

Provider Notice

To: All PerformCare Network Providers
From: Scott Daubert, PhD, VP Operations
Date: December 15, 2017
Subject: AD 17 106 Clarification of Rejected and Corrected Claim Rules

In an effort to be consistent for both paper and electronically submitted claims, please follow the guidelines below regarding rejected versus corrected claims.

Rejected claims are those returned to provider without being processed or adjudicated, due to a billing issue.

- Rejected paper claims have a letter attached with a document control number (DCN).
- A DCN is **not** a PerformCare claim number. **Re-billing of a rejected claim should be done as an original claim.**
- If the claim was rejected, it is as if the claim never existed and does not appear on any PerformCare remittance advice.
- Since rejected claims are considered original claims, the **timely filing limits** should be followed. Please check your PerformCare contract or the Provider Manual for the timely filing limits.

Corrected claims are defined as a claim that PerformCare has processed and adjudicated but paid incorrectly. There are various reasons that claims would require correction, including but not limited to, Provider billing the wrong rate or number of units, or PerformCare paying incorrectly because of a rate issue.

- In cases where the resubmission serves to correct a claim that has already been denied/paid, the claim must be clearly identified as a corrected claim and resubmitted within 365 days from date of service.
- If there is an identified overpayment beyond 365 days from date of service, please send a refund check with documentation directly to the PerformCare Finance department at 8040 Carlson Rd., Harrisburg, PA 17112.
- Corrected claims may be submitted electronically through Change HealthCare or NaviNet®, or on paper submission to **PerformCare Claims, P.O. Box 7308, London, KY 40742.**
- **Any claim that is resubmitted must be billed as a corrected or replacement claim and must include the original PerformCare claim number.**

- You can find the PerformCare claim number from the 835 ERA, the paper Remittance Advice, or from the claim status search in NaviNet®.
- If you do not have the PerformCare claim number, then you may need to wait for the original claim to be processed or conduct further research on NaviNet® to get the PerformCare claim number.
- Corrected/replacement and voided claims may be sent electronically or on paper.
 - If sent electronically, the **claim frequency code** (found in the 2300 Claim Loop in the field CLM05-3 of the HIPAA Implementation Guide for 837 Claim Files) may only contain the values '7' for the Replacement (correction) of a prior claim or '8' for the void of a prior claim. The value '6' should no longer be sent.
 - In addition, the submitter must also provide the original PerformCare claim number in **Payer Claim Control Number** (found in the 2300 Claim Loop in the REF*F8 segment of the HIPAA Implementation Guide for 837 Claim Files). This is not a special requirement of PerformCare but rather a requirement of the mandated HIPAA Version 5010 Implementation Guide.
 - If the corrected claim is being submitted on paper, the claim needs to have the following in order to be processed as such:
 - On a Professional CMS 1500 Claim, the resubmission code of "7" or "8" along with the PerformCare original claim number is required in Field 22.
 - On an Institutional UB04 Claim, bill type should end in "7" or "8" in Form Locator 4 and the PerformCare original claim number is required in Form Locator 64A Document Control Number.

REMINDERS:

Unless you have an original PerformCare claim number, you may not resubmit as a corrected claim.

Billing of a rejected claim is not considered a resubmission, but an original claim.

Please consult your PerformCare Account Executive for further information on timely filing or if you have any questions regarding this notice.

cc: James Laughman, PerformCare
 Scott Suhring, Capital Area Behavioral Health Collaborative
 Tina Heinrich, Behavioral Health Services of Somerset & Bedford Counties
 Missy Reisinger, Tuscarora Managed Care Alliance
 PerformCare Account Executives