



DHMP Medicare Advantage: Frequent Claims Submission Errors – End Dates of Service

The **Denver Health Medical Plan (DHMP) Medicare** team has been reviewing claim and encounter data, and has determined some of the more frequent claim submission errors that lead to CMS encounter data rejections.

In order to avoid unnecessary claims denials, please adhere to the following regarding end dates of service:

- » For **all claims**, the **end date of service** on a claim cannot be a date that is later than a patient's **date of death**.
- » For **all claims** (particularly Home Health and DME), the **end date of service** on a claim cannot be a date that is later than the **date the patient has terminated enrollment** with DHMP's Medicare program. (Note: Before submitting a claim, please verify that the patient's enrollment in the DHMP Medicare program is still active as of the end date of service.)

Claims that do not adhere to the above will be rejected back to providers for correction and re-submission.

Contact DHMP's Medicare Risk Adjustment Analyst at 303-602-2134 if you have any questions regarding this review or Medicare risk adjustment in general. Thank you!