

Claims Payment Systemic Errors Report

Aetna Better Health of Ohio

December 24th, 2020



| Description of the Issue | Date Identified | Provider Type(s) Impacted | Expected Date of System Fix | Status of System Fix | Estimated Date of Adjustment Project / Provider Action | Status of Claim Project |
|---|-----------------|---|-----------------------------|----------------------|---|-------------------------|
| Aetna discovered a configuration issue pertaining to BH providers with multiple specialties. When a claim is received with a rendering provider's secondary specialty, Aetna's claim system is denying the claim for "This provider type/provider specialty may not bill this service" or paying the claim at zero dollars. | 11/8/2020 | 84-Ohio Department of Mental Health (Community Mental Health) Provider | 1/15/2020 | In Process | A manual process has been put into production to prevent new day claims from being processed incorrectly. Claims adjustment project will be submitted and completed within 60 days from date of system fix. No action needed from affected providers. | In Process |
| Aetna identified a configuration issue that when certain E&M and lab codes were billed with a CS modifier the lines were denying in error. The provider would receive a line denial for invalid HCPC with modifier. <i>*Outpatient</i> | 10/20/2020 | 01-Hospital (specify Inpatient or Outpatient) 80-Independent Laboratory 21-Professional Medical Group | 11/16/2020 | Complete | Claims adjustment project will be submitted and completed within 60 days from date of system fix. No action needed from affected providers. | In Process |
| Aetna discovered a configuration issue which was misapplying patient liability to certain provider claims. The issue was isolated to waiver services that were adjudicated on or after 9/11/2020. | 10/8/2020 | 55-Waivered Services Individual 45-Waivered Services Organization | 11/2/2020 | Complete | Claims adjustment project will be submitted and completed within 60 days from date of system fix. No action needed from affected providers. | In Process |
| Aetna recently identified a system configuration issue that was underpaying certain DME provider claims by 15% of the Medicare fee schedule. This issue was a result to a system upgrade that went into effect on 7/19/2020. | 9/11/2020 | 76-Durable Medical Equipment Supplier | 10/25/2020 | Complete | Claims adjustment project will be submitted and completed within 60 days from date of system fix. No action needed from affected providers. | In Process |
| Aetna discovered inpatient hospital claims with dates of service on or after 7/1/2020 had been incorrectly paid at the old hospital rates. | 9/9/2020 | 01-Hospital (specify Inpatient or Outpatient) | 10/6/2020 | Complete | Claims adjustment project will be submitted and completed within 60 days from date of system fix. No action needed from affected providers. | In Process |

Last Update 12/24/2020