

## Clarification to corrected claims process

**Summary of change:** Effective for claims with dates of service on or after January 1, 2016, providers have 365 days from the date of service to correct a claim.

If you receive a recoupment notice, and the claim could be corrected in order to avoid the recoupment, you have 70 days from the date of the first recoupment notification to send a correction (if the 365 days has already passed). Amerigroup Kansas, Inc. must receive a copy of the recoupment notice along with the corrected claim so that we know the correction is in response to the notice. If we do not receive a copy of the recoupment notice, the claim may be denied.

If a corrected claim is not received within 70 days of the recoupment notice, the claim will be recouped and any subsequent corrections will be denied.

★ **What this means to you:** Paper corrective claim submissions should be stamped with “corrected claim” at the top.

**Facility claims/UB-04:** Corrections should be billed using the type of bill XX7 for a correction, or XX8 for a replacement, for Amerigroup to identify the submission as a correction.

**Professional claims/CMS1500:** Corrections should be billed using the claim number you are correcting and the proper resubmission codes, as outlined below:

- -5 for late charges
- -7 for replacement of a prior claim
- -8 for voided or canceled claim

If you wish to submit the correction and attachments on paper, please include a Claim Correspondence Form (found on our website) and mail the submission to:

Claim Correspondence  
Amerigroup Kansas, Inc.  
P.O. Box 61599  
Virginia Beach, VA 23466

As a reminder, we do not accept handwritten claim alterations.

### **What if I need assistance?**

If you have questions, please contact your local Provider Relations representative or call our Provider Services team at 1-800-454-3730.