

FY 2012
BCCCP/FP/WISEWOMAN/MCRCEDP
Approved Hold Codes

Adj. Code	Description As it appears on the 835 electronic remittance advice (RA)	Hold Code	Description As defined by BCCCP, WW and CRC
6	The procedure/revenue code is inconsistent with the patient's age.	AB	Benefit not covered for age
31	Patient cannot be identified as our insured.	BC	Client is not a BCCCP client OR a BCCCP service is being billed with WW/CRC ICD-9 code
163	Attachment referenced on the claim was not received.	E2	Requesting Primary Carrier's EOB
167	This (these) diagnosis(es) is (are) not covered.	I9	ICD-9 (diagnosis) code not in contract
45	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement	IC	Insurance payment
45	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement	IP	Insurance partial payment
203	Discontinued or reduced service.	IV	Code no longer valid
199	Revenue code and procedure code do not match.	JL	Revenue code not in contract
96	Non covered services.	JM	CPT/HCPCS not in contract
29	The time limit for filing has expired.	N5	Service date for prior fiscal year
45	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement	N6	State override
38	Services not provided or authorized by designated (network primary care) providers.	N8	Provider not enrolled
B20	Procedure/service was partially or fully furnished by another provider.	N9	Service Partially/Fully done by another provider
18	Duplicate claim/service.	ND	Duplicate Claim
5	The procedure code/bill type is inconsistent with the place of service.	NE	Place of Service (POS) not covered
39	Services denied at the time authorization/pre-certification was requested.	PB	Authorization required
31	Patient cannot be identified as our insured.	RC	Client is not a CRC client OR CRC service is being billed with BCCCP/WW ICD-9 code
222	Exceeds the contracted maximum number of hours/days/ <u>units</u> by this provider for this period.	UN	Number of units mismatch
31	Patient cannot be identified as our insured.	WC	Client is not a WISEWOMAN client OR WW service is being billed with BCCCP/CRC ICD-9 code
45	Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement	XA	Denied claim paid
B10	Allowed amount has been reduced because a component of the basic procedure/test was paid. The beneficiary is not liable for more than the charge limit for the basic procedure/test.	XB	Payment Error