

Medibank Rejection Codes Information for Specialists

A claim may be rejected as a result of a Medicare and/or Medibank assessment. The following document provides a list of common rejection codes and an explanation of the required action.

Medibank generated Specialist rejection codes

Code	ECLIPSE code	Action you can take
171	BENEFIT NOT PAYABLE – PROVIDER MAY ONLY ACT IN ONE CAPACITY	This means Provider has been paid for same Date of Service for a different item number. This could result if provider numbers have been mixed up between surgeon/anaesthetist/assistant surgeon. Check that the claim has been correctly captured. If you believe these details are correct, please call Medibank on 1300 130 460.
211	BENEFIT IS NOT PAYABLE FOR THE CLAIM CLAIMED UNDER MEMBER'S COVER	Please check the patient's level of cover and confirm that the claim is submitted with the correct GapCover batch header. <i>Note: GapCover batch headers are only for resident covers (eligible patients).</i> Overseas visitors' claims must be submitted by the patient themselves. Providers can submit an unpaid claim on the patient's behalf with a Medibank claim form signed by the customer.
252	SERVICE POSSIBLY AFTER CARE	Please ensure all required information is provided in the invoice. If the service is not after care, resubmit the account with 'Not Normal After Care' as text with the item number.
648	DETAILS NOT VALID FOR SPECIALIST CONSULTS CLAIMS	Please ensure the: <ul style="list-style-type: none"> • referral provider number • referral type code • referral date and • referral period, are all entered and are correct.
800	CLAIM HAS FAILED PRE MEDICARE VALIDATION CHECKS	Please check to confirm that: <ul style="list-style-type: none"> • The Medicare number for the patient is current. • Details of the patient's first name, last name or date of birth match exactly on their Medibank and Medicare records. . If the details do not match, the patient will need to call Medicare and/or Medibank and provide correct matching information.

Code	ECLIPSE code	Action you can take
854	OUT OF POCKET EXCEEDED THRESHOLD - BENEFITS PAID WITH NO GAPCOVER	The Gap charged is greater than \$500 and no further benefits are payable. If you wish to change the charge, please call Medibank on 1300 130 460.
1563	ASSOCIATED RVG ANAESTHETIC SERVICE NOT CLAIMED	Please redo the claim in Eclipse and make sure it is in the correct sequence. For more information please call Medibank on 1300 130 460.
9201	INVALID FORMAT FOR DATA ITEM	Please ensure that the information on the claim is correct and resubmit it. Please ensure the: <ul style="list-style-type: none"> • Medicare number, • patient name and • date of birth, are correctly entered in the claim and resubmit it. If this does not work, please call Medibank on 1300 130 460.
9650	THE PATIENT DATA SUPPLIED FAILED VALIDATION CHECKS AGAINST MEDICARE DATA.	Please check to confirm that: <ul style="list-style-type: none"> • The Medicare number for the patient is current. • Details of the patient's first name, last name or date of birth match exactly on their Medibank and Medicare records. If the details do not match, the patient will need to call Medicare and/or Medibank and provide correct information.

Medicare generated Specialist rejection codes

Code	ECLIPSE code	Action you can take
624	DIAGNOSTIC IMAGING REQUESTING DETAILS/REQUEST OVERRIDE DETAILS MISSING/INVALID	Please ensure that the correct item has been used. Please refer to the Medicare website to check whether any referral details are required or an override is available for this item. For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections .
1154	DIAGNOSTIC IMAGING MULTIPLE SERVICE RULE APPLIED TO SERVICE	When there is a certain combination of diagnostic imaging items then the benefit is sometimes reduced on one or more items. Refer to Medicare for checking which diagnostic rule apply. For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections .

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1159	ITEM ASSOCIATED WITH OTHER SERVICE ON WHICH BENEFIT PAYABLE	<p>Please visit MBS Online to see if the item restricts with another item on this claim.</p> <p>If the items does restrict with another item, you may have to supply time or sites for the restricting items on the invoice.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections.</p>
1160	MAXIMUM NUMBER OF SERVICES FOR THIS ITEM ALREADY PAID	<p>Individuals are only allowed a certain number of some services for a duration of time. Please refer to MBS Online to read the description of the item.</p> <p>Please ensure that no other similar services have been provided by other doctors. It is best to check both inpatient as well as outpatient services.</p>
1179	BENEFIT NOT PAYABLE - ASSOCIATED SERVICE ALREADY PAID	<p>Please visit MBS Online to see if the item restricts with another item on this claim. If the item does restrict with another item, you may have to supply time or sites for the restricting items on the invoice.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections.</p>
1267	SERVICE NOT PAYABLE - ASSOCIATED SERVICE NOT PRESENT	<p>Certain items can only be claimed if other items are supplied in the same account. If the other item(s) is not present then the first item cannot be paid.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections.</p>
1421	WRONG ASSISTANT ITEM USED FOR THE OPERATION/S PERFORMED	<p>Please refer to the Medicare website for calculating the assistant fee and ensure the correct item number has been used.</p> <p>If possible please check if the surgeon has been paid for surgeries involving more than one item number.</p> <p>Medicare may reject the claim with this rejection if the surgeon has not yet submitted their claim.</p> <p>Please check you are billing the same surgery item numbers as the surgeon.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections</p>

Code	ECLIPSE code	Action you can take
1500	REJECTED IN ASSOCIATION WITH ANOTHER ITEM IN THIS CLAIM	<p>Please visit MBS Online for the rules regarding this item.</p> <p>Associated items may not be in the correct sequence or rejected incorrectly. For example there are specific Medicare rules for anaesthetic claims.</p> <p>You may have to supply additional information regarding the sites, times or clinical details for the rejected items on the invoice.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections.</p>
1536	LOCATION SPECIFIC PRACTICE NUMBER NOT SUPPLIED	<p>Please ensure the Location Specific Practice Number (LSPN) has been supplied and is current with Medicare.</p>
1558	RVG ANAESTHETIC ITEM NOT CLAIMED	<p>Anaesthetic invoices should have the Relative Value Guide (RVG) item and a time item on them. Please ensure the Medicare rules regarding anaesthetic invoices have been followed.</p> <p>If the time item comes before the RVG item while sending the claim, it could result in this rejection.</p> <p>For further information please call Medicare provider enquiries on 132 150 or view the Education guide - Medicare reason codes and reducing claim rejections.</p>