate updates. These rates will be updated as received. The remaining providers' NF rates will be uploaded similarly as they are received by the MCOs from HHS:</p> <ol style="list-style-type: none"> 1) Claims submitted with high enough billed charges that will require reprocessing for underpayments will occur within 30 days of configuration updates. 2) NF/SNF may also choose to self-identify claims that are now overpaid due to retroactive rate decrease for the quarter or will be scoped through post pay recovery projects, which require a minimum of 60-day advance notice. 	<p><i>Date/(and provider counts received)</i> 9/13/2023 (129) 10/9/23 (31) 10/18/23 (37) 11/9/23 (53) 11/20/23 (61) 12/6/23 (13) 12/27/23 (47) 1/22/2024 (25) 2/19/2024 (29) 3/5/2024 (1)</p>	All complete as of 4/16/2024	NF and SNF	426	Configuration is done within 30 days after receipt.	Claims reprocessed 30 days after configuration

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Addendum B	HHS posted updated file on website February 13, 2024. Wellpoint has updates configured and in production on February 21, 2024, with claims reprocessing to occur within 30 business days of this date.	2/13/2024	In progress	Out-patient Hospitals	All	2/21/2024 Complete	5/2/2024
January 2024 ER Triage Code, 99211 OCE Edits	On April 16, 2024, Wellpoint identified the need for further customization and editing for ER Triage claims, following the recent updates in Addendum B File and Info Letter 2504. Specifically, there is a requirement to bypass OCE edit 96 for January 2024 due to the delay of changing the ER Triage code from 99211 to 99281. Wellpoint is currently working on these updates for hospital outpatient records and will reprocess clean claims once the editing is completed.	4/16/2024	In progress	Hospital Out-patient/ ER	120	4/30/2024	5/30/2024
NF/ICF-ID, Special Population Facilities Revenue Code Billing Changes	<p>Effective for claims dates of service May 1, 2024, Wellpoint will be aligning our claims edit to not deny for other carrier when the following providers bill with these revenue codes/bill types. While not required or enforced at this point across the Iowa Medicaid program, we wanted to give you all an option to begin billing in this fashion to reduce claims adjudication errors, unique to <i>other carrier</i> denials. Please note all LOA revenue codes will be encompassed by this too.</p> <p>Provider type/Type of Bill/RevCode</p> <p>LTC NF/21X/0100,0101</p>	4/17/2024	In progress	NF, ICF/ID, Special Population, ICF/PMI	All	5/1/2024* Date of service change will be implemented	N/A

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	Special Population NFs/21X/0123 Ventilator Rate (Custodial)/21X/0100,0101 ICF ID/65X, 66X/0100,0101 ICF PMI/21X/0100,0101						

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