



**Date:** February 9, 2016  
**To:** All hospital providers  
**From:** Don Ross, manager  
Medicaid Operations and Policy, Health Systems Division<sup>1</sup>

**Subject:** Fee-for-service inpatient claim reprocessing scheduled for February 12, 2016

The weekend of February 12, 2016, the Oregon Health Authority will reprocess approximately 500 inpatient hospital claims paid from October 1, 2015, through December 11, 2015.

### Why is this happening?

We learned that our system incorrectly denied some claims:

- Some were denied for diagnosis codes that had a missing or invalid “present on admission” (POA) indicator, even though the codes did not require such an indicator.
- Some were denied for “other provider preventable condition” (OPPC) diagnosis codes, even though the codes were not OPPC codes.

We corrected the POA error on November 5, 2015, and OPPC error on December 11, 2015. We now need to reprocess the claims so that they also get corrected.

### 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 Explanation of Benefits (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 129: *Prior processing information appears incorrect*. 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@state.or.us](mailto:dmap.providerservices@state.or.us) or call 1-800-336-6016. We are available Monday through Friday, anytime between 8 a.m. and 5 p.m. (including lunch hours).

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

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<sup>1</sup> The Addictions and Mental Health Division and Division of Medical Assistance Programs are now united as the Health Systems Division.