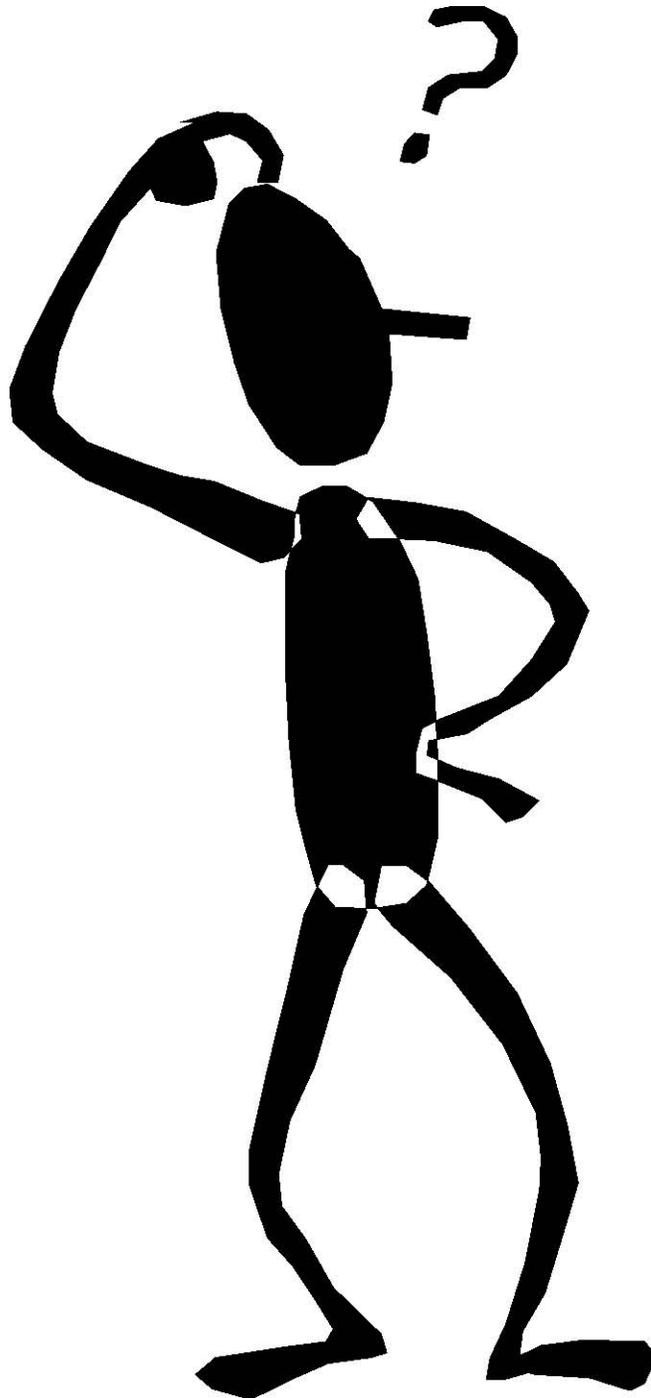


# APPENDIX E

## ERROR MESSAGES



## **Biouupdate Report Error Messages**

<u><b>Error Message</b></u>	<u><b>Description of Error Messages</b></u>
RIC Code is Required .....	The RIC Code on the input record is null.
Invalid RIC Code.....	The RIC Code is invalid. Valid options are 10,20,21,30,40,41,42,50,60,61,70,80,81.
Provider No. is required .....	The provider number field on input file is null.
Provider No. must be 8 char numeric.....	Non Numeric number has been submitted. Valid provider numbers are numeric.
Invalid Provider Number for BEDS Code .....	The Provider Number and BEDS Code fields do not cross-reference. Either one of these fields must be corrected.
BEDS Code is Required .....	BEDS code field is null.
Invalid BEDS Code .....	BEDS code value in input file is not on system file.
Student last name is required.....	Last name field is null.
Student first name is required.....	First name field is null.
Student birth date is required.....	Birth date field is null.
Invalid student birth date .....	Birth date is in an invalid format. Should be 'YYYYMMDD'.
Student sex code is required .....	Gender (sex code) field is null.
Invalid student sex code .....	Invalid gender value entered. Must be 'M' or 'F'.

Student not found-Deletion Aborted .....	A provider tried to delete one of their students from the database but was unable to because the student could not be found based on the retrieval criteria. There are two different mechanisms for deleting a student, depending on whether a CIN was submitted with the delete record. When a CIN is NOT submitted with the record, the program searches exclusively for an 'unmatched' student. If a CIN is submitted then the search targets biographical records submitted by the provider with the same CIN. The found record is deleted, regardless of the student's eligibility status. If multiple records are found, a record with 'unmatched' status will be deleted first and the 'matched' record, the one that has been determined to be Medicaid eligible, will not be deleted.
Zip Code must be numeric.....	Zip Code in input record is not valid. Must be numeric.
Social Security number must be numeric .....	If Social Security number is entered, it must be numeric.
Invalid state code.....	If a state is entered, it must be a valid state code.
Invalid BEDS code .....	BEDS code value in input file is not on system file.
Student not found - change aborted .....	Change transaction was unsuccessful because the matched student was not found. Unlike a deleted transaction, a change transaction only targets a matched student.
Student already exists - add aborted .....	Attempt to add a student to biographical database is unsuccessful because he/she already exists on database, although not necessarily as a matched student.
Student already eligible - add aborted.....	Same as above except the student has already been determined to be Medicaid eligible. Addition is therefore not allowed.
Claims exist - Deletion aborted .....	A provider wants to delete a student from the database but is not allowed to because claims exist for that student.
Demographic data inconsistent with CIN .....	Add transaction is attempted with the CIN included in the input record. The CIN is valid, but discrepancies exist between biographical data as provided by DSS and the provider. The affected fields are last name, first name, date of birth and gender. When date of birth and gender are correct for the input CIN, the error

message will include exact spelling of first and last name to use to accomplish an eligibility match.

## Non-Match Report Error Messages

### Error Messages

### Description of Error Messages

Match not found .....	The student's biographical data submitted by the provider does not match anyone from the pool of Medicaid eligible students supplied by DSS to the CNYRIC.
Forced match error .....	A match was attempted by means of a previously submitted CIN transaction, but there is no corresponding CIN and the transaction is therefore rejected.
Multiple matches found .....	The matching algorithm could not narrow down the matchable students to one. The transaction is rejected and the multiple matches listed on the non-match report.
Near Match.....	A match could not conclusively be accomplished, however, eligible record(s) exist with nearly matching data, warranting closer inspection to determine if it is the same student.

# Service Update Report

**Error Messages**

**Description of Error Messages**

Duplicate Service data .....	Records (lines) in the input file are identical so the duplicates are rejected.
RIC Code is required .....	The RIC (Regional Information Center) Code is null.
Invalid RIC Code .....	The RIC Code is invalid. Your RIC Code is your 2-digit assigned code.
Provider number is required.....	Provider number is null.
Provider number must be 8 char. numeric.....	Non-numeric provider number in input file. Provider number must be numeric.
Invalid provider number for BEDS code.....	The provider number and the BEDS code on the input file do not belong to the same school district or county. Either one of these fields (or both) must be corrected.
BEDS Code is required.....	BEDS Code field in input file is null.
Invalid BEDS Code.....	BEDS Code value in input file is not on system file.
Client ID number is required .....	CIN is null in input file.
Service date greater than process date .....	Trying to put through an adj or void transaction, but the service date is greater than the month of the last DSS tape processed.
Service code is required .....	Service code is null.
Invalid service code .....	The service code is invalid, not on the system. Can also get this error message when a County submits a school district's service code or vice versa.
Service date is required .....	Service date is null.

Invalid date beyond eligibility .....	Service date is greater than system date (day of run).
Invalid service date .....	Service date was not in 'YYYYMM' format.
Service date prior to billing period .....	Service date is earlier than 4/1/90.
Service date earlier than 2-year limit .....	Service date does not fall within the two-year range allowed for submitting claims.
Services provided is required.....	Services provided is null. Units/session field is blank.
Services provided must be numeric .....	Services provided field is not numeric and therefore invalid.
Matched student not found .....	A claim is being submitted for a kid who is presently not identified as Medicaid eligible on our database. The biographical data submitted by provider has not been 'matched' to data provided DSS.
Third Party Insurance override required.....	This student has insurance coverage other than Medicaid and the Third Party Health Insurance indicator is not 'Y'.
SSI Override required .....	This student is SSI eligible and the SSI indicator is not 'Y'.
Not eligible for service date .....	The service date on claim does not fall within eligibility dates on file, as provided to us by DSS.
Original service does not exist .....	Trying to adjust or void a service for which a claim to DSS has not been generated. The service has not been billed.
Services on adj. equal services billed .....	The only significant adjustment is when the number of services provided is changed. Adjustment transaction is rejected because the number of services is equal to original claim.

Billable service exists for Prov xxxxxxxxxxxx .	A claim with the same CIN, service code and service date has already been submitted but not billed yet. Claim could possibly have been submitted by a different provider.
Billed service exists for Prov xxxxxxxxxxxx ...	Same as above except the claim has already been billed.
Already billed by Prov xxxxxxxxxxxx.....	A service, with the exception of TCM codes or Evaluation codes has been submitted in this cycle by a provider with a different Rate Age Code (County vs. School District).
Cannot bill, claimed by Prov xxxxxxxxxxxx ..	A service, with the exception of TCM codes or Evaluation codes has been Billed for in a previous cycle by a provider with a different Rate Age Code (County vs. School District).
Services must exceed minimum threshold .....	Adjustment claim is rejected because number of service units is below minimum allowed for reimbursement.
Services cannot exceed maximum threshold...	Adjustment claim is rejected because number of service units is above maximum allowed for reimbursement.
Cannot adjust. Claimed by different provider ..	An adjustment is submitted for a claim originally paid to another provider. The transaction is rejected.
Cannot void. Claimed by different provider...	Same as above but with a valid claim.
Prior claim voided. Submit new claim .....	Trying to adjust or void an already voided claim. Need to instead submit a regular claim.
Prior claim denied. Submit new claim.....	Trying to adjust or void a denied claim. Need to submit a regular claim.
Unable to adjust/void unremitted claim.....	A claim cannot be adjusted or voided unless it has been paid first.
Unable to adjust/void. Claim is pending.....	Claim has been processed at CSC but it was pended instead of paid.

Service date exceeds (date): *Record Held* ...	Claim is for a past month but outside the currently processed eligibility period. It is held at CNYRIC until it can be processed.
Transport. claim/§4201 school conflict .....	A transportation claim for a school-aged student is denied because submitted by a §4201 school. [A student turning 5 years of age on or before December 1 shall be considered school age as of September 1 of that year.]
Resubmit with new Transportation code .....	Transportation service date after July 1, 1999.
Claim limit of NN in DD months already met...	A TCM service has reached the limit based on a number of occurrences within a specific time frame.

5491 – Initial	2 reviews in 9 months	5492 – Annual	1 review in 4 months
5493 – Reevaluation (triennial)	1 review in 9 months	5494 – Amended/Requested	3 reviews in 9 months

## Non-Bill Report

### Error Messages

### Description of Error Messages

Provider Agreement not verified, record pending	The magnetic provider agreement has not been received at CNYRIC. Record is kept as Non-bill. When and if the agreement is received, the non-bill claims can be reprocessed.
BEDS Code/Provider No. conflict, record deleted	The BEDS code and provider number on the system do not match those in the input file.
Service not billable, record pending .....	A billing rate has not been established yet for this service. Assuming there will not be any new services, this error message is obsolete.

Below minimum threshold, record deleted.....	Number of services submitted is less than minimum threshold for this particular service.
Service date out of range, record deleted.....	Service date submitted on claim does not fall within the billable date range for the service on the claim.
Inactive service, record deleted.....	A currently invalid service code has been submitted on claim.
Unable to submit on last billing, record pending.	Claim could not be submitted for billing normally because of 130% adjustment void mechanism.

## Remittance Report Error Messages

<u>Codes</u>	<u>Error Messages</u>	<u>Description of Error Messages</u>
14	DOB follows DOS	Submitted date of service (DOS) is prior to the recipient's birth date (DOB).
16	Claim lacks needed info	Claim lacks information, which is needed for adjudication. Some examples are: recipient gender discrepancy, claim reference number invalid, reported rate code not on file, provider ID number not on NYS master file, date of birth does not match date of birth on file, CSC codes discrepancy.
18	Duplicate claim/service	This claim is an exact duplicate of a previously submitted and previously paid, claim.
22	Covered by another payer	This claim may be covered by another payer.
24	Service covered under CAP	Claim is for a service and student covered under some type of managed health care plan (HMO).

29	Time limit expired	Valid 90 day indicator required.
30	Child ineligible on DOS	According to MMIS, student was not eligible on date of service of submitted claim.
31	Prior 5/90 - Recp has RID	Before 5/90, Medicaid eligible New York City students had the recipient identification (RID) number, an 11 digit Medicaid ID. These students were then converted to the 8 character alphanumeric client identification number (CIN). A claim for one of these students, for a service date earlier than 5/90, should have the RID and not the CIN. This message should not occur because claims for earlier dates (4/90) are no longer submittable.
38	Service not authorized	Service not provided or authorized by designated provider.
52	Provider inelig on DOS	Provider was not authorized to bill as a Medicaid provider. This message reflects the provider status at the time of the service date on the submitted claim and is not necessarily indicative of the provider's current status.
96	Recip inelig for service	Recipient ineligible for this service.
129	Problem with prior info	Prior processing information appears incorrect.
A1	Claim denied charges	Service conflicts in combination with prior service/claim.
B6	Specly code not on file	This message has to do with a provider's status at CSC (MMIS). If this specialty code is either not on file for the provider on MMIS or it does not cover the service date in the claim, the claim gets rejected.
B7	Provider not active	Basically same message as code 52 above.

