Step By Step Guide: AccuCare Billing

How to Send a Corrected/Voided Claim

Introduction:

When a claim needs to be submitted electronically as a Corrected or Voided Claim, there is identifying information that needs to be change on the transaction before it is resubmitted.

Preparations:

Before submitting the claim as corrected, make sure to change the information that needs to be corrected. This might need to be information changed in the Client Intake or Client Billing Activity. Once the information is corrected or changed, you will want to enter the corrected claim details to resubmit.

Considerations:

In order to submit a Corrected Claim electronically, you will need the Original Claim Number/ID from the initial claim that was submitted. This information is provided by the Payer or might be present on the Explanation of Benefits.

Steps:

- 1. Open the Client Billing Activity
- 2. Search for the Client and the date of service for the transaction you are correcting or voiding.
- 3. Click on the Edit Icon on the row of that transaction.

Billing	y > Cli	ent Bill	ing Activity												
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	ient N	ame:		. 0	Choose Filter(s): Select a filter	× •		Select By: D	ate of Service	*	Apply Filte	s Cl	ear Filters	
	Banar	ia, Hani	nan	÷ ~	Show Columns	All items checke	ed 🔻		 All Dates Date Ran 	ae 07/30/201	8 III to 07/30/2018		2	con i nicero	
		/					1			3- 01/30/201					
Edit	Cli	ent c fo	lient	Payer Plan	Туре	Service	Method	Units	Amount	Date of Service	Provider	Location	Place	Dx Code	Admin
1	Ĺ	В	anana, Hannah	MICH MCAID-01/06/	Charge	Individual Therap		1.000	\$650.00	07/30/2018	Remm, Beverly (Main	(Best Treat) Best Treatme	11 - Off	F12.20	
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4. Locate the Frequency Code dropdown. Select the appropriate Frequency Code 7 – Replacement Claim or 8 – Void/Cancel Claim

ransaction Type:	Charge					
Client Name:	Banana, Hannah					
Client Payer Plan:	MICH MCAID-01/06/2017[INS/SE					
Provider:	Remm, Beverly (Main)					
Service Code:	Individual Therapy	•				
Payment Method:		w.				
Pm <mark>t R</mark> ef Number:						
Units:	1.000					
Amount:	\$650.00					
Date of Service:	07/30/2018	m				
End Date of Service:						
location of Service:	Best Treat					
Place of Service:	11 - Office					
requency Code:	1 - Admit thru Discharge					
Diagnosis Code:	1 - Admit thru Discharge					
Admin Note:	2 - Interim - 1st claim 3 - Interim continuing claim 4 - Interim last claim					
Claim ID:						
Jse Insurance:	5 - Late charges only claim					
laim Note:	6 - Adjustment of Prior Claim 7 - Replacement Claim					
ciaim note.						
^p mt Receipt Number:	8 - Void/Cancel Claim					
Print Receipt:						

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5. Next fill in the Claim ID field for the Original Claim number provided by the Payer.

Transaction Type:	Charge					
Client Name:	Banana, Hannah					
Client Payer Plan:	MICH MCAID-01/06/2017[INS/SE	•				
Provider:	Remm, Beverly (Main)	٠				
Service Code:	Individual Therapy	•				
Payment Method:		*				
Pm <mark>t</mark> Ref Number:						
Units:	1.000					
Amount:	\$650.00					
Date of Service:	07/30/2018					
End Date of Service:						
Location of Service:	Best Treat	•				
Place of Service:	11 - Office	•				
Frequency Code:	8 - Void/Cancel Claim	-				
Diagnosis Code:	F12.20	-				
Admin Note:						
Claim ID:	123456789					
Use Insurance:	Yes					
Claim Note:	12					
Pmt Receipt Number:		+				
Print Receipt:						

- 6. Click Save and Close on the Transaction
- 7. Close Client Billing Activity
- 8. Navigate to Submit Services
- 9. Search for the transaction/service that you worked on
- 10. Select and Prepare that transaction
- 11. Click on Create Insurance Claims
- 12. Click Submit Electronic Claims