Quick Points



Clarification on replacement claims versus appeals

Blue Cross and Blue Shield of Minnesota and Blue Plus (Blue Cross) have experienced a large number of situations in which a provider has submitted a replacement claim and also submitted the same claim via the paper appeals process using an Administrative Uniformity Committee (AUC) Appeals Form. This duplicate submission is causing delays in reprocessing the replacement claims and appeals due to the inflation of inventories.

The following question should be asked when determining which method to use when sending a replacement claim or appeal:

Is a data element within the claim being changed?

- If data within the claim transaction is being changed, then a replacement claim is the appropriate method to use. If it is necessary to send an attachment (such as when adding certain modifiers), then incorporate a PWK segment into the replacement claim to report the attachment control number. Then send the attachment with the Attachment Cover Sheet via fax to **1-800-793-6928**.
- If data within the claim is **not** being changed, then an appeal is appropriate, with necessary supporting documentation. Appeals must be submitted using the AUC Best Practices and Appeals Form. Chapter 10 of the online Blue Cross Provider Policy & Procedure Manual indicates the documentation that is needed based on the reason for the appeal.

Additional information

For additional information refer to Provider Quick Points QP23-09 available on **providers.bluecrossmn.com** for a Q&A related to submission of replacment claims and appeals.

Questions?

If you have questions, please contact provider services at (651) 662-5200 or toll free at 1-800-262-0820.

Distribution: Due to the importance of this information this Quick Points is being mailed to all participating providers QP9-10