REPLACEMENTS AND VOIDS OVERVIEW

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Reconsideration

Reconsideration - a request for a review of a claim that a provider feels was incorrectly paid or denied because of processing errors, with no changes (as it was submitted the first time). We (AHCCCS) will correct any system errors that occurred from our side and re-process the original claim. **No changes will be accepted on the copy of the original claim coming in as a reconsideration.**
You can mail the claim to AHCCCS with the following information:

✓ A copy of the original claim (reprint or copy is acceptable)

Reconsiderations for CLAIMS are mailed to:
AHCCCS Claims Department
Attn: Resubmission & Reconsideration
701 E. Jefferson MD 8200, Phoenix, AZ 85034

Resubmission

Resubmission - a claim originally denied because of missing documentation, incorrect coding, etc., which is now being resubmitted with the required information or after appropriate changes have been made to the claim and this still meets the claim submission timeliness guidelines.

RULE OF THUMB: *The original claim has been denied. You can submit a brand new claim with corrections as long as you meet the claims submissions timeliness guidelines.*

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Void

Void – only used to recoup an entire claim submitted in error. This option is for a claim that should not have been submitted.

When a claim is voided, all paid lines are recouped.

- ✓ This process should only be used when there is no other alternative.
- ✓ Only the provider who submitted the original claim can void the claim.
- ✓ The claim becomes completely voided in the system.
- ✓ If you want to void individual lines, you must use the replacement process by omitting the lines you want recouped.

If a provider received overpayment, the provider must notify AHCCCS and must initiate recoupment.

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Replacement

Replacement - an adjustment to a denied or paid claim, in order to achieve a clean claim status (denied: correct typos. Paid: correct codes, units, etc.)

Can be submitted via the online AHCCCS web portal, an 837 transaction or via mail using the paper claim.
Here is a link to the AHCCCS web portal:

https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f

When submitting the replacement, its important to remember to use the Claim Reference Number (CRN) associated with the original claim you want to replace. Otherwise, the system will not be able to link the claim you are replacing and deny the original claim.

Timely Claim Submission

In accordance with ARS §36-2904 (G), claims for services provided to an AHCCCS recipient must be received by AHCCCS in a timely manner.

- Timelines for claim submissions:

  - IHS/638 claims should be submitted within 12 months from the date of service.

  - Retro-eligibility claims should be submitted 12 months from the eligibility posted date.

  - For hospital inpatient claims, "date of service" means the date of discharge.

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Replacement:CMS 1500, ADA, UB

DENIED CLAIMS:
- ✓ Correct the claim.
- ✓ Resubmit the claim in its entirety, including all lines of the original claim. Failure to include all lines in a multi-line claim will result in a recoupment on paid lines not accounted for on resubmitted claims.

RULE OF THUMB – Bill as you originally intended to bill.

PAID CLAIMS:
- ✓ Make changes and or add lines to the new claim.
- ✓ Resubmit all lines from the original claim for which you are requesting reimbursement, even if they contain no changes.
- ✓ If any previously paid lines are omitted, the AHCCCS system will assume that those lines should not be considered for reimbursement and payment will be recouped.

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Replacement: KEY WORD "UNMATCHED KEY FIELD"

If a replacement denies for "unmatched key field", the replacement failed. The original claim has not been replaced.

Correct the errors, and submit a new replacement claim and reference the original CRN number.

If replacement denies for any other reason, the replacement was successful and the original is now voided. If the replacement needs subsequent corrections, the replacement becomes the original claim.

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Questions?

Thank You.

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