

## Top Claim Submission Errors: Rejections—October 2009

In the chart below are the rejection reason code narratives for the top claim submission errors with claim tips, as appropriate. This list contains the top reason codes for hospice claims in the following states: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.

Reason Code	Reason code descriptive narrative and tips to correct and/or avoid future rejections.	Total Number of Rejections
38200	<p>This claim is an exact duplicate of a previously submitted claim where the following fields on the history and processing claim are the same:</p> <ul style="list-style-type: none"> <li>- HIC number</li> <li>- Type of bill (all three positions of any TOB)</li> <li>- Provider number</li> <li>- Statement 'from' date of service</li> <li>- Statement 'through' date of service</li> <li>- Total charges (0001 revenue line)</li> <li>- Revenue code</li> <li>- HCPCS and modifiers (if required by revenue code file)</li> </ul> <p><b>Avoiding/correcting this rejection:</b></p> <ul style="list-style-type: none"> <li>▪ Check for a previously processed claim.</li> <li>▪ Verify prior records before submitting another adjustment.</li> </ul>	69
U5211	<p>Our records indicate that the services billed on the claim were provided after the beneficiary's date of death.</p> <p><b>Avoiding/correcting this rejection:</b>            Verify the HIC number and dates of service.</p> <ol style="list-style-type: none"> <li>1) If appropriate, correct the information and submit a new claim or update returned claim.</li> <li>2) If actual date of death was reported in error to social security office that office must be contacted to correct the date.</li> <li>3) If the beneficiary is still alive, he/she must contact social security office for an interview as these cases cannot be corrected through the intermediary.</li> </ol>	40

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38031	<p>This outpatient claim is a possible duplicate to a previously submitted outpatient claim and the following conditions exist:</p> <ol style="list-style-type: none"> <li>1) Statement 'from' and 'thru' dates overlap;</li> <li>2) Provider numbers are the same;</li> <li>3) At least one revenue code line matches;</li> <li>4) The diagnosis code(s) on both the history and incoming claim are the same;</li> <li>5) If the history or incoming claim has one of the following HCPCS modifiers - LT, RT, E1-E4, FA, F1-F9, TA or T1-T9 for the same HCPCS, and same date of service, and the incoming or history claim has a blank HCPCS modifier, or the HCPCS modifier isn't equal to the following -LT, RT, E1-E4, FA, F1-F9, TA or T1-T9;</li> <li>6) At least one HCPCS code is the same on both claims</li> <li>7) If HCPCS/modifier (LT, RT, E1-E4, FA, F1-F9, TA or T1-T9) are equal on both the incoming and history claim, the reason code will assign.</li> </ol> <p><b>Avoiding/correcting this rejection:</b></p> <ul style="list-style-type: none"> <li>▪ Verify the 'from' and 'through' dates on the bill.</li> <li>▪ Verify provider number, revenue codes, HCPCS codes, and line item date of service.</li> </ul> <p>If all information is correct, add the charges from the incoming claim to those of the paid claim.</p>	37
39929	<p>Each line of charges on this claim has been rejected and/or rejected and denied.</p> <p><b>Avoiding/correcting this rejection:</b></p> <p>Verify the line level rejection information to determine the rejection for each of the lines of the claim in question.</p>	35

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38032	<p>This outpatient claim is a duplicate of a previously processed outpatient claim. The following situations exist:</p> <ol style="list-style-type: none"> <li>1) The 'statement covers period' is the same on both bills</li> <li>2) Provider numbers are the same</li> <li>3) At least one revenue code or one HCPCS code is the same on both bills</li> <li>4) At least one diagnosis code matches on both claims</li> <li>5) At least one line item date of service for lab charges is the same on both claims.</li> </ol> <p><b>Avoiding/correcting this rejection:</b></p> <ul style="list-style-type: none"> <li>▪ Verify the 'from' and 'through' dates on the bill.</li> <li>▪ Verify provider number, revenue codes, HCPCS codes, diagnosis codes, and line item dates of service.</li> </ul> <p>If all information is correct, add the charges from the incoming claim to those of the paid claim.</p>	27
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