

**Reimbursement Policy**  
**Provider Newsletter Article**

**New Policy**  
**Corrected Claims**

*(Policy 16-001, effective 05/15/2017)*

Amerigroup Community Care allows reimbursement for a Corrected Claim when received within:

- 120 days from the last Explanation of Payment (EOP) paid date or within 120 calendar days of the date of service for participating providers and facilities, or
- 120 calendar days of the date of service for nonparticipating providers and facilities

Providers resubmitting paper claims for corrections must clearly mark the claim “**Corrected Claim.**” Corrected Claims submitted electronically must have the applicable frequency code. Failure to mark the claim appropriately may result in denial of the claim as a duplicate.

For additional information, refer to the Corrected Claims reimbursement policy at <https://providers.amerigroup.com> > Quick Tools > Reimbursement Policies > [Medicaid/Medicare](#).