

## Closed Claims Resolution Log

Below are the payment issues (both underpayments and overpayments) from the Claims Resolution Log that have been completed. For these issues, all systematic cleanup has been completed. After 8 quarters, timely filing will no longer be bypassed for underpayments. After 30 days, completed payment issues will be removed from this log. Refer to the historical versions of the Claims Resolution Log on the Bulletins page under the Publications tab on the KMAP website.

### KMMS Issues Corrected

Date Added	Item Reference Number	Affected Area	Comments	System Status	Reprocessing Plans	Post Implementation Date	Revised Date
4/4/2022	INC0039819	General Provider	KMAP is unable to return some 271 Eligibility Response transactions when a 270 Eligibility Request transaction is submitted to KMAP. Any eligibility requests that did not receive a response will need to be resubmitted after the fix is implemented.  This affected eligibility responses from 4/4/22-4/5/22.	Resolved	Providers will need to resubmit the transaction.	N/A	4/7/2022
4/4/2022	INC0039838	Pharmacy Providers	Point of Sale (POS) transactions for Fee For Service (FFS) claims are timing out because they are hitting the 10 second limit on the server. The time limit has been expanded to 30 seconds while this issue is being researched.  This affected claims submitted 4/4/22-4/6/22.	Resolved	N/A	N/A	4/7/2022
4/5/2022	INC0039874	General Provider	Provider Electronic Solutions (PES) is currently not able to send files to the Provider Portal.  This affected files submitted 4/4/22-4/7/22.	Resolved	Providers will need to resubmit these claims.	N/A	4/7/2022
4/8/2022	INC0040507	General Provider	KanCare claims submitted through the Front-End Billing Dashboard may be delayed.  This affected claims submitted from 4/4/22-4/26/22.	Resolved	N/A	N/A	4/27/2022
4/9/2022	INC0041167	General Provider	Claims for KanCare carved out services keyed as direct entry through the Provider Portal are incorrectly being routed to the Managed Care Organizations (MCO).  This affected claims submitted 4/4/22-4/9/22.	Resolved	Providers will need to resubmit these claims.	N/A	4/9/2022
4/8/2022	INC0041035	Pharmacy Providers	Some pharmacy providers are seeing \$0 payment at Point of Sale (POS) when claims have actually been paid. KMAP is making payment although the POS response shows \$0.  This affected claims submitted 4/4/22-4/8/22.	Resolved	N/A	N/A	4/9/2022
4/9/2022	INC0041056 INC0041180	Inpatient/Nursing Facility	Inpatient and Nursing Facility claims keyed as direct entry through the Provider Portal are receiving the error message "Admission Date should be within Covered Date range." This error message is preventing the claims from being accepted into the claims processing system. This issue can impact new day claims and claims being adjusted.  This affected claims submitted 4/4/22-4/12/22.	Resolved	N/A	N/A	4/11/2022
4/11/2022	INC0040817	General Provider	Claims keyed as direct entry through the provider web portal may receive the error message "Provider ID not found" when entering a Provider ID in the Provider ID field. A workaround for this issue has been provided on the Provider Portal under Provider/Helpful Information, titled "Workaround for IG Search on Web Claims".  This affected claims submissions between 4/4/22-4/13/22.	Resolved	N/A	N/A	4/13/2022
4/12/2022	INC0041506 INC0041041	General Provider	Providers are getting a generic error message when uploading x12 files to the Provider Portal. This issue is intermittent. Providers are able to get files in eventually, but this has affected multiple different submitters and multiple file types.  This affected file uploads between 4/4/22-4/15/22.	Resolved	N/A	N/A	4/15/2022

### KMMS Issues Corrected continued

Date Added	Item Reference Number	Affected Area	Comments	System Status	Reprocessing Plans	Post Implementation Date	Revised Date
4/13/2022	INC0040456	General Provider	Eligibility Reports printed from the Provider Portal are not legible. A workaround has been posted in Bulletin 22066.  This affected eligibility requests between 4/4/22-4/14/22.	Resolved	N/A	N/A	4/15/2022
4/13/2022	INC0041450	General Provider	Delegates for Provider Portal accounts are showing as terminated when delegates were previously active.  This affected accounts between 4/4/22-4/13/22.	Resolved	N/A	N/A	4/13/2022
4/14/2022	INC0040330	General Provider	The Provider Portal Profession Claim Form only allowing 5 detail lines.  Detail line maximums for Professional, Institutional, and Dental claim forms have been updated to HIPAA x12 Implementation Guide standards.  This impacted the web submissions between 4/4/22-4/8/22.	Resolved	N/A	N/A	4/14/2022
4/14/2022	INC0040330	General Provider	Member name search in the Provider Portal is not able to search names with a hyphen, names with spaces, or names with a suffix.  This affected eligibility verification searches between 4/4/22-4/8/22.	Resolved	N/A	N/A	4/14/2022
4/14/2022	INC0041504	General Provider	Some claims submitted through Electronic Visit Verification (EVV)/AuthentiCare are delayed in processing due to issues with routing to the Managed Care Organizations (MCOs).  This affected claims submitted between 4/4/22-4/20/22.	Resolved	N/A	N/A	4/22/2022
4/15/2022	INC0041836	General Provider	Providers requesting member eligibility through EDI Trading Partners real-time services are receiving an error instead of the eligibility information.  This impacted eligibility requests between 4/4/22-4/19/22.	Resolved	N/A	N/A	4/21/2022

### Underpayment System Corrected/Updated

Date Added	Item Reference Number	Affected Area	Comments	System Status	Reprocessing Plans	Post Implementation Date	Revised Date
1/31/2020	20264	General Provider	Claims may have denied for Edits 582 (NPI BILLING PROVIDER ID INVALID/INELIGIBLE ON DOS) and 583 (NPI BILLING PROVIDER ID INVALID/INELIGIBLE ON DOS) due to incorrect NPI effective dates being applied to the provider's NPI enrollment.	Prod Implementation but Post Imp indicator is N	Pending	Pending	1/31/2020
1/31/2021	21244	Professional/ Professional Crossover	Copays may have applied incorrectly to claims with a Place of Service when all other copay criteria was submitted on the claim. Claims within the prior 8 quarters will be adjusted. Claims beyond 8 quarters will need to be adjusted by providers.	Post Implementation	Ongoing	2/17/2022	1/31/2022
2/28/2022	22128	Outpatient/ Outpatient Crossover	Claims may be reprocessed due to FDA coverage guidance for HCPCS J0248 being expanded to cover ages 0-999.	Sign-Off - KDHE-DHCF Approved	Complete	3/2/2022	2/28/2022
2/28/2022	22129	Outpatient/ Outpatient Crossover	Claims with DOS 1/1/2020 or after that denied for Edits 4270 (PROVIDER TYPE AND SPECIALTY IS NOT VALID FOR PRICE) may be reprocessed due to an update to HCPCS code 22856.	Resolved	Complete	3/2/2022	2/28/2022
4/4/2022	INC0039826	General Provider	Front End Billing (FEB) claims may be routed to KMAP in error and denied with edit 2025 with EOB 2534 (Denied. These Services Are Covered Through The Beneficiary's KanCare Managed Care Organization (MCO) For The Date(s) Of Service Billed. Paper Claims Submitted To KMAP For Beneficiaries Assigned To One Of The MCOs Must Be Sent Directly To The Appropriate MCO.)  This affected claims submitted 4/4/22-4/7/22.	Resolved	Providers will need to resubmit these claims.	N/A	4/4/2022

### Underpayment System Corrected/Updated continued

Date Added	Item Reference Number	Affected Area	Comments	System Status	Reprocessing Plans	Post Implementation Date	Revised Date
4/7/2022	INC0040466 INC0040964	Pharmacy Providers	Pharmacy claims are denying in error when an active Prior Authorization is on file. This affected claims submitted 4/5/22-4/9/22.	Resolved	N/A	N/A	4/7/2022
4/8/2022	INC0040985 INC0041079	Pharmacy Providers	Pharmacy providers are unable to process AIDS Drug Assistance Program (ADAP) claims in the Point of Sale system. This affected claims submitted 4/7/22-4/8/22.	Resolved	N/A	N/A	4/8/2022

### Overpayments System Corrected/Updated

Date Added	Item Reference Number	Affected Area	Comments	System Status	Reprocessing Plans	Post Implementation Date	Revised Date
1/31/2020	20252	LEA	LEA Providers' fee-for-service claims may have routed to the MCOs due to FEB NPI Crosswalk being determined at the batch level instead of the claim level. In August of 2019 LEA Providers were asked to re-enroll due to a policy change. This resulted in LEA providers submitting claims with dates of services contained within the dates of two providers records during the month their re-enrollment was effective. FEB was routing based on the date of service of the first claim in the batch whether or not subsequent claims in that batch had dates of service that were after the re-enrollment date. Due to incorrect routing, MCOs generated payments to LEA providers for services that should only be covered by KMAP.	System corrected on 12/19/2019	For LEA claims paid in error by an MCO, recoupment of the payment by the plans will be required. The plans will be reaching out directly to impacted providers to request return of the funds paid in error. If the claim was previously successfully submitted to KMAP and an MCO and payment was received from both organizations no additional action is required. However, if the claim was only paid by the MCO, the LEA would need to resubmit the claim to KMAP so that appropriate payment can be made.	Post Imp Indicator is N	1/31/2020
1/31/2022	22048	Professional/ Professional Crossover	Claims with DOS 1/1/2018 to current with speech therapy service procedure codes 92507, 92508, 92521, 92522, 92523 and 92524 may have paid incorrectly to providers outside of the allowed provider type/specialties for those procedures.	Post Implementation	Ongoing	Ongoing	2/28/2022