

INSTITUTIONAL EDIT REQUIREMENTS (ELN 400 - 499)

ELEMENT NAME: ADJUSTMENT/DENIAL REASON CODE (1-400)			
VALIDITY EDITS			
1-400-01V	VALUE MUST BE A VALID ADJUSTMENT/DENIAL REASON CODE (REFER TO CHAPTER 2, ADDENDUM H) OR BLANK.		
RELATIONAL EDITS			
1-400-01R	IF AMOUNT ALLOWED (TOTAL) = ZERO		
	THEN ALL OCCURRENCE/LINE ITEMS (EXCLUDING REVENUE CODE 0001) MUST CONTAIN AN ADJUSTMENT/DENIAL REASON CODE (REFER TO FIGURE 2-H-1 OR FIGURE 2-H-2)		
	UNLESS TYPE OF SUBMISSION =	B	ADJUSTMENT OF NON-TED RECORD (HCSR) DATA OR
		E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
1-400-02R	IF TYPE OF SUBMISSION =	C	COMPLETE CANCELLATION OR
		D	COMPLETE DENIAL
	THEN ALL OCCURRENCE/LINE ITEMS (EXCLUDING REVENUE CODE 0001) MUST CONTAIN AN ADJUSTMENT/DENIAL REASON CODE (REFER TO FIGURE 2-H-1 OR FIGURE 2-H-2)		
1-400-03R	IF FREQUENCY CODE =	1	ADMIT THRU DISCHARGE
	AND PRICING RATE CODE =	H	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH SHORT STAY OUTLIER OR
		I	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH COST OUTLIER OR
		J	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH NO OUTLIER
	THEN NO OCCURRENCE OF ADJUSTMENT/DENIAL REASON MAY =	135	CLAIM DENIED. INTERIM BILLS CANNOT BE PROCESSED
1-400-04R	IF PRICING RATE CODE =	H	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH SHORT STAY OUTLIER OR
		I	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH COST OUTLIER OR
		J	TRICARE/CHAMPUS DRG REIMBURSEMENT WITH NO OUTLIER
	AND REVENUE CODE = 0901, 0914-0918, 096X-098X (PROFESSIONAL SERVICES), OR 081X (ORGAN ACQUISITION)		
	THEN ADJUSTMENT/DENIAL REASON CODE MUST BE A CODE LISTED IN FIGURE 2-H-1 OR FIGURE 2-H-2		

TRICARE SYSTEMS MANUAL 7950.1-M, AUGUST 1, 2002

CHAPTER 2, SECTION 5.5

INSTITUTIONAL EDIT REQUIREMENTS (ELN 400 - 499)

ELEMENT NAME: ADJUSTMENT/DENIAL REASON CODE (1-400) (CONTINUED)

1-400-05R IF ANY OCCURRENCE OF
ADJUSTMENT/DENIAL REASON
CODE = 135 CLAIM DENIED. INTERIM BILLS CANNOT BE
PROCESSED

THEN ALL OCCURRENCE/LINE ITEMS MUST BE DENIED (ADJUSTMENT/DENIAL
REASON CODE MUST BE A CODE LISTED IN [CHAPTER 2, ADDENDUM H, FIGURE 2-H-1](#) OR [FIGURE 2-H-2](#)).

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