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MEMORANDUM

TO: OMH Providers

FROM: New York State (NYS) Office of Mental Health (OMH)

DATE: June 7, 2024

SUBJECT: Medicaid Fee-for-Service Timely Filing Denials for Medicaid Primary and Crossover Claims Due to Delays Caused by the Change Healthcare Service Outage – **Update to May 20, 2024 Memo**

Dear OMH Provider,

On May 20, 2024, OMH sent a memo instructing providers to use Delay Reason Code 7 (DRC 7)- Third Party Processing Delay when submitting crossover claims to Medicaid FFS that were affected by the Change Healthcare cybersecurity incident. Since the memo's release, DOH has updated their guidance for the submission of these claims. This new process eliminates the need for TCN submissions and also covers claims where Medicaid FFS is the primary payor.

Claims that exceed the timely filing limits may be submitted electronically using Delay Reason 15 (Natural Disaster). There is no additional documentation required to use Delay Reason 15; however, where particular claims require documentation, such as invoices for pricing, the claim and all necessary documentation should be submitted as a paper claim along with the delay reason form indicating Delay Reason 15. Providers should also maintain documentation that supports being affected by this incident.

Claims with Delay Reason 15 must be submitted to eMedNY by **August 30, 2024**, to be considered for payment. Claims that are payable using Delay Reason 15 are all claims that couldn't be submitted timely due to the Change Healthcare/Optum cybersecurity incident only. Submitting claims that do not meet this purpose with Delay Reason 15 is not permitted and may be considered Medicaid fraud subject to review by the Office of the Medicaid Inspector General.

Claims for this incident submitted after August 30, 2024, with Delay Reason 15 will be denied.

Please note: if your agency has already submitted (or is in the process of submitting) TCNs to OMH for claims with DRC7, OMH will submit those claims to DOH for reprocessing, you do not need to do anything else. Please be advised that OMH is extending the deadline to August 30, 2024. This change is intended to help providers get all affected claims paid as easily as possible, not to add additional work.

If you have any questions regarding these instructions, please contact OMH at medicaidffsbillinghelp@omh.ny.gov.