



WELLCARE KNOWN ISSUE LIST

Please be advised: Claims that have either rejected or denied appropriately and associated to any of the items listed on the following pages are not considered inclusive of the resolution indicated.

You should contact your local Provider Relations representative at 1-877-378-2488 if you have any questions or concerns regarding any of the following.

OPEN PROJECTS- PROFESSIONAL

EOP Denial Code or Rejection Reason Code	Issue Description	Service Type	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	# Of Claims Impacted	Reprocessing Status
DN001: Prior auth required but not obtained INMOD: Procedure code not payable on fee schedule	Child First Services- update for CPT code 99499	99499	02/24/2022	03/07/2022		23	In Process
DN018: Must submit an EOB from primary insurance carrier	EPSDT claims denying for primary EOB for services that should be paid as primary by the Health Plan	EPSDT: claims billed with EP modifier	3/28/2022	03/09/2022		2636	In Process
DN018: Must submit an EOB from primary insurance carrier	Maternity services denied for DN018 (requesting EOB from primary insurance) in error as Maternity services pay claims as primary.	Maternity services	3/31/2022	3/25/2022		1387	In Process

OPEN PROJECTS – INSTITUTIONAL

EOP Denial Code or Rejection Reason Code	Issue Description	Service Type	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	# of Claims Impacted	Reprocessing Status
DN018: Must submit an EOB from primary insurance carrier	Maternity services denied for DN018 in error as Maternity services should always pay as primary.	Maternity services	3/31/2022	3/25/2022		1387	In Process

CLOSED PROJECTS- PROFESSIONAL							
EOP Denial Code or Rejection Reason Code	Issue Description	Service Type	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	# of Claims Impacted	Reprocessing Status
DN001: Prior auth required but not obtained	Radiology services denied for no authorization when valid authorizations exist (NIA vendor)	PT/OT/ST	2/22/2022	3/17/2022	3/15/2022	336	Complete
NOFEE: Code is not a covered service on your fee schedule	Ophthalmologist are loaded with the Optometry fee schedule and provider states they should be reimbursed at the Physician Fee Schedule	OPHTH	09/30/2021	10/27/2021	11/03/2021	557	Complete
N/A	O&P Fee schedule with manually priced codes	O&P	10/1/2021	10/15/2021	10/8/2021	7	Complete
DN001: Prior auth required but not obtained	Incorrect authorization denials for newborn claims	ALL	10/25/2021	11/25/2021	11/23/2021		Complete
N/A	PHP PAP Ambulance providers underpaid	Ambulance	12/2/2021	12/25/2021	12/9/2021	249	Complete
DN001: Prior auth required but not obtained	Non PAR treat as PAR; non par claims denied for no prior authorization during 9/30/21 - 11/30/21 period when non par providers were to follow PAR auth rules	ALL	11/3/2021	12/31/2021	1/5/2022	6184	Complete
INMOD: Procedure code not payable on fee	Fee Schedule issue causing H2022 code to deny NOFEE & INMOD- 2 Part Project: Part 1 for TJ & HE	MULTI	2/8/2022	2/22/2022	2/18/2022	76	Complete

schedule; NOFEE: Code is not a covered service on your fee schedule	modifiers, Part 2 for CR, GT and blank modifiers						
IH033: Exceeds clinical guidelines; IH038: Inconsistent modifier used or required modifier is missing; IH199: Requirements not met for reported services or items	DME & O&P coding denials when billing with KX & KS modifiers	DME & O&P	1/30/2022	2/11/2022	2/11/2022	1381	Complete
INMOD: Procedure code not payable on fee schedule; NOFEE: Code is not a covered service on your fee schedule	DME & O&P denials due to providers not configured with correct fee schedule per NC price grid	DME & O&P	11/11/2021	2/24/2022	2/24/2022	652	Complete
DN001: Prior auth required	PT/OT authorization denials for NIA vendor	ALL	2/22/2022	3/10/2022	3/3/2022	577	Complete

but not obtained							
Multiple	J1050 incorrectly denied for multiple reasons (NDCTT was primary denial)	MULTI	2/22/2022	3/4/2022	3/4/2022	959	Complete

CLOSED PROJECTS- INSTITUTIONAL							
EOP Denial Code or Rejection Reason Code	Issue Description	Service Type	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	# of Claims Impacted	Reprocessing Status
NDCTT: Drug manufacturer labeler is not allowed for rebate	Physician administered drugs not pricing according to the fee schedule	ALL	10/07/2021	10/22/2021	10/21/2021	9447	Complete
N/A	FQHC T1015 Denial	FQHC	9/28/2021	2/10/2022	2/8/2022	432	Complete
IH118: Service is incidental service, not separately payable	Incorrect bundling of lab services	ALL	11/3/2021	12/20/2021	12/3/2021	22,738	Complete
IH041: Place of service inappropriate for procedure	Dental ASC claims denied in error for invalid place of service IH041	ASC Dental claims	10/24/2021	11/19/2021	11/17/2021	202	Complete
Underpayments	PHP PAP Ambulance providers underpaid	Ambulance	12/2/2021	12/10/2021	12/9/2021	249	Complete
BMCD: Bill Medicaid directly	Dental surgery services incorrectly denying to bill Medicaid directly for ASC facilities	ASC facilities	12/3/2021	1/15/2021	1/19/2022	111	Complete
NDCUU: The submitted NDC/HPCS combination is not valid, NDCZZ: Required NDC	Claims validated against the NC NDC crosswalk table incorrectly and denied.	ALL	2/1/2022	2/22/2022	2/15/2022	290	Complete

Code is missing							
Multiple	Ambulance ONE CALL claims denying for multiple reasons; configuration update to reflect appropriate denial reason code; claims adjusted to reflect ONECA denial reason	ALL	1/4/2022	2/28/2022	3/1/2022	345	Complete
Multiple	J1050 incorrectly denied for multiple reasons (NDCTT was primary denial)	J1050	2/15/2022	3/4/2022	3/4/2022	959	Complete
DN001: Prior auth required but not obtained	Authorizations not required for Home Health providers during TOC period (Part 1)	Home Health	9/29/2021	03/25/2022	3/15/2022	32	Complete