

# interChange Provider Important Message

## Attention: Inpatient Hospitals

### Inpatient Behavioral Health Claims (Updated 10/16/17)

DXC Technology previously identified an issue with inpatient behavioral health claims incorrectly reimbursing the entire claim when there were not enough Prior Authorization (PA) units to cover the entire inpatient stay. The impacted claims were identified and reprocessed and appeared on the September 12, 2017 Remittance Advice (RA) with an Internal Control Number (ICN) beginning with region code 52. The inpatient claims were adjusted to pay the correct number of days per the Prior Authorization (PA) on file.

If the hospital received 2 PAs from Beacon Health Options for the one inpatient admission, the claim was reprocessed only using 1 PA on file. The reprocessed inpatient claim only had one room and board detail on the claim thereby not using all the units from both PAs, causing the claim to cut-back the reimbursement.

The Hospitals can adjust their inpatient claims and split the room and board detail to match the 2 PAs on file. The inpatient claim will then be able to tie to both PAs.

Scenario:

- Inpatient Behavioral Health Claim was for 9/1/2017 - 9/21/2017 for 20 days and the hospital billed the room and board charges on the first detail RCC 124 9/1/2017 - 9/21/2017 for 20 units. The hospital received 2 PAs from Beacon Health Options.

PA #1 for 9/1/2017 - 9/12/2017 11 units

PA #2 for 9/12/2017 - 9/21/2017 9 units

Due to the 2 PAs the claim processed using the first PA and allowed only 11 units. For this scenario to process correctly, the hospitals can split the Room and Board detail to match the units approved on the PA. See below:

FDOS	TDOS	RCC	Units	Billed Amt.
9/1/2017	9/21/2017	124	20	\$10,000
<b>Change to</b>				
9/1/2017	9/21/2017	124	11	\$5500
9/1/2017	9/21/2017	124	9	\$4500