

Approved message code (6f)- 056 or 057

056-> pt does not have a payment plan active yet. “pt likely to benefit” care plan initiates when a single claim is greater than \$600

In care plan click on Reports tab

Print in desired language

Put in date for completion

Select you gave the patient the handout

F12 to save

If patient accepts the MPPP they must follow the instructions on the provided document, It should take about 24 hours to activate. Then rebill to receive the 057 error

057-> pt already has payment plan active-> billing information for secondary will appear in post edit reject and EDI received “additional message information”

Example would look like: additional message information (FQ)-m3p BIN-PCN 610649-MPPP7777 same mbr ID

Add OCC 8

If you get this error message (NR)

Message	
TRANSLATION ERROR TRANSLATION ERROR	

Reject Codes	
Explanation	Possible Error
Missing or Invalid Other Payer-Patient Responsibility Amount Count	Other Payer Patient Amount Count (NR)
Claim Not Processed	None

Add overrides NP/NQ, and DV overrides. (pt specific only). No override value is required