



HEALTH SYSTEMS DIVISION

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To: Oregon DRG hospitals

From: Donald Jardine
Medicaid Programs, Health Systems Division

Subject: Fee-for-service reprocessing of outpatient claims planned for October 30, 2020

The weekend of October 30, 2020, the Oregon Health Authority (OHA) will reprocess all outpatient claims paid from **January 1, 2020** through **March 31, 2020**.

Why is this happening?

On March 31, 2020, OHA updated its claim system with January 1, 2020, Ambulatory Payment Classification (APC) pricing. The October 30, 2020 reprocessing will apply the updated pricing to the claims paid during the identified timeframe.

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@dhs.oha.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.