

How to submit a corrected claim

Rejected claims versus denied claims

- **A rejected claim is a claim that is sent back due to an error in the claim.** This could be due to an input error, incorrect data or data that does not match what the payer has on file.
- **Denied claims have been processed and adjudicated but are denied and deemed unpayable.** The denial could be for a number of reasons.
- When a claim has been rejected (in other words, it has not been adjudicated), you may resubmit the claim. To resubmit the claim, simply create a new claim and resubmit it in Availity or with your preferred clearinghouse.



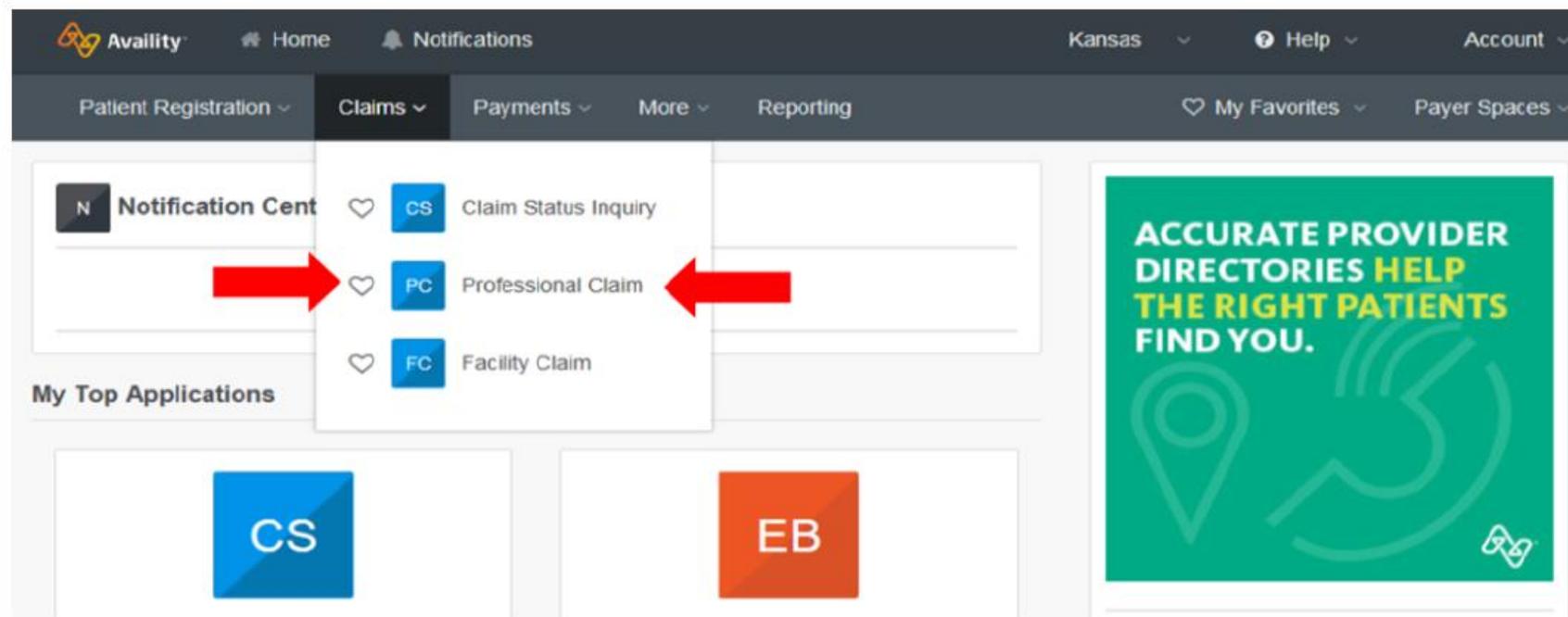
When to submit a corrected claim

- A **corrected claim** is appropriate to submit when the provider made an error in the information initially submitted on a claim.
- Submitting as a corrected claim is not the same as resubmitting. **Resubmitting is simply creating a new claim** and submitting it through your preferred clearinghouse.
- If you resubmit a claim that has been denied, the new claim will be **denied as a duplicate claim**.
- Submitting a previously denied claim as a corrected claim will result in adjudication of the claim with the corrected information. **Submitting a corrected claim will replace the previously denied claim.**



Submitting a corrected claim

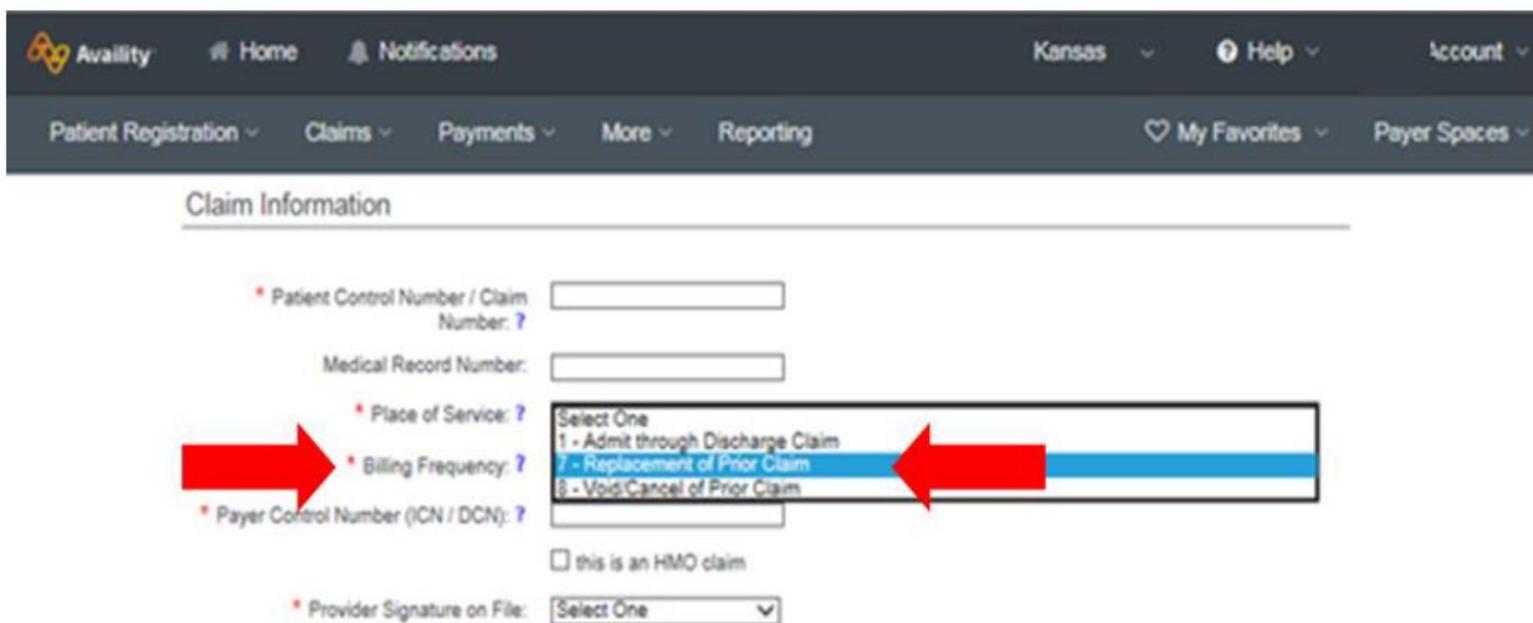
From the Availity dashboard, select the **Claims** menu and then choose **Professional Claim**.



Submitting a corrected claim (cont.)

Complete the *Claim Information* form. Items with a red asterisk (*) are required.

To identify a claim as a corrected claim, under *Billing Frequency*, chose **7 – Replacement of Prior Claim** from the drop-down. This will replace the entire previously submitted claim.



The screenshot shows the Avality web application interface. The top navigation bar includes the Avality logo, Home, Notifications, Kansas, Help, and Account. Below this is a secondary navigation bar with Patient Registration, Claims, Payments, More, Reporting, My Favorites, and Payer Spaces. The main content area is titled "Claim Information" and contains several required fields marked with a red asterisk:

- * Patient Control Number / Claim Number: ? (text input)
- Medical Record Number: (text input)
- * Place of Service: ? (dropdown menu)
- * Billing Frequency: ? (dropdown menu, highlighted with a blue bar and two red arrows pointing to it)
- * Payer Control Number (ICN / DCN): ? (text input)
- this is an HMO claim
- * Provider Signature on File: (dropdown menu)

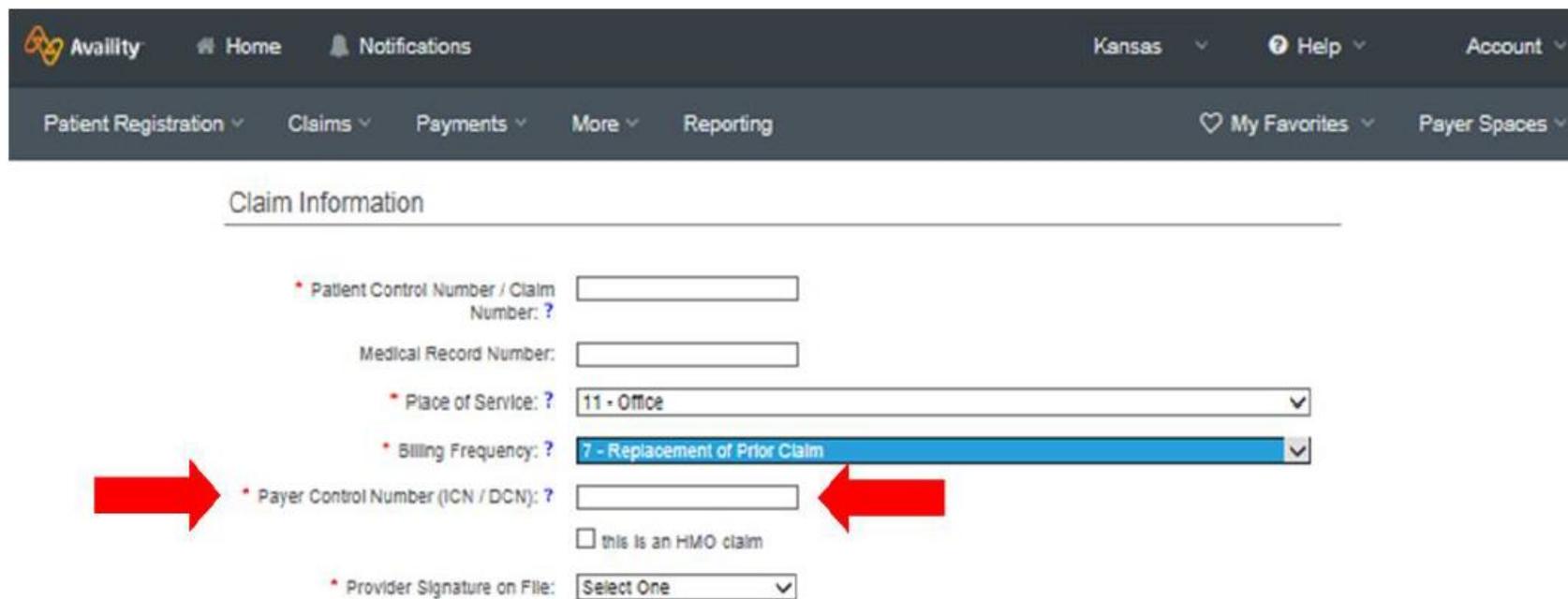
The Billing Frequency dropdown menu is open, showing the following options:

- Select One
- 1 - Admit through Discharge Claim
- 7 - Replacement of Prior Claim** (highlighted)
- 8 - Void/Cancel of Prior Claim



Submitting a corrected claim (cont.)

Enter the claim number you want to replace in the field labeled *Payer Control Number (ICN / DCN)*.



The screenshot displays the Avallity web application interface. At the top, there is a navigation bar with the Avallity logo, Home, Notifications, Kansas, Help, and Account. Below this is a secondary navigation bar with Patient Registration, Claims, Payments, More, Reporting, My Favorites, and Payer Spaces. The main content area is titled 'Claim Information' and contains several form fields:

- * Patient Control Number / Claim Number: ? [Text Input]
- Medical Record Number: [Text Input]
- * Place of Service: ? [Dropdown Menu: 11 - Office]
- * Billing Frequency: ? [Dropdown Menu: 7 - Replacement of Prior Claim]
- * Payer Control Number (ICN / DCN): ? [Text Input]
- this is an HMO claim
- * Provider Signature on File: [Dropdown Menu: Select One]

Two red arrows point to the 'Payer Control Number (ICN / DCN): ?' field, one from the left and one from the right, indicating where to enter the claim number to be replaced.



Submitting a corrected claim (cont.)

Corrected claim reminders

- Ensure pop-up blockers are turned off to allow navigation to Wellpoint and Availity websites.
- Submit the form with the appropriate information — payer, rendering practitioner, other health information (For example, responsibility sequence), diagnosis codes and procedure code.
- Submit all lines of services. The submitted corrected claim will remove the previously submitted lines when the corrected claim is adjudicated.



Submitting a corrected claim (cont.)

A general Availity overview can be
found at:

provider.wellpoint.com/wa/





provider.wellpoint.com/wa/

Services provided by Wellpoint Washington, Inc.

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