



Dear Provider,

Cenpatico is planning to enhance the edits on paper and electronic claims. These edits will be introduced in phases starting in June and continue through July. These claims edits will align our systems more closely with the state required claim standards. Claims hitting against these edits will result in rejections and/or denials.

Below, please find the following edits that will be introduced. Please note these are required depending upon "claim type and location of service" provided. Some of these edits may or may not apply to claims submitted by your office.

<b>EDIT DESCRIPTIONS</b>
• <b>Revenue code missing when required or invalid</b>
• <b>HCPCS code missing when required or invalid</b>
• <b>ICD9 code missing when required or invalid</b>
• <b>Patient status or admission type missing</b>
• <b>Place of service missing (location code) or invalid</b>
• <b>Modifier invalid</b>
• <b>Procedure code missing when required or invalid</b>
• <b>Type of bill missing or invalid</b>
• <b>Performing Provider NPI# not Registered with the State</b>
• <b>Present on Admission Indicator (POA) missing when required or invalid</b>

Having all fields accurate and complete on your claims will allow prompt adjudication and payment, and will eliminate resubmissions.

Thank you for serving MHS members. We value our relationship with you as we continually strive to improve our processes. If you have questions about the edits in this letter, please call Cindy Smith, Provider Relations Specialist, at 1-877-647-4848 ext. 20268, or myself at ext. 20257.

Sincerely,

Mark Fisher  
Manager, Network Development