## **Provider Bulletin**

**News and Information** 

February 28, 2022

## Claims Reprocessing to Correctly Report MinnesotaCare Tax as Separate Adjustments

As noted in the Jan. 31, 2022, bulletin (Updates on Claim Payment for Medicaid and Dual Plans), UCare implemented an enhancement to our EOPs and 835s to report MinnesotaCare tax as its own adjustment on Medicaid and Duals claims.

For providers who received EOPs and 835s between Feb 2, 2022, and Feb 16, 2022, for claims with a 2022 date of service, the MinnesotaCare tax was not reported separately, as intended; instead, it incorrectly reported adjustment amounts for the applicable service lines. Please note: **The payment amounts for claims for services rendered within the EOP/835s were not affected by this issue**.

Impacted 835s and EOPs displayed the disallowed amount with either a group code of "OA" or "CO" and a CARC of 137.

On impacted 835s, the issue affected the CAS segment, as listed below:

- CAS\*CO\*137\*63.72~; or
- CAS\*OA\*137\*63.72~

EOPs showed one of the following two scenarios:

Line Ctrl #	Dates of Service	Auth #	Adj Prod	Revenue Coe	Mod	Units	Charge	Allowed Amount	Adjustment Amount	Other Cont.	Denied	Patient Costshare	Payment	Group Code	Clm Adj Rsn Cd	Remark Code	Adj Qty
1			97530			3	150.00	84.75	<mark>63.72</mark>	.00	.00	.00	86.28	CO	137		3
Sub Totals						150.00	84.75	<mark>63.72</mark>	.00	.00	.00	86.28					

Line Ctrl #	Dates of Service	Auth #	Adj Prod	Revenue Coe	Mod	Units	Charge	Allowed Amount	Adjustment Amount	Other Cont.	Denied	Patient Costshare	Payment	Group Code	Clm Adj Rsn Cd	Remark Code	Adj Qty
1			97530			3	150.00	84.75	<mark>63.72</mark>	.00	.00	.00	86.28	<mark>0A</mark>	137		3
Sub Totals						150.00	84.75	<mark>63.72</mark>	.00	.00	.00	86.28					

UCare will reprocess claims that were included in this issue. They are expected to be included in claims payment runs beginning in early March and completing mid-March.

Once reprocessed, providers will see the following on the 835s and EOPs that previously had been reported incorrectly.

CAS\*CO\*45\*65.25\*\*137\*-1.53~

Line Ctrl #	Dates of Service	Auth #	Adj Prod	Revenue Coe	Mod	Units	Charge	Allowed Amount	Adjustment Amount	Other Cont.	Denied	Patient Costshare	Payment	Group Code	Clm Adj Rsn Cd	Remark Code	Adj Qty
1			97530			3	150.00	84.75	<mark>65.25</mark>	.00	.00	.00	86.28	CO CO	45		3
1			97530			3	.00	.00	<mark>-1.53</mark>	.00	.00	.00	.00	CO	137		3
	Sub Totals						150.00	84.75	<mark>63.72</mark>	.00	.00	.00	86.28				

Providers should expect the reprocessed claims to be included on remits sent up to three business days after payment is made on a claim. Providers can also access claim status and remits via <u>UCare's Provider</u> <u>Portal.</u>