

# Claims payment systemic errors

UnitedHealthcare Community Plan of Ohio – March 2025

Updated on March 13, 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](mailto: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 |
|---|------------------|--------------------------------|---|--|--|-------------|
| <b>IFP Coordination with Medicaid — Confirmed CPSE issue</b><br>The UnitedHealthcare system wasn't recognizing the primary explanation of benefits (EOB) from the exchange. <ul style="list-style-type: none"><li>• Number of billing providers impacted: 9</li><li>• Number of claims impacted: 43</li></ul> | Medicaid         | Jan. 10, 2024                  | 00-All provider types                   | We worked on the system update, with an estimated completion on March 1, 2025. This is a global issue. | Not applicable. We identified claims on the front end daily and paid them. No adjustments were required. We updated the system on Feb. 16, 2025. | Completed   |

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|---|------------------|--------------------------------|---|--|---|-------------|
| <p><b>PS2 denied in error for CPT code 90661 – Confirmed CPSE issue</b></p> <p>From July 1–Sept. 30, 2024, our system erroneously denied CPT® code 90661 as PS2: uncovered service. Originally, when the Ohio Department of Medicaid (ODM) updated the fee schedule in July to show 90661 as a covered benefit with a \$33.92 payment, it didn't include an effective date. On Oct. 1, 2024, ODM corrected the fee schedule to show an effective date of July 1, 2024. We correctly paid 90661 claims at \$33.92 since Oct. 1, 2024.</p> <ul style="list-style-type: none"> <li>• Number of billing providers impacted: 20</li> <li>• Number of claims impacted: 421</li> </ul> | Medicaid         | Nov. 5, 2024                   | 00-All provider types                   | We completed the system update on Dec. 20, 2024. | Manual claim adjustments aren't needed. We corrected our system to pay incoming 90661 claims with service dates starting on Oct. 1, 2024, at \$33.92 and created a CEAP to automatically reprocess claims from July 1–Sept. 30, 2024. We submitted the claims for adjustment on Jan. 7, 2025, under project ACET # 85164833. We completed all claim adjustments on Feb, 23, 2025. | Completed   |

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|---|------------------|--------------------------------|---|--------------------------|---|-------------|
| <p><b>Denied vision claim – Potential CPSE issue</b></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"> <li>• Number of billing providers impacted: TBD</li> <li>• Number of claims impacted: TBD</li> </ul>  | Medicaid         | March 4, 2025                  | 12-Federally Qualified Health Center    | TBD                      | TBD   | In process  |
| <p><b>CPSE issue #4: Denied dental claims – Potential CPSE issue</b></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"> <li>• Number of billing providers impacted: TBD</li> <li>• Number of claims impacted: TBD</li> </ul> | Medicaid         | March 5, 2025                  | 30-Dentist, Individual                  | TBD                      | TBD   | In process  |