

IlliniCare Health Denial Allocation Upgrades

IlliniCare Health currently has been working to lower our claim denial rates and disburse a more appropriate reason for procedures historically being denied as "EX46 – DENY: THIS SERVICE IS NOT COVERED). We have implemented a system update, which we have outlined below.

MLTSS Services (Managed Long-term Services and Supports)

The Managed Long Term Service and Supports program is one of Illinois' mandatory managed care programs. This program is for seniors and persons with disabilities who have full Medicaid and Medicare benefits and have opted out of the Medicare-Medicaid Alignment Initiative.

https://www.illinois.gov/hfs/medicalclients/managedcare/pages/longtermservicesfags.aspx

IlliniCare Health has recently updated our claims processing system to redirect MLTSS claim denials from EX46 (DENY: THIS SERVICE IS NOT COVERED) to denial code EXHO (SERVICES NOT COVERED UNDER MLTSS). The newly allocated denial code/description will be applied when services billed for MLTSS members are not reimbursable under the IlliniCare Health MTLSS benefit package.

Medicare Reimbursable Procedures

IlliniCare Health has recently updated the claims processing system to redirect the claim denials from EX46 (DENY: THIS SERVICE IS NOT COVERED) to denial code EXMd (MEDICARE ONLY PROCEDURE CODE. PROC NOT COVERED). The HFS Practitioner fee schedule has approximately 360 procedure codes that are noted as Medicare benefits only (Program Coverage 09) and services have no Medicaid reimbursement rate.

Prog Cov (Program Coverage)	04-Medicaid covered services. 09-Qualified Medicare Beneficiary (QMB) coverage only.
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https://www.illinois.gov/hfs/MedicalProviders/MedicaidReimbursement/Pages/Practitioner.aspx

Reminder:

Please verify member's coverage using the MEDI eligibility system, prior to submitting claims.

As always, we thank you for providing excellent care to our members. If you have questions, please call (866) 329-4701 or contact your respective Provider Relations Specialist.