

Claims payment systemic errors

UnitedHealthcare Community Plan of Ohio – April 2025

Updated on April 14, 2025

The UnitedHealthcare Community Plan of Ohio is making this information available to participating health care professionals to help you better understand when we identify claims payment systemic errors (CPSEs) and the action we've taken to adjust the payments and correct the errors.

If you have any questions about these issues, please contact Diane Jordan at diane.jordan@uhc.com. Thank you.

Unique ID and description of claims payment systemic errors (CPSE)	Line of Business	Date CPSE was first identified	Billing provider types impacted by CPSE	Timeline for fixing CPSE	Date(s) and/or date span(s) of corrected claims adjustments	CPSE status
<p>CPSE issue #3: Denied vision claim – Confirmed CPSE issue</p> <p>March Vision erroneously denied payment for a lens fitting. Because the fitting was done in a Federally Qualified Health Center, it should have been paid.</p> <ul style="list-style-type: none">• Number of billing providers impacted: 6• Number of claims impacted: 32	Medicaid	March 4, 2025	12-Federally Qualified Health Center	We updated the system on March 26, 2025.	We adjusted and paid the claims on March 31, 2025.	Completed

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<p>CPSE issue #4: Denied dental claims – Potential CPSE issue</p> <p>Dental Benefit Providers was incorrectly denying claims for timely filing within the allowed time frame. Dental providers have 12 months from the date of the primary explanation of benefits (EOB) to submit claims.</p> <ul style="list-style-type: none"> • Number of billing providers impacted: 3 • Number of claims impacted: 14 	Medicaid	March 5, 2025	30-Dentist, Individual	We updated the system on March 23, 2025.	We adjusted the claims and sent the payments on March 31, 2025.	This is not a CPSE issue since only 3 health care providers were affected.
<p>CPSE issue #5: Incorrect ventilator payment on hospice claims.</p> <p>We're incorrectly paying the room-and-board rate (vent rate) on claims.</p> <ul style="list-style-type: none"> • Number of billing providers impacted: 5 • Number of claims impacted: 18 	Medicaid	March 20, 2025	44-Hospice	We're unable to update the system to validate the facility in box 80. We put a pend in place and updated our standard operating procedures to manually review and price these claims.	We adjusted the claims and sent the payments on April 7, 2025.	Completed