

PROVIDER QUICK POINTS

PROVIDER INFORMATION



March 9, 2022

Reminder: Replacement Claim, Adjustment Request or Appeal Submission

Blue Cross and Blue Shield of Minnesota (Blue Cross) is receiving appeals that should be submitted as either a replacement claim or an adjustment request.

A replacement claim (or a void claim and new original claim) should be submitted any time there is a data element change on a claim, including the addition of an Attachment Control Number (ACN). When a claim is denied due to the need for medical records, a replacement claim must be submitted with medical records attached. This process will allow for the claim and medical records to be routed to the appropriate area for processing within Blue Cross. If a letter is sent requesting medical records, follow the instructions in the letter for where to send the medical records. An appeal submission is not the appropriate process for submitting requested medical records.

An adjustment should be requested when there may have been an adjudication error on a claim. Examples of this include situations where a claim denied for needing primary processing information and the provider submitted it with the claim, or a claim denied for needing updated coordination of benefits (COB) and the provider was advised by the member that COB was updated.

An appeal may be submitted when no data needs to be changed on the claim, but there is disagreement on how the claim processed. Medical records should be submitted with the appeal to support medical necessity or the coding of the claim.

Lines of business impacted: All.

Questions?

If you have questions for a member enrolled in a Minnesota Health Care Programs (MHCP) plan, please contact provider services at **1-866-518-8448**. Please contact provider services at **(651) 662-5200** or **1-800-262-0820** for all other questions.