

Donald Ross, Manager
Operations and Policy

Number: DMAP-IM-15-016

Authorized Signature

Issue Date: 11/5/2015

Topic: Medical Benefits

Subject: Provider announcement: Mass adjustment of hospital inpatient claims planned for November 20, 2015

Applies to:

- | | |
|--|--|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Aging and People with Disabilities |
| <input type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Other (please specify): Health Systems
(formerly AMH and MAP) staff |
| <input type="checkbox"/> County DD Program Managers | |

Message:

The Division will post the following [Oregon Health Plan provider announcement](#). It explains that Oregon Diagnosis-Related Grouper (DRG) hospitals will have 2014-2015 inpatient claims reprocessed the weekend of November 20.

If you have any questions about this information, contact:

Contact(s):	Angel Wynia, Operations and Policy Analyst		
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E-mail:	angel.wynia@state.or.us		



DIVISION OF MEDICAL ASSISTANCE PROGRAMS

Kate Brown, Governor



Date: November 5, 2015
To: Oregon DRG hospitals
From: Don Ross, Manager
Operations and Policy

500 Summer St NE E44
Salem, OR, 97301
Voice: 1-800-336-6016
FAX: 503-945-6873
TTY: 711
www.oregon.gov/OHA/healthplan

Subject: Fee-for-service inpatient claim reprocessing planned for November 20, 2015

The weekend of November 20, 2015, OHA will reprocess inpatient claims paid from **October 1, 2014** through **September 11, 2015**. We are writing to you to let you know why this activity is happening and how this reads on your remittance advice (RA) from OHA.

Why is this happening?

The Version 32 MS-DRG grouper became effective October 1, 2014. Unfortunately, we could not update our system with this grouper until the weekend of September 11, 2015.

Because of this delay, we now need to reprocess claims to apply the Version 32 grouper to appropriate claims.

What should you do?

No action is required on your part.

What you will see on the paper remittance advice

The Claim Adjustments section will list the affected claims by original Internal Claim Number (ICN).

- Each ICN will have an adjustment ICN (beginning with “52”) to indicate reprocessing activity.
- The “Detail EOBs” will list Explanation of Benefits (EOB) code *EOB 8136 – DHS initiated adjustments due to processing error*. Recoveries will show a “Net Overpayment.” OHA will compensate for this recovery through a “Non-Claim-Specific Payout” (shown on the Financial Transactions page of the RA).

What you will see on the electronic remittance advice (ERA) or Provider Web Portal

In both the ERA and Provider Web Portal, the reason for the reprocessing will be *Adjustment Reason Code 0084 – Prior processing information appears incorrect*.

Questions?

If you have any questions about this announcement, contact the Provider Services Unit at dmap.providerservices@state.or.us or call 1-800-336-6016. We are available Monday through Friday, anytime between 8 a.m. to 5 p.m. (including lunch hours).

Thank you for your continued support of the Oregon Health Plan and the services you provide to our members.