

PROVIDER BULLETIN

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CLAIM CONFIRMATION / ERROR REPORT

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All electronic claim transactions submitted to MO HealthNet generate a Claim Confirmation / Error Report which is available on the MO HealthNet Billing Web site at www.emomed.com. This report is used to notify providers of the outcome of the Internet claim records submitted for the current cycle. Both accepted records and rejected records are contained in this report.

Currently, only Claim Adjustment Reason Codes are used to report the status of the accepted or rejected claims/service lines. In order to supply providers with a more precise explanation, MO HealthNet will start reporting Remittance Advice Remark Codes when required by the Claim Adjustment Reason Code definition (*at least one Remark Code must be provided*).

This change will be reflected on all Claim Confirmation / Error Reports generated after Monday, August 24, 2009. The addition of the Remittance Advice Remark Code to the Claim Confirmation/Error Report will add new data fields and therefore, increase the length of the report. The new data fields have been added to the end of the layout. The updated report layout follows.

INTERNET CONFIRMATION / ERROR LAYOUT

FIELD NUMBER	DESCRIPTION	DISP	LENGTH
01	ICN	1	13
02	Comma	14	1
03	Provider Number	15	9
04	Comma	24	1
05	Participant Number	25	8
06	Comma	33	1
07	Participant Name	34	32
08	Comma	66	1

FIELD NUMBER	DESCRIPTION	DISP	LENGTH
09	Patient Account Number/Prescription Number	67	20
10	Comma	87	1
11	Claim Type	88	1
12	Comma	89	1
13	From Date of Service	90	8
14	Comma	98	1
15	Thru Date of Service	99	8
16	Comma	107	1
17	Billed Amount	108	9
18	Comma	117	1
19	Paid Amount	118	9
20	Comma	127	1
21	Claim Status	128	1
22	Comma	129	1
23	Reason Code 1	130	3
24	Comma	133	1
25	Reason Code 2	134	3
26	Comma	137	1
27	Error Message	138	160
28	Comma	310	1
29	NPI	311	10
30	Comma	321	1
31	Taxonomy	322	10
32	Comma	332	1
33	Remark Code 1	333	5
34	Comma	338	1
35	Remark Code 2	339	5

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Website at <http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via e-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

**Provider Communications Hotline
573-751-2896**