



Description of CPSE	Date CPSE was First Identified	Billing Provider Type(s) Impacted by CPSE (select all that apply)	Timeline for Fixing CPSE	Date(s) and/or date span(s) of Corrected Claims Adjustments	CPSE Status	Number of Claims Impacted
CONFIRMED CPSE- Aetna discovered a configuration issue pertaining to BH providers with multiple specialties. When a claim is received with a rendering provider's secondary specialty, Aetna's claim system is denying the claim for "This provider type/provider specialty may not bill this service" or paying the claim at zero dollars.	11/8/2020	84-Ohio Department of Mental Health (Community Mental Health) Provider	4/16/2021 (CPTs H2019, H2017, H0036, and H0006 were completed). 10/15/2021 Fix date for remaining BH codes H0001, H0004, H0005, H0010, H0011, H0012, H0014, H0015, H0038, H0040, H0048, H2012, H2015, H2020, H2034, H2036).	A manual work-around process was put into production on 12/04/2020 to prevent new day claims for being processed incorrectly. Previous effected claims are anticipated to adjudicated by 12/31/2021 Claims project was delayed due to reported issue listed on Row 4.	FIX IS COMPLETE	TBD
CONFIRMED CPSE - Aetna identified an issue through the Burgess pricing tool that was incorrectly denying RAP claims for not having a secondary diagnosis code listed on the claim.	5/18/2021	16 & 60-Home Health Agency 86-Nursing Facility	5/26/2021	Claims went through mass readjudication on 10/07/2021. Fallout out Claims were reviewed and reprocessed from 10/08/2021 thru 10/19/2021.	COMPLETED	687
CONFIRMED CPSE - Additional variations of certain specialty types (i.e. QMHS Masters/Bachelors/High School, and MD/DO) weren't added to Medicaid payment methodology causing Medicare-covered BH E/M codes crossing over to Medicaid not to match the Medicaid allowable set by BH fee schedule.	8/25/2021	84-Ohio Department of Mental Health (Community Mental Health) Provider	9/28/2021	Claims are anticipated to be readjudicated by 12/31/2021.	FIX IS COMPLETE	3033
CONFIRMED CPSE - Additional variations of certain specialty types (QMHS Masters, QMHS Bachelors, QMHS High School, and MD/DO) were not included in our pricing methodology for codes H0006, H2017, H2019 and H0036. As a result claims are denying or paying zero dollars.	8/25/2021	84-Ohio Department of Mental Health (Community Mental Health) Provider	11/19/2021	Claims are anticipated to be readjudicated by 12/31/2021.	IN PROCESS	TBD
CONFIRMED CPSE - Some member's Medicaid claims are not being generated after the primary Medicare claim has been processed. This has been attributed to an enrollment configuration error.	9/7/2021	00-All provider types	12/31/2021	Claims are anticipated to be readjudicated by 1/31/2022.	IN PROCESS	TBD
CONFIRMED CPSE - Aetna recently discovered that the nursing facility rates that went into effect on July 1st inadvertently did not get updated into the Hospice per diem pricer. This resulted in claim payments being processed at the old rate.	10/6/2021	44-Hospice	10/8/2021	Claims went through mass adjudication on 10/18/2021. Fallout out claims were reviewed and adjudicated on 10/19/2021 and are anticipated to be completed by 11/15/2021	FIX IS COMPLETE	676
CONFIRMED CPSE - Aetna identified an issue with the Hospice per diem pricer when July 1st rates were updated on 10/08/2021 causing all hospice claims with (T2046) to price at \$0.	10/11/2021	44-Hospice	10/29/2021	Claims are anticipated to be readjudicated by 01/30/2022.	FIX IS COMPLETE	TBD
CONFIRMED CPSE - HCBS waiver rate increases which went into effect on 11/01/2021 are delayed from being loaded causing claims to be processed at the old rate.	11/1/2021	45-Waivered Services Organization 55-Waivered Services Individual 38-Private Duty Non-Agency RN or LPN 16 & 60-Home Health Agency 26-Non-Agency Home Care Attendant 25-Non-Agency Personal Care Aide	11/15/2021	Claims are anticipated to be readjudicated by 01/30/2022.	IN PROCESS	TBD