

Appendix D3- VMS Edits

BENEFICIARY ID – SYSTEM

No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
1	I101	INVALID XREF HICN	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
2	I102	INVALID BENE FIRST NAME	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
3	I103	INVALID BENE MIDDLE INITIAL	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
4	I104	INVALID BENE SURNAME	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
5	I105	INVALID BENE SEX	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
6	I106	INVALID REP PAYEE NAME	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
7	I107	INVALID REP PAYEE INDICATOR	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
8	I108	INVALID BENE ADDRESS 1	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
9	I109	INVALID COMP INSURANCE NUMBER	TBD	TBD	VMSBU210 (BUDS/01)
10	I110	INVALID BENE ADDRESS 2	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
11	I111	INVALID MEDICAID NUMBER	TBD	TBD	VMSBU210 (BUDS/01)
12	I112	INVALID BENE ADDRESS	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
13	I113	INVALID BENE CITY	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
14	I114	INVALID BENE STATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
15	I115	INVALID BENE ZIP CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
16	I116	INVALID BENE DEATH DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
17	I117	INVALID STATUS CODE	TBD	No	VMSBU210 (BUDS/01)
18	I118	INVALID FORCE QUERY INDICATOR	TBD	No	VMSBU210 (BUDS/01)
19	I120	INVALID OVER PAYMENT INDICATOR	TBD	No	VMSBU210 (BUDS/01)
20	I121	INVALID COMP INSURANCE CODE	TBD	TBD	VMSBU210 (BUDS/01)
21	I122	INVALID MEDICAID CODE	TBD		VMSBU210 (BUDS/01)
22	I123	COMP CODE/ NUMBER COMPATABILITY ERROR	TBD	No	VMSBU210 (BUDS/01)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
23	I124	MEDICAID CODE/ NUMBER COMPATABILITY ERROR	TBD	No	VMSBU210 (BUDS/01)
24	I131	INV MSP DEVELOPMENT IND	TBD	No	VMSBU220 (BUDS/02)
25	I133	INVALID HOSPICE TERM DATE	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
26	I134	INVALID HOSPICE DATE 1	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
27	I135	INVALID HOSPICE DATE 1	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
28	I138	INVALID HOSPICE INT 1	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
29	I139	INVALID HOSPICE INT 2	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
30	I140	INVALID HOSPICE INT 2	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
31	I141	INVALID MSP CODE	TBD	CWF and/or BDS	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
32	I142	INVALID MSP FROM DATE	TBD	CWF and/or BDS	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
33	I143	INVALID MSP TO DATE	TBD	CWF and/or BDS	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
34	I144	MSP FROM DATE EXCEEDS TO DATE	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
35	I145	INV MSP VALIDITY IND	TBD	CWF and/or BDS	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
36	I147	INV MSP AP INDICATOR	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
37	I150	OPERATOR NOT AUTHORIZED TO DELETE MSP OCCURRENCE	TBD	No	VMSBU220 (BUDS/02)
38	I175	INVALID INSURED RELATIONSHIP CODE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
39	I176	INVALID INSURED SEX CODE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
40	I177	TERMDT NEW MSP CONFLICT	TBD	No	VMSBU220 (BUDS/02)
41	I179	DELIVERY CODE REQUIRED	TBD	No	VMSBU210 (BUDS/01)
42	I180	DELIVERY CODE NOT NUMERIC	TBD	No	VMSBU210 (BUDS/01)
43	I181	INVALID OCNA CODE	TBD	No	VMSBU2A0 (BUDS/10)
44	I183	SCRUB INDICATOR MUST EQUAL BLANK, N, OR F	TBD	No	VMSBU210 (BUDS/01)
45	I225	DELETE FIELD ONLY	TBD	No	VMSBU210 (BUDS/01)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
46	I226	INVALID CURRENT ENTITLEMENT BEGIN DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
47	I227	INVALID CURRENT ENTITLEMENT END DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
48	I228	INVALID PREVIOUS ENTITLEMENT BEGIN DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
49	I229	INVALID PREVIOUS ENTITLEMENT BEGIN DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
50	I231	INVALID SECOND LAST NAME	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
51	I247	INVALID INSURER TYPE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
52	I277	INVALID HMO ENROLLMENT CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
53	I278	INVALID HMO CURRENT OPTION CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
54	I279	INVALID HMO CURRENT CARRIER ID CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
55	I280	INVALID HMO CURRENT EFFECTIVE DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
56	I281	INVALID HMO CURRENT TERMINATION DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
57	I282	INVALID HMO PREVIOUS OPTION CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
58	I283	INVALID HMO PREVIOUS CARRIER ID CODE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
59	I284	INVALID HMO PREVIOUS EFFECTIVE DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
60	I285	INVALID HMO PREVIOUS TERMINATION DATE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
61	I287	UPDATE INV FOR CUR SRC	TBD	CWF and/or BDS	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
62	I299	CANNOT ADD OR UPD VA MSP OCC	TBD	CWF and/or BDS	VMSBU220 (BUDS/02)
63	I365	ADDRESS FLAG INVALID	TBD	No	VMSBU210 (BUDS/01)
64	I366	DATE INVALID	TBD	No	VMSBU210 (BUDS/01)
65	I801	INQUIRY ONLY OPERATOR	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
66	I802	FULL UPDATE OPERATOR	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
67	I803	XREF UPDATE OPERATOR	TBD	No	VMSBU210 (BUDS/01)
68	I804	FULL/XREF UPDATE OPERATOR	TBD	No	VMSBU210 (BUDS/01)
69	I805	INQUIRY ONLY - XREF HICN	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
70	I806	BENE UPDATE SUCCESSFUL	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
71	I808	BENE XREF & UPDATE COMPLETED SUCCESSFULLY	TBD	No	VMSBU210 (BUDS/01)
72	I809	WARNING!!! INS INFO MISSING	TBD	No	VMSBU2A0 (BUDS/10)
73	I810	BENE UPDATED AND MAINTENANCE SENT	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
74	I811	MAINT. TRANSACTION SENT	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
75	I812	LOOK AT HOST FOR INS NAME	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
76	I820	WARNING! BENE NOT UPDATED	TBD	No	VMSBU220 (BUDS/02)
77	I904	F4751BIA FILE NOT AVAILABLE	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
78	I905	MISACTVY FILE NOT AVAILABLE	TBD	No	VMSBU210 (BUDS/01)
79	I906	F4751TRN FILE NOT AVAILABLE	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
80	I909	NOSPACE ON MISACTVY	TBD	No	VMSBU210 (BUDS/01)
81	I910	ERROR ON MISACTVY	TBD	No	VMSBU210 (BUDS/01)
82	I911	NOSPACE ON F4751TRN	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
83	I912	ERROR ON F4751TRN	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
84	I913	NOSPACE ON F4751BIA	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02)
85	I914	ERROR ON F4751BIA	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
86	I915	NOTFND ON READ OF F4751BIA	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02)
87	I916	NOTFND ON RD/UPD OF F4751BIA	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
88	I917	ERROR ON READ-UPDATE OF F4751BIA	TBD	No	VMSBU210 (BUDS/01) VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
89	I918	F4751OCN FILE NOT AVAILABLE	TBD	No	VMSBU2A0 (BUDS/10)
90	I919	ERROR ON F4751OCN	TBD	No	VMSBU2A0 (BUDS/10)
91	I920	NOSPACE ON F4751OCN	TBD	No	VMSBU2A0 (BUDS/10)
92	I933	DUP NOTE- NOT TRANSFERRED	TBD	No	VMSBU220 (BUDS/02)
93	I935	INVALID SUPPRESS UNASSIGNED REMIT INDICATOR	TBD	No	VMSBU210 (BUDS/01)
94	I950	INVALID EMPLOYER EIN; MUST BE NUMERIC	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
95	I951	INVALID EMPLOYER STATE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
96	I952	INVALID EMPLOYER ZIP	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
97	I954	EMPLOYER NAME MANDATORY IF ADDRESS PRESENT	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
98	I957	MUST USE ECRS SYSTEM!	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
99	I958	CRD MUST = 1, 2, 3, 4, SPACE	TBD	CWF and/or BDS	VMSBU210 (BUDS/01)
100	I959	DELCLAIM FILE NOT AVAILABLE	TBD	No	VMSBU210 (BUDS/01)
101	I963	BSC UPDATE OPERATOR	TBD	No	VMSBU210 (BUDS/01)
102	I988	DELCLAIM FILE NOT AVAILABLE	TBD	No	VMSBU210 (BUDS/01)
103	I989	DIAGNOSIS CODE NOT ON FILE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
104	I990	INVALID DIAGNOSIS CODE INDICATOR	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
105	3004	CWF REJ FLAG S/B Y N OR SPACE	TBD	No	VMSBU2A0 (BUDS/10)
106	C991	INVALID DATE	TBD	CWF and/or BDS	VMSBU2A0 (BUDS/10)
107	N009	NOTE MASTER FILE IS NOT OPEN	TBD	No	VMSBU210 (BUDS/01)
108	N01	NOTE SELECTED NOT	TBD	No	VMSBU210 (BUDS/01)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
	3	FOUND - HIT ENTER TO CONTINUE			
109	N024	NOTE ALREADY EXISTS - OVERTYPE TO MODIFY	TBD	No	VMSBU210 (BUDS/01)
110	Q045	OPER NOT AUTH FOR THIS FUNCTION	TBD	No	VMSBU210 (BUDS/01)
111	Q624	REC CONTAINS MAX OCCURS, CANNOT ADD VALUE	TBD	No	VMSBU220 (BUDS/02) VMSBU2A0 (BUDS/10)
112	SE68	USE PF9 TO UPDATE	TBD	No	VMSBU210 (BUDS/01) VMSBU2A0 (BUDS/10)
113	XP05	PARAMETER RECORD NOT FOUND	TBD	No	VMSBU210 (BUDS/01)
114	XP06	PARAMETER FATAL ERROR ON READ	TBD	No	VMSBU210 (BUDS/01)

ONLINE CLAIMS PROCESSING

No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
1	0243	BENE PRIC STATE REQ There is a Rep Payee on file for the HICN on the claim. The beneficiary's pricing state must be typed in the BS field on the claim. The system allows the BS field to have a different value than the state field on BUDS01 in this situation.	No	No	Uses BI-A-REP-PAYEE-IND (VMSCP220)
2	0008	UNAUTH NAME CHG Name typed on the claim screen does not match the name on the Beneficiary ID BUDS01 record. The Beneficiary ID name has overlaid the name that was typed. Type at least one character to remove the message. EMC claims bypass this edit. For EMC claims, VMS keeps the NAME KEY the same as it came in on the EMC claim. If the name does not match the BUDS01 name, the NAME KEY MISMATCH edit	TBD	CWF and/or BDS	Uses BI-A-BENE-1STNAME-1 and BI-A-BENE-SURNAME-1-4 (VMSCP220)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		stops the claim.			
3	0224	UNDELIVERABLE MAIL Beneficiary address has been flagged as undeliverable.	No	No	BI-A-ZIP-DELIVERY-CODE = \$\$ (when not PASS-BATCH-CLAIM) (VMSCP220)
4	0098	REP PAYEE CITY ERR The Claim Force code is L, R, or Y and at least one of the following is true: <ul style="list-style-type: none"> • The claim status is not 62 (CWF approved but system cannot format address). • The representative payee name is blank. • The beneficiary's city is blank. • CWF did not send a representative payee. 			?? Fires edit when doesn't meet CIP conditions which also includes REP-PAYEE-ON-BENE-ID (VMSCP220)
5	0049	SEX-KEY MISMATCH Sex Code on this claim does not match the Sex Code on the Beneficiary ID BUDS01 record.	TBD	CWF and/or BDS	Uses BI-A-SEX no t= CP-4-SEX (VMSCP220)
6	0011	NO BENE ZIP Beneficiary ID record for this claim has zeros in the ZIP code.	TBD	CWF and/or BDS	When BI-A-ZIP = 0
7	0012	SSA REP PAYEE Address key typed on the claim does not match the Beneficiary ID address and the Beneficiary ID Representative Payee Indicator (RP) = 1.	No	No	If REP-PAYEE-ON-BENE-ID and the CP-4-ADDRESS1 = BI-A-ADDRESS1 (but the WC-ADDR-KEY formatted from BI-A not = or spaces), fire this edit (VMSCP220)
8	0048	ADDR-KEY MISMATCH Address Key on this claim is blank or inconsistent with the Beneficiary ID record.	No	No	If WC-ADDR-KEY (formatted from BI-A) not = or spaces and not (REP-PAYEE with CP-4 address = BI-A address) . Fires 2x – once MEDB, once for DME (but may not actually get to edit for DME since next 2 edits cover all) (VMSCP220)
9	0225	XX-ADDR-KEY-MIS-ASSIGN (Showing NOT IN USE in manual but with the description, Address key mismatch – assigned.)	No	No	For Assigned claim, if WC-ADDR-KEY (formatted from BI-A) not = or spaces and not (REP-PAYEE with CP-4 address = BI-A address)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
					(VMSCP220)
10	0226	XX-ADDR-KEY-MIS-NON-AS (Showing NOT IN USE in manual but with the description, Address key mismatch – non-assigned.)	No	No	For Non-assigned claim, if WC-ADDR-KEY (formatted from BI-A) not = or spaces and not (REP-PAYEE with CP-4 address = BI-A address) (VMSCP220)
11	0099	RP NOT=1, CLM FRC Rep Payee Indicator does not equal 1 and the Claim Force Code = L, R, or Y.	TBD	CWF and/or BDS	Claim status=62, not REP-PAYEE-ON-BENE-ID, no CP-4 rep payee and Claim force R,3,5,T,L,Y (VMSCP220)
12	0055	XREF BENE LOOP System detected a cross-reference Beneficiary loop. All the beneficiary records with XREF HICNs have a STATUS of X. Once the system reads more than 10 HICN records this edit appears.	TBD	CWF and/or BDS	When the bene has more than 10 xref HICNs in the BENEID (VMSCP220)
13	0041	BENE UPD ERR System error occurred while updating a Beneficiary Identification record for this Beneficiary.	No	No	When there is a rewrite error on the Beneid file (VMSCP220)
14	0042	BENE ADD ERR System error occurred while adding a Beneficiary Identification record for this new Beneficiary	No	No	When there is a rewrite error on the Beneid file (VMSCP220)
15	0043	BENE DUP ERR File duplicate error occurred while adding a Beneficiary Identification record for this new Beneficiary.	No	No	When there is a rewrite error on the Beneid file (VMSCP220)
16	0047	NAME-KEY MISMATCH Name Key on this claim is blank or inconsistent with the Beneficiary ID record.	No	No	If not sex key mismatch and if BI-A-BENE-1STNAME or BI-A-BENE-SURNAME doesn't match with CIP (VMSCP220)
17	0051	BENE REC ERROR System error occurred while reading the Beneficiary Identification record.	No	No	When HICN read or for update or update read on BENE ID file returns any error other than NOT found or ENDFILE (VMSCP220)
18	0004	NO HISTORY	Yes	CWF and/or	When HICN read or accessed for

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		There is no history for this Beneficiary. For Paper claims, type the full name and address and press Enter . A new skeleton BENE record is created. For EMC claims, this edit does not fire. A new BENE record is not created until the claim completes, goes to CWF, and CWF returns the BENE information.	5052	BDS	update or update read on BENEID file returns an end of file or not found condition (VMSCP220)
19	0007	BENE REC CLOSED Beneficiary ID record for this HICN is in a Closed status. Verify the HICN. This edit is bypassed when total Allowed Charge equals zero.	TBD	CWF and/or BDS	BI-A-STATUS-CODE is moved to BSA field in VMSCP220. BSA field is checked in VMSCP250 to fire this edit (VMSCP250)
20	3027	DIAG REF REQ Dates of Service on or after 10/1/03 require a Diagnosis Reference for claims when the Provider Specialty is not equal to 59.	No	No	BI-A-CRD-STATUS is moved to BSA field in VMSCP220. BSA field checked in VMSCP230 for value '2' , '3' or '4' and if SPC-SPECIALITY = '69' and LWA-DIAG-REF = SPACES (VMSCP230)
21	3008	MPR – AGE MPR record for this approved procedure code has Age Low or Age High set. Verify the service rendered. Follow your office procedures for medical necessity or denial. Line force code P and the combination line force codes that include it (D, F, G, K, R, and V) bypass this edit if the Age Override switch is set to a Y on the MPR.	No	No	BSA-BIRTH-DATE field used to calculate WS-BENE-AGE which is then used to compare with MPR age range and if not edit fires. - Can we use CWF data to determine age? (VMSCP230)
22	3029	DIAG AGE ERR Beneficiary's age is outside the age limits set on the corresponding Diagnosis record. Verify the data. You can bypass the edit by typing H in the Line Review Code if the Age Override code is set to Y on the Diagnosis record. Otherwise, correct the data	No	No	BSA-BIRTH-DATE field used to calculate WS-BENE-AGE which is then used to compare with DIA age range and if not edit fires. - Can we use CWF data to determine age? (VMSCP230)

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		<p>or deny the line.</p> <p>Note: This edit applies only if a Diagnosis Reference is required (see <u>edit 3027</u>) and is specified.</p> <p>Dates of Service on or after 10/1/03 require a diagnosis code for claims when the Provider Specialty is not equal to 59.</p> <p>Dates of Service on or after 4/1/89 require diagnosis codes for all claims.</p>			
23	3157	<p>SPN DT < CURR ENT</p> <p>Service dates are before entitlement. For HCPCS codes having the SY proc option, this edit is based on the FROM Date of Service only. The system verifies the service dates using the information returned by BDS, if available, or BUDS. If correct, deny the line using the appropriate Action Code. Claim Force Codes J, Q, and W bypass this edit.</p>	Yes	BDS (YES)	<p>If BSA-PRIOR-ENTITLE-BEGIN and BSA-PRIOR-ENTITLE-END, edit fires</p> <p>(VMSCP230)</p>
24	3161	<p>PAST-FILE-LIMIT-NA</p> <p>The From Date of Service on the line is past the timely filing period and the claim is a non-assigned claim.</p> <p>Claims received with a From Date of Service of January 1, 2010 or greater are considered past the timely filing period when the Date of Receipt is greater than one calendar year past the From Date of Service on the claim line.</p> <p>Claim lines received with a From Date of Service of October 1, 2009 through December 31, 2009 are considered past the timely filing period when the Date</p>	No	No	<p>If BSA-FORCE-QRY-CODE = "1"(or) BSA-CURR-ENTITLE-BEGIN and –END are within the LWA-FROM-DATE (or) BSA-PRIOR-ENTITLE-BEGIN and –END are within LWA-FROM-DATE (or) if BSA-PRIOR-ELIG-IND = "1", paragraph EC200-EDIT-TIME-LIMIT is executed where other claim fields are checked to determine firing of this edit.</p> <p>-Is this dependent on bene eligibility dates? If so, could we use BDS data</p> <p>(VMSCP230)</p>

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		<p>of Receipt is equal to or greater than January 1, 2011. Claims received with a From Date of Service prior to October 1, 2009 process as follows:</p> <p>The system determines the year value for the filing date by subtracting two years from the two-digit year in the Julian date of the Date of Receipt. The Date of Receipt field can be found on many screens in VMS. On the Claims Entry screen (VMON) and the PRIMARY CLAIM HISTORY DETAIL screen (BUDS08), it is the DR field. The month and day for the filing date are set to October 1st (10/01). The claim FROM date is then compared to the filing date determined by the system. If the claim FROM date is prior to the system-determined filing date, the edit prompts. Only the claim FROM date is used for this comparison, whether the HCPCS code has the SY proc option attached or not.</p> <p>Correct the dates or use Claim Header Force Code 2-5, 7, E-J, L, or N to bypass the edit. <i>This message displays prior to pricing the claim lines.</i></p>			
25	3155	<p>SPN DT ENT OVERLP Service dates overlap entitlement and the HCPCS code on the claim line does not have the SY proc option. The system checks the information returned by BDS, if available, or BUDS to verify the service dates and check the entitlement dates. Deny services that are not within the entitlement period.</p>	TBD	BDS (Yes)	<p>If BSA-CURR-ENTITLE-BEGIN and BSA-CURR-ENTITLE-END overlap with LWA-FROM and LWA-TO dates, edit fires</p> <p>(VMSCP230)</p>

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		Claim Force Codes J, Q, and W bypass this edit.			
26	3158	SPN DT PRI ENT OL Service dates overlap prior entitlement dates and the HCPCS code on the claim line does not have the SY proc option. . The system checks the information returned by BDS, if available, or BUDS to verify the service dates and check the entitlement dates. Deny services that are not within the entitlement period. Claim Force Codes J, Q, and W bypass this edit.	TBD	BDS (Yes)	If BSA-PRIOR-ENTITLE-BEGIN and BSA-PRIOR-ENTITLE-END overlap with LWA-FROM and LWA-TO dates, edit fires (VMSCP230)
27	3159	SPN DT BETW ENT Service dates are between entitlement periods. For HCPCS codes having the SY proc option, this edit is based on the FROM Date of Service only. . The system checks the information returned by BDS, if available, or BUDS to verify the service dates and check the entitlement dates. If correct, deny the line using the appropriate Action Code. Claim Force Codes J, Q, and W bypass this edit.	TBD	BDS (Yes)	If BSA-PRIOR-ENTITLE-BEGIN and BSA-PRIOR-ENTITLE-END is greater than LWA-FROM-DATE or if it is greater than the DOS range, edit fires (VMSCP230)
28	3156	SPN DT DTS > ENT Service dates are after the entitlement ending date. For HCPCS codes having the SY proc option, this edit is based on the FROM Date of Service only. The system verifies the service dates using the information returned by BDS, if available, or BUDS. If correct, type 0 in the Allowed Charge field and deny the line with the appropriate Action Code. Claim Force Codes J, Q, and W bypass this edit.	TBD	BDS (Yes)	If BSA-CURR-ENTITLE-BEGIN and BSA-CURR-ENTITLE-END range is greater than LWA-FROM and LWA-TO date range or greater than LWA-FROM-DATE (depending on SY proc option found or not) and action code not equal to BM, BQ, BV or BW, edit fires (VMSCP230)
29	3160	SPN DT < PRI ENT Service dates are before	TBD	BDS (Yes)	If DOS are less than prior entitlement date ranges, edit

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		prior entitlement. For HCPCS codes having the SY proc option, this edit is based on the FROM Date of Service only. . The system checks the information returned by BDS, if available, or BUDS to verify the service dates and check the entitlement dates. If correct, deny the line using the appropriate Action Code. Claim Force Codes J, Q, and W bypass this edit.			fires. (VMSCP230)
30	4012	SPI,VERIFY CRD An SPI Code 9 (Live Kidney Donor Surgery and related services qualifying for 100% payment) is present, but the BUDS01 CRD indicator is not equal to 2, 3, or 4, or a Beneficiary ID record does not exist for the HICN. CRD indicators are applicable to this SPI.	TBD	CWF/BDS	If LWA-SPI = '9' and BSA-CRD-STATUS not equal to '2', '3' or '4', edit fires. (VMSCP240)
31	4003	DATES, DOD The dates of service are after the Beneficiary's date of death. The system verifies the service dates using the information returned by BDS, if available, or BUDS. Use Claim Header Force Code H, K, O, S, U, W, Y, or Z to allow donor services subsequent to the recipient's date of death. SPI Code must equal 9. Claim Force Codes J and Q bypass this edit. Note: For claim lines with HCPCS codes that have the SY proc option, this edit is based on the FROM date of service.	TBD	BDS (Yes)	If BSA-FORCE-QUERY-CODE is not '1' and if BSA-DEATH-DATE < LWA-FROM-DATE (for SY proc opt) or < LWA-TO-DATE (no SY proc opt) and if allowed charge is < zeroes, edit fires (VMSCP240)
32	4010	DATES OVERLAP HMO The service dates overlap HMO entitlement dates. The system checks the information returned by BDS, if available, or BUDS to verify the service dates and check	TBD	BDS (Yes)	BSA-HMO-EFF-DATE-1, BSA-HMO-TERM-DATE-1 and also BSA-HMO-EFF-DATE-2, BSA-HMO-TERM-DATE-2 compared with claim DOS to fire edit when there is an overlap

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		the HMO entitlement dates.			(VMSCP240)
33	4161	<p>BENE SUB DUMMY PRV</p> <p>Prompts under the following conditions:</p> <ul style="list-style-type: none"> Provider Flag A on the APPL/1 Provider Header screen is set to Y (provider is a "Dummy" provider) Billing indicator on the primary claim screen is set to B (submitted by beneficiary) BSC indicator on the BUDS01 Beneficiary Information screen is set to Y (beneficiary previously submitted a claim with a non-Medicare provider) <p>Or</p> <ul style="list-style-type: none"> Provider Flag A on the APPL/1 Provider Header screen is set to Y (provider is a "Dummy" provider) Billing indicator on the primary claim screen is set to B (submitted by beneficiary) BSC indicator on the BUDS01 Beneficiary Information screen is set to space <p>Proc option BS is not found on the procedure code of a claim line with a FROM date of service on or after 01/01/2012.</p>	No	No	<p>If BSA-BENE-SUBMIT-IND is "Y" and CP-4-BILLING-IND = "B" and PSA-PR-FLAGA(PSUB1) = "Y", edit fires</p> <p>(VMSCP240)</p>
34	4060	<p>DENY-NASSG ESRD</p> <p>Deny non-assigned ESRD lines if:</p> <ul style="list-style-type: none"> The Date of Service is not less than the BUDS01 current CRD date, the current reimbursement method = 2, the Date of 	No	No	<p>If LWA-TO-DATE-N not < BSA-CURR-CRD-DATE and BSA-REIM-METHOD-CURR = '2 and LWA-FROM-DATE-N > 1990031 and CP-4-CLAIM-TYPE = 'N'</p> <p>(or)</p> <p>If LWA-TO-DATE-N not < BSA-CURR-CRD-DATE and BSA-REIM-METHOD-PREV= '2 and LWA-</p>

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		<p>Service is > 1/31/90.</p> <p>Or</p> <ul style="list-style-type: none"> The Date of Service is less than the BUDS01 current CRD date, the previous reimbursement method = 2, the Date of Service is greater than 1/31/90. 			<p>FROM-DATE-N > 1990031 and CP-4-CLAIM-TYPE = 'N'</p> <p>(VMSCP240)</p>
35	4061	<p>DENY-HOME DAILY (XX-DENY-HOME-DAILY)</p> <p>Deny home dialysis lines if:</p> <ul style="list-style-type: none"> Date of Service is not less than the BUDS01 current CRD date, the current reimbursement method equals 1 or D, and the CRD Status equals 2, 3, or 4. <p>Or</p> <ul style="list-style-type: none"> Date of Service is less than the BUDS01 current CRD date, the previous reimbursement method equals 1 or D, and the CRD Status equals 2, 3, or 4. 	No	No	<p>If LWA-TO-DATE-N not < BSA-CURR-CRD-DATE</p> <p>and (BSA-CRD-STATUS = '2' OR '3' OR '4') AND (BSA-REIM-METHOD-CURR = '1' OR 'D')</p> <p>(or)</p> <p>F (BSA-CRD-STATUS-PREV = '2' OR '3' OR '4') AND (BSA-REIM-METHOD-PREV = '1' OR 'D')</p> <p>(VMSCP240)</p>
36	4025	<p>NO CUR DIAL OPT</p> <p>The date of service is equal to or greater than the BUDS01 current CRD Date, and current CRD status equals 2, 3, or 4, and the HCPCS proc option equals ST, but the BUDS01 current Reimbursement Method is blank.</p>	No	No	<p>If LWA-TO-DATE-N < BSA-CURR-CRD-DATE</p> <p>And</p> <p>IF (BSA-CRD-STATUS = '2' OR '3' OR '4')</p> <p>IF BSA-REIM-METHOD-CURR = SPACE OR ZERO</p> <p>(VMSCP240)</p>
37	4026	<p>NO PRI DIAL OPT</p> <p>The date of service precedes the BUDS01 current CRD Date, and the previous CRD Status equals 2, 3, or 4, and the HCPCS proc option equals ST, but the BUDS01 previous Reimbursement Method is blank.</p>	No	No	<p>IF LWA-TO-DATE-N < BSA-CURR-CRD-DATE AND IF (BSA-CRD-STATUS-PREV = '2' OR '3' OR '4')</p> <p>IF (BSA-REIM-METHOD-PREV = SPACE OR ZERO)</p> <p>(VMSCP240)</p>
38	9010	<p>DISABLE OVER 64</p> <p>This MSP claim has Other Liability of K (Disability) on a</p>	No	No	<p>BSA-BIRTH-DATE is sued to calculate several working storage fields.</p>

Appendix D3- VMS Edits

No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		Beneficiary aged 65 or over. Update BUDS02 and return to the claim.			IF WORKING-AGED-RANGE OR OVER69-RANGE, this edit fires. These 88 level fields are set based on a combination of CIP fields and calculated working storage fields using BSA.
39	9002	MSP DATE OVERLAP The claim line From date is less than the beneficiary's MSP From date, or the claim line To date is greater than the beneficiary's MSP To date. Suspend the claim to status 01.	No	No	If BSA-MSP-FROM-DT and –TO-DT range overlaps with LWA DOS, edit fires. (VMSCP800)
40	9009	INSTR XXXXXXXXXX This MSP claim contains multiple services with dates of service that overlap MSP involvement dates on the Beneficiary's BUDS02 record. The From Date is within the MSP date range but the To Date is outside the range. The record also has slashes in Positions 4 and 6 of the Instruction field on the involved occurrence on the BUDS02 record.	No	No	If BSA-MSP-INSTRUCTION (HLD-MSP-SUB) has slashes in 4 th and 6 th position, edit fires. (VMSCP800)
42	9006	MSP INVOLVEMENT If BUDS02 has an E or a K and the VANS MSP Data Screen (VCN3) is an E, K, Z, U, N, or space, the following conditions make edit 9006 appear: 1. The beneficiary doesn't have a Birth Date on the BUDS02 record. This creates the Working Aged Undetermined condition. Invalid dates of service on the claim can also create this condition. 2. The beneficiary is disabled and over 65 years of age. The	No	No	IF SUBJECT-TO-EGHP OR WORKING-AGED-UNDETERMINED, edit fires. These 88-level fields are set using other working storage fields that used BSA-fields. (or) If BSA-MSP-CODE (HLD-MSP-SUB) = CP-4-WORK-COMP (VMSCP800)

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		<p>Working Aged Begin Date is determined by taking the beneficiary's date of birth and adding 65 years. To qualify as disabled, the Working Aged Begin date must be greater than the To Date of Service on the line and the Current Reason for Entitlement For Chronic Renal Disease on BUDS02 must be 1.</p> <p>3. The beneficiary is over 69 years of age. This is determined by taking the beneficiary's Working Aged Begin Date and adding 4 years and 364 days. Otherwise, the indicator is set to Y.</p> <p>Note: Conditions 1, 2, and 3 are determined when the claim has a valid MSP Resolution of C, D, P, S, F, N, X, or Z and the VCN2 value is K.</p> <p>If conditions 1, 2, and 3 listed above are not true, then: If BUDS02 has an E or a K and VCN3 is E, K, or Z, edit 9006 appears.</p>			
42	9008	<p>MULT MSP INVOLV</p> <p>This Beneficiary has more than one type of MSP involvement in effect for the dates of service on this claim line. Transport to BUDS02 and select the appropriate MSP code to use on this claim. Return to the claim,</p>	No	No	<p>If WS-INVOLVED-FLAG = "MUL". This flag is set using some working storage fields that were populated using BSA data.</p> <p>(VMSCP800)</p>

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		and type over the ? in the OL field with the MSP code.			
44	9007	POSSIBLE MSP This claim has a valid MSP value in the Other Liability field that does not equal the MSP data on the Beneficiary's BUDS02 record.	No	No	Valid value in claim OL field but does not equal BUDS02 MSP value (VMSCP800)
45	0103	ENTER EOB-IND ADST MSP Claim Path condition requires the presence or absence of an Explanation of Benefits from the primary insurer. If an EOB is attached to the claim, type Y in the EOB field. If no EOB attached, type N in the EOB field.	No	No	BSA-MSP-FROM-DT BSA-MSP-TO-DT BSA-MSP-CODE (MSP-SUB) BSA-MSP-VALIDITY-IND (MSP-SUB) are used along with working storage field OPER-ENTERED-MSP-OCCUR to set ACEMSP-NO_EOB (VMSCP800)
46	0104	NO CLAIM PATH No claim path has been defined on the ADST table for the conditions existing for this Beneficiary and claim. Suspend to the MSP unit so that a claim path can be determined.	No	No	Same BSA fields used as above but If no match found on the ADST path table, edit fires (VMSCP800)
47	0105	MSP REPLICATE MSP claim must be replicated for one of the following reasons: <ul style="list-style-type: none"> At least one service on the claim falls within the time period when Medicare is secondary and at least one service falls within a time period when Medicare is primary. Two lines on the claim have conflicting claim paths on ADST, for example automatic development and automatic suspension. Replicate the claim to separate the conflicting lines.	No	No	BSA-MSP-VALIDITY-IND and BSA-MSP-CODE are used or checked in multiple place before populating WS-ACEHLD-VALUE . IF WS-ACEHLD-VALUE = 1, then edit fires (VMSCP800)
48	9011	FROMDATE-TODATE (XX-REPL-FROM-MESS) Message does not seem to	No	No	BSA-MSP-VALIDITY-IND and BSA-MSP-CODE are used or checked in multiple place before

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No	Edit	Description	Replacement Edit	Replacement System	Analysis Description
		<p>match Sri's analysis?</p> <p>This MSP line must be replicated for one of the following reasons:</p> <ul style="list-style-type: none"> The dates of service fall within the time period when Medicare is secondary and at least one service falls within a time when Medicare is primary. This line has a conflicting ADST claim path with another line; for example, automatic development and automatic suspension. <p>Replicate the claim to separate the conflicting lines.</p>			<p>populating WS-ACEHLD-VALUE .</p> <p>IF WS-ACEHLD-VALUE = 1, then edit fires</p> <p>(VMSCP800)</p>