

Known Issues List

March 14, 2025

The table below provides information related to known issues impacting Healthy Blue providers. This information will be updated **weekly on Fridays**. Continue to follow the existing process by contacting Healthy Blue Provider Services at **844-594-5072** or your provider relationship management representative if you have questions or concerns related to the issues listed here.

Note: All impacted claims submitted within timely filing limits on the date of issue identification will be included in claims reprocessing and issue resolution. Providers will not have to file a reconsideration/appeal for submitted claims. Claims that have been appropriately rejected or denied will not change when the issue is resolved.

Provider type	Number of impacted providers	Category	Issue	Date issue identified	Number of days outstanding	Estimated fix date	Status	Resolution	Interest/penalties owed	Date resolved
Hospitals	13	Claims	Codes J1745, Q5103, Q5104, Q5121 are denying PSO and G22 incorrectly	1/30/2025	33	3/10/2025	Open	Ticket has been submitted to have configuration updated, once completed a full claims sweep will be completed to adjust any impacted claims.	As applicable	
Behavior Health	132	Claims	As of 1/1/2025 certain BH codes do not require authorization.	1/17/2025	46	3/31/2025	Open	Update configuration to remove auth requirements.	As applicable	

Note: Availity, LLC is an independent company providing administrative support services for Healthy Blue providers on behalf of Blue Cross and Blue Shield of North Carolina. EnrollSafe is a tool developed by Zelis Payments, an independent organization offering electronic funds transfer services for Healthy Blue providers on behalf of Blue Cross and Blue Shield of North Carolina.

<https://provider.healthybluenc.com>

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Blue Cross and Blue Shield of North Carolina
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			Claims are currently denying.							
Behavior Health	154	Claims	LCSW Fee schedule is under paying due to a configuration break	2/7/2025	25		Open	Correct break fix	As applicable	
Peds	356	Claims	90461 is paying in error for members eligible for VFC.	9/4/2024	181	4/3/2025	Open	Remove 90461 reimbursement rates to show as not separately reimbursable.	As applicable	
All specialties	174	Claims	Blue Cross NC identified instances where we did not request additional information on claims within 18 days of receipt.	3/15/2023	716	TBD	Open	Blue Cross NC modified our process for requesting additional information to process claims. Prior to the new process, Blue Cross NC had an automated process that notified providers via the <i>Explanation of Payment (EOP)</i> when additional information was needed to process claims. The Department requires that claims be pending,	Does not apply to this issue.	

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								and notification mailed to providers requesting the additional information. We implemented a manual process to ensure compliance with this requirement.		
All	298	Claims	Vaccine Admin Codes (90460 90471 90472 90473 90474) denying	1/13/2025	36	3/4/2025	Closed	Update configuration to address break fix	As applicable	2/24/2025
Behavior Health	303	Claims	Unmanaged units were resetting on 12/1 rather than 7/1 for Medicaid expansion members	10/2/2024	149	3/10/2025	Closed	Update unmanaged visits to reset on 7/1/2024. Configuration completed as of 2/10/2025. Claims rework underway	As applicable	2/14/2025
Dialysis	32	Claims	Q4108 and Q5105 are not allowing 1960 units per month.	10/8/2024	90	12/13/2024	Closed	Benefit configuration will be updated to allow 1960 units per month	As applicable	1/8/2025
Behavior Health	303	Claims	Unmanaged units were resetting on 12/1 rather than 7/1 for Medicaid expansion members	10/2/2024	82	12/30/2024	Closed	Update unmanaged visits to reset on 7/1/2024	As applicable	12/27/2024