

Known Issues List

May 9, 2025

The table below provides information related to known issues impacting Healthy Blue providers. This information will be updated **weekly on Fridays**. Please continue to follow the existing process by contacting Healthy Blue Provider Services at **844-594-5072** or your Healthy Blue care provider relationship account consultant 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
Professional		Claims	Codes 99221, 99222, 99223, 99231, 99232,	3/3/2025	57	6/30/2025	Open	To have the authorization overridden on professional claims billing with an inpatient POS except for the CPT [®] codes that	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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			99233, 99234, 99235, 99236, when billed on professional claims with POS 21 51 54 55 56 60. Denial codes Y3z, Y40, and Y41					require medical necessity review.		

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Behavioral Health	132	Claims	As of 1/1/2025, certain BH codes do not require authorization. Claims are currently denying.	1/17/2025	104	5/9/2025	Open	Update configuration to remove auth requirements. Codes H0010, H0014, H0015, H0020, H0035, H0038, H2011, H2035, T1023, S9484 config has been completed as of 4/1. 90785, 90791, 90832, 90833, 90834, 90836, 90837, 90838, 90839, 90840, 90846, 90847, 90849, 90853, & 90792 config completed 4/9. Claims sweeps in progress.	As applicable	
Behavioral Health	154	Claims	LCSW Fee schedule is under paying due to a configuration break.	2/7/2025	81	5/18/2025	Open	Correct break fix. Configuration is completed as of 4/7/25. Final claims sweeps are in progress.	As applicable	
All	504	Claims	Medicaid expansion	10/4/2024	207	6/30/2025	Open	Remove copays for this population of members.	As applicable	

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			members who are under the age of 21 are receiving copays.					Monthly claims sweeps are being completed until configuration is updated.		
Hospitals	13	Claims	Codes J1745, Q5103, Q5104, Q5121 are denying PSO and G22 incorrectly.	1/30/2025	74	5/1/2025	Closed	Configuration has been completed as of 4/1/2025, Claims reprocessing now in progress for any impacted claims. Claims reprocessing has been completed.	As applicable	4/22/2025
Peds	356	Claims	90461 is paying in error for members eligible for VFC.	9/4/2024	205	4/11/2025	Closed	Remove 90461 reimbursement rates to show as not separately reimbursable. Configuration has been completed.	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	734	TBD	Closed	Blue Cross NC modified our process to request 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 pended, and	Does not apply to this issue.	3/18/2025

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								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
Behavioral 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 completed.	As applicable	2/14/2025