

# Claims payment systemic errors

## UnitedHealthcare Community Plan of Ohio

### March 2021

The UnitedHealthcare Community Plan of Ohio is making this information available to participating care providers to help you better understand when we make adjustments or corrections to care provider payments.

If you have any questions about these issues, please contact Cathy Spindler at [cathy.spindler@uhc.com](mailto:cathy.spindler@uhc.com). Thank you.

Description of CPSE	Date CPSE was first identified	Billing provider types impacted by CPSE	All date(s) and method(s) providers notified of CPSE	Timeline for fixing CPSE	Date(s) and/or date span(s) of corrected claims adjustments	Number of claims impacted	Status
<b>Potential CPSE:</b> Codes 99441/99442 are denying services not contracted when billed for telehealth services. Found not to be a CPSE.	Jan. 14, 2021	20 – Physician/osteopath, individual	This issue will be listed on the published CPSE Report on the Provider Portal website for UnitedHealthcare Community Plan of Ohio for March 2021 published reports. Provider Advocate in contact with individual provider.			17	This was found not to be a CPSE. The issue impacted only 1 provider group.
<b>Confirmed CPSE: Claims with procedure codes not requiring an auth are denying for no auth.</b>	Feb. 8, 2021	84 –Ohio Department of Mental Health (Community Mental Health) Provider  95 –ODADAS Certified/Licensed (SUD) Treatment Program	This issue will be listed on the published CPSE Report on the Provider Portal website for UnitedHealthcare Community Plan of Ohio for March 2021 published reports.	Estimated March 12, 2021	Estimated by March 17, 2021	10742	Ongoing

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<b>Confirmed CPSE: EAPG claims not processing at correct rate</b>	Feb. 11, 2021	01 – Hospital (Outpatient)	This issue will be listed on the published CPSE Report on the Provider Portal website for UnitedHealthcare Community Plan of Ohio for March 2021 published reports.	Feb. 11, 2021	Estimated by March 19, 2021	660	Ongoing
<b>Confirmed CPSE: Update to Standard Operating Procedure made in error. When a claim comes in with Place of Service (POS) 50 Federally Qualified Health Clinic (FQHC) it hits a warning message stating to look at our AUTH SOP.</b>  <b>The processor follows the steps in the Standard Operating Procedure which calls out Place of Service 50. The processor then overrides the out-of-network denial to process the claim. This step was removed in error, which caused claims billed by an FQHC to deny as non-par.</b>	Feb. 11, 2021	12 – Federally Qualified Health Center  05 – Rural Health Clinic	This issue will be listed on the published CPSE Report on the Provider Portal website for UnitedHealthcare Community Plan of Ohio for March 2021 published reports.	March 4, 2021	March 9, 2021	421	Complete