

Provider Notice

May 5, 2022

General Notice – POS 21/22 vs. 23 on ER Claims

CountyCare has recently noticed a trend in provider billing of incorrect POS for professional claims billed in association with ER services. **Professional claims are being coded with POS 21/22 instead of POS 23, as appropriate when members are being treated in the ER.**

Typical denial code will be S2 PRE-AUTHORIZATION REQUIRED. This corresponds to:

RARC: M62 Missing/incomplete/invalid treatment authorization code.

CARC: CO Contractual Obligations 197 Precertification/authorization/notification/pre-treatment absent.

Providers should ensure that correct POS codes corresponding to member treatment setting are used.

Contact Us

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information, please contact CountyCare Provider Services at ProviderServices@countycare.com or your Provider Relations Representative.