

**Notification to Medicaid Managed Care Plans (MMCPs) Regarding Resolution of System Configuration Issues for Passthrough Payments**

**To: Medicaid Managed Care Plans (MMCPs), including Mainstream Medicaid Managed Care and HIV Special Needs Plans**

**November 17, 2021**

The State has been working to address configuration errors that have prevented the submission of passthrough payment claims for 29-I Core Limited Health-Related Services by Medicaid Managed Care Plans. The system has been updated and these errors have now been resolved. Plans should begin to submit passthrough payment claims for 29-I Core Limited Health-Related Services. Moving forward, Plans should submit passthrough payment claims for Core Limited Health-Related Services to the State within 30 days of issuing claim payment to providers, and no later than 180 days after the date of service. Plans should use Delay Reason Code 03 if submitting outside the 90-day timely filing timeframe.

Any questions related to this topic can be sent to [bh.transition@health.ny.gov](mailto:bh.transition@health.ny.gov).