

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 1-855-599-3811 if you have any questions or concerns regarding any of the following.

WellCare Known Issues List

OPEN PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number

WellCare Known Issues List

COMPLETED PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Long Description	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
N/A	Indian Health Service T code claim issues	Indian Health Services Providers	Per State of NE Bulletin 19-04, secondary crossover claims for Indian Health Service are to be processed/paid up to encounter rate. Medicare will not accept T codes, T1015 is the code used and configured within the Wellcare system to process/pay at the encounter rate. Without the T code present on the claim when crossed over, Wellcare will not configure at the encounter rate, but at lessor of logic	Claims for DOS 08/01/2020-08/13/2020 to be completed by 08/27/2020	Claims for DOS 07/01/2019-07/31/2020 were reprocessed by 08/12/2020	N/A

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Recoupment RV030	Recovery project contains that rejected due to "NDC Service Line DOS doesn't fall within the NDC/HCPCs Crosswalk." Corrected claims should be submitted within 90 days.	N/A	Front end edits updated on 08/20/2019	N/A	03/20/2020	7727
Recoupment RV030	Recovery project contains claims where NDC codes were incorrectly billed and paid in error	N/A	Front end edits updated on 06/01/2019	N/A	03/20/2020	8030
Recoupment RV030	Recovery project contains claims where NDC code doesn't match HCPCs code billed	N/A	Front end edits updated on 08/20/2019	N/A	03/20/2020	7732

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COMPLETED PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Long Description	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
DN001	No authorization denials	ALL	Retro-Eligible member claims are denying incorrectly for no auth due to systematically the auth being past the Wellcare auth requirement timeframe	02/28/2019	02/08/2019	N/A
DNEOB	Medicare Crossover Claims denying for DNEOB	ALL	Medicare Crossover Claims denying for DNEOB	03/01/2019	03/01/2019	N/A
CE037	Claims denying CE037 when providers bill with modifier 52	B/H	Claims denying CE037 when providers bill with modifier 52	03/11/2019	03/11/2019	N/A
IH143	Well Child Visits that exceed frequency periodicity table that are needed for medical necessity or school exams will deny	ALL	Well Child Visits that exceed frequency periodicity table that are needed for medical necessity or school exams will deny	04/04/2019	04/12/2019	N/A

COMPLETED PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Long Description	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
DN001	No authorization denials	All	<ul style="list-style-type: none"> •We have identified a few scenarios where our authorization platform does not update our claim payment system resulting in inappropriate denials •We have a correction going into 6/27 •Previously impacted authorizations will be updated with a second deployment on 8/2 <ul style="list-style-type: none"> • Backfill of the authorizations is in process and will run for the next two weeks. •A report of impacted authorizations found: <ul style="list-style-type: none"> • 67 authorizations impacted • 111 providers (can have multiple providers within an authorization) •Claim impact in process now - all impacted claims will be adjusted without any additional intervention from the provider by 8/31 Impacted claims were completed 8/16	8/31/2018	8/16/2018	TBA

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EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
464	Rejected Behavioral Health Claims - Rendering Provider Not Required	BH	03/01/2018	03/05/2018 (with twice-weekly checkpoints for prioritization)	3/02/2018	1664830
EOP Denial Code	Issue Description	Impacted Provider Specialty	Long Description	Estimated Claims Reprocessing Date	Effective Date	
	eviCore's Peer-to-Peer (P2P) Process Enhancement	All Managed Program Services	<ul style="list-style-type: none"> Providers now have the ability to schedule a peer-to-peer (P2P) using eviCore's website May select a 2-hour time block eviCore will contact the provider within a 15-minute window prior to the 2-hour scheduled P2P 	<ul style="list-style-type: none"> Simply go to http://www.evicore.com Click on "Providers" at the top of the page. On the next page, click on, "Select Time & Date" in the banner, "Request a consultation with a Medical Director/Therapist" and follow the prompts 	8/1/2017	

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EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
N/A	Enhanced Provider Fee Schedule - Retro Rate Update	All Eligible Providers	4/4/2017	8/10/2017	9/28/2017	311542
NOFEE	HCPCS H2033 "NOFEE" Denials and Underpayments	Behavioral Health	4/10/2017	7/31/2017	7/31/2017	Multiple
IH126	A4927 Gloves Limit	DME	6/15/2017	9/29/2017	9/14/2017	10850
N/A	Enhanced Provider Fee Schedule - Place of Service Logic Removal	All Eligible Providers	6/21/2017	8/10/2017	9/28/2017	311542
N/A	H0036 Units- Behavior Health	BH	6/27/2017	9/7/2017	9/13/2017	11061/WR3987
IH038	CPT A6446 denied for modifier	Anesth	7/1/2017	7/5/2017	7/10/2017	10926

COMPLETED PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
IH041	NED Telemedicine Place of Service 2	Multiple	7/7/2017	7/10/2017	7/10/2017	10926
IH041/CE037	GT Modifier	Multiple	7/13/2017	7/13/2017	7/13/2017	PSR11007
N/A	599 CHIP Claim Rejections - Member Not Found	All	7/14/2017	7/24/2017	7/24/2017	N/A
IH135	Antepartum denials	OBGYN	7/14/2017	11/10/2017	11/9/2017	10870
NOFEE	Skilled Nursing Facility Pricing (HCPCS G0299 & G0300)	SNFs	7/21/2017	8/5/2017	8/5/2017	315152
NOFEE	DME procedures require invoice pricing	DME	7/31/2017	11/15/2017	11/17/2017	321176

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NOFEE	DME procedures require invoice pricing	DME	7/31/2017	11/15/2017	11/17/2017	321176
DN001	HCPCS T1015 No Authorization Denials	FQHC	8/1/2017	8/25/2017	8/20/2017	317177
W34d	NDC Rejections for Vaccines	Multiple	8/1/2017	8/15/2017	8/13/2017	316305
NEPLP	ER Emergent Reduction	Hosp	8/2/2017	10/27/2017	10/27/2017	318632
CE037	Denials for NU and RR Modifiers - Modifier is not typical for procedure	DME	8/3/2017	8/25/2017	8/29/2017	PSR10905
N/A	SNF Coordination of Benefits with Medicare -Overpayment	SNF	8/4/2017	8/4/2017	*contact PR rep for details	Multiple

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N/A	SNF Coordination of Benefits with Medicare - Underpayment	SNF	8/4/2017	8/4/2017	8/8/2017	Multiple
DNNPR CL062 CL068 CL069	SNF Coordination of Benefits with Medicare	SNF	8/4/2017	8/4/2017	8/4/2017	Multiple
N/A	Phase 1 - Behavior Health Co-Pays Applied	Behavioral Health	8/7/2017	8/21/2017	8/25/2017	317783
DNNPR/CL062/C L068/CL069	COB claims prior to 7/1 where lesser of logic was applied incorrectly	Multiple	8/18/2017	9/28/2017	9/28/2017	318635
No Fee	ASC Fee Schedule Update	ASC	8/24/2017	9/5/2017	9/1/2017	318891
DNNPR CL062 CL068 CL069	Coordination of Benefits - Medicare Overpayments	Multiple	8/24/2017	Providers should identify specific claims associated and send refund to: Recovery Department PO BOX 31584 Tampa FL, 33631-3584	N/A	Multiple

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EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
DN001	Inpatient OB deliveries regular stay - Authorizations Requirements	Hosp	8/25/2017	9/8/2017	9/14/2017	319068 318002 315607
IH126	IH126 Denials applied to Mental Health codes	BH	8/29/2017	9/8/2017	9/20/2017	10861
W34d/NDCXX	NDC Rejections or Denials	All	8/30/2017	9/29/2017	9/7/2017	320238 & 320240
IH013	Echo Claims	Hosp	9/2/2017	9/28/2017	9/27/2017	10895
CE254&CE255	Not payable in this place of service	DME	9/6/2017	9/18/2017	9/21/2017	11133/#HH00 198/PSR11133
Multiple	Hearing Aid/Exams - Denials and Underpayments	Audiologists	9/8/2017	10/20/2017	10/23/2017	MMPR #12 _ HH00304 321374 321715

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EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
IH126	IH126 Denials applied to Mental Health codes (H0015, 90832, 90834, 90837, 90847, 90853)	BH	9/15/2017	9/29/2017	9/13/2017	10861
NA	90832, 90834, 90837, 90846, 90847, 90849 and 90853 Max Unit removal	BH	9/20/2017	9/26/2017	9/26/2017	321783
DMN17/DNM22	599 CHIP Project - Incorrect Denials	Multiple	9/25/2017	10/20/2017	10/24/2017	TBD
NOFEE	Incorrect Fee Schedule	BH	9/30/2017	11/13/2017	11/13/2017	6723/323738
CE038	PRFT Place of Service 56 E&M codes - Phase 2	PRTF	10/3/2017	10/16/2017	8/25/2017	11096/WR641 /WHP6542
DN001	Auth requirement for DME charges > \$750 effective 9/1/2017	DME	10/3/2017	11/13/2017	11/13/2017	326576

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CE037	DME Modifiers	DME/SNF	10/6/2017	10/31/2017	11/6/2017	10905/11069/ WR1033
BMCD	Bill Medicaid Directly - Incorrect Denial	Home Health	10/11/2017	11/1/2017	11/6/2017	323879
CE113	Global Post Op 14 days	Multiple	10/12/2017	10/20/2017	10/24/2017	10896/FMT 324471
DN177	Dialysis Reconfiguration Project	Dialysis	10/13/2017	11/13/2017	11/17/2017	326020
IH126	H2018 TG denials	BH	10/20/2017	11/3/2017	8/29/2017	10908
CE025	V5264-22 CE025 Denials Hearing Aid	DME	10/21/2017	9/8/2017	9/5/2017	11034
CMD01	Incorrect Denial	RHC & CHH	10/27/2017	11/3/2017	11/9/2017	325981

COMPLETED PROJECTS

EOP Denial Code or Rejection Reason Code	Issue Description	Impacted Provider Specialty	Estimated Claims Configuration Date	Estimated Claims Reprocessing Date	Actual Claims Completion Date	Project Number
INMOD	H0046 deny with certain modifiers	BH	10/28/2017	11/15/2017	11/17/2017	326589
IH126	Hearing Aid Max Unit	DME	11/1/2017	11/15/2017	N/A	11058
IH041	Tribal Providers: Incorrect Taxonomy Submission	Tribal	11/3/2017	11/17/2017	11/6/2017	326324/PSR11268
N/A	Prior authorizations for physical therapy and occupational therapy	PT/OT	11/6/2017	11/21/2017	11/25/2017	326973
CE006	Bundling Edit for IOP	BH	11/7/2017	11/13/2017	11/17/2017	4071, PSR ticket #11037 & 11066
463	Rendering Provider's group number does not match billing provider's group number.	All	6/19/2017	6/26/2017	6/26/2017	N/A
NOFEE	HCPCS H0046 Dates of Service 5/1/2017 through 6/28/2017	Behavioral Health	6/28/2017	8/10/2017	8/10/2017	314480

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INELG	Some services incorrectly denied for member eligibility due to system error	Multiple	06/20/17, updated 08/02/17	7/31/2017	7/31/2017	314755/319340
IH038	Wheelchair KX/NU modifier dispute	ANES/PHAR/DME/SPEECH	N/A	8/29/2017	9/14/2017	10896
DNNPR/CL062/C L068/CL069	Coordination of Benefits - Medicare Underpayments	All	N/A	7/31/2017	7/31/2017	Multiple
CE006	Adjustments for Bundling Edit for IOP - First Round of Reprocessing	BH	N/A	8/22/2017	8/28/2017	4071, PSR ticket #11037
DN017	Medicare EOB Denials	BH	N/A	10/15/2017	9/26/2017	6815, 321095
CE034	99213 99214 in Place of Service 52	BH	N/A	N/A	N/A	11110
N/A	Check run 835 error	Multiple	N/A	11/13/2017	11/10/2017	N/A

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N/A	Coordination of benefits misapplied on part b claims	SNF	N/A	11/30/2017	11/22/2017	324587
N/A	Incorrect podiatry copays applied	Podiatry	11/21/2017	12/8/2017	12/4/2017	329359
DN039	Radiation Substitution Logic	Radiation Therapy	11/20/2017	12/4/2017	12/12/2017	329181
IH056	E0202-KR daily units	DME	11/29/2017	12/26/2017	12/26/2017	HH00227
CE006	OB Assistant Surgeon Denial	OBGYN	12/4/2017	12/20/2017	12/26/2017	PSR 11348
NDCXX/NDCZZ	Claims denied incorrectly for NDC denials.	Multiple	11/20/2017	12/22/2017	12/27/2017	328723 & 328726

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Multiple	Payment for Dual Eligible Members	Multiple	12/15/2017	1/17/2018	1/18/2018	332752
NOFEE/INCLU	Code Q3014 was denying NOFEE or INCLU	Multiple	12/19/2017	1/18/2018	1/16/2018	330141
DN001	Claims denied for no authorization incorrectly	Multiple	12/15/2017	1/31/2018	02/01/2018	332119
N/A	\$0 Copay for podiatry services effective 01/01/18	Multiple	1/25/2018	2/6/2018	2/6/2018	335559