



## HEALTH SYSTEMS DIVISION

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**Date:** October 14, 2022

**To:** Oregon DRG hospitals

**From:** Donny Jardine, Transformation Programs manager  
Medicaid Programs

**Subject:** Fee-for-service reprocessing of inpatient claims planned for October 17, 2022.

The weekend of October 17, 2022, the Oregon Health Authority (OHA) plans to reprocess all inpatient claims paid between **October 1, 2021** and **August 7, 2022**.

### Why is this happening?

On August 7, 2022, OHA updated its claims system with Version 39 and 39.1 of the Medicare Severity Diagnosis Related Group (MS-DRG) grouper software. The October 17, 2022 reprocessing will ensure that the claims listed above comply with this update.

### What should you do?

No action is required on your part.

### What you will see on the paper remittance advice

The Claims Paid section will list the affected claims with a Detail EOB code of *8008: Provider Requested Claim Adjustment Due to Misc. or Unspecified Error*.

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

Both the ERA and Provider Web Portal will list *Adjustment Reason Code 16: Claim/service lacks information or has submission/billing error(s) which is needed for adjudication*. Again, no action is required on your part.

### Questions?

If you have any questions about this announcement, contact the Provider Services Unit at [dmap.providerservices@dhsaha.state.or.us](mailto:dmap.providerservices@dhsaha.state.or.us) or call 800-336-6016. We are available Monday through Friday between 8 a.m. and 5 p.m.

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