



Process for Corrected Claims or Voided Claims

Corrected and/or voided claims are subject to timely claims submission (i.e., timely filing) guidelines.

To submit a Corrected or Voided Claim electronically (EDI):

- For Institutional and Professional claims, providers must include the original Missouri Care claim number in Loop 2300 segment REF*F8 with the claim's Frequency Code (CLM05-3) of 7 (Replacement of prior claim) or 8 (Void/cancel of prior claim). Please refer to the 5010 Implementation Guides or Missouri Care's Companion Guides for complete details.

To submit a Corrected or Voided Claim on paper:

- For Institutional claims, the provider must include the original Missouri Care claim number and bill frequency code per industry standards.

Example:

Box 4 – Type of Bill: the third character represents the “Frequency Code”

3a PAT. CNTL #		4 TYPE OF BILL
b. MED. REC. #		117
5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM	7 THROUGH

Box 64 – Place the Claim number of the Prior Claim in Box 64

64 DOCUMENT CONTROL NUMBER
298370064

Continued on next page

For **Professional** claims, the provider must include the original Missouri Care claim number and bill frequency code per industry standards. When submitting a Corrected or Voided claim, enter the appropriate bill frequency code left justified in the left-hand side of Box 22.

Example:

22. MEDICAID RESUBMISSION	
CODE	ORIGINAL REF. NO.
7 OR 8	1234567890A33456

Please Note: *Any missing, incomplete or invalid information in any field may cause the claim to be rejected. If you handwrite, stamp, or type "Corrected Claim" on the claim form without entering the appropriate Frequency Code "7" or "8" along with the original claim number as indicated above, the claim will be considered a first-time claim submission.*

The Correction Process involves two transactions:

1. Reversal of the original claim - The original claim will be reversed and noted with an adjustment reason code RV059. "Payment Reversal – Payment lost/voided/missed." This process will deduct the prior payment. The Payment Reversal for this process may generate a negative amount, which may be offset from future payments rather than on the EOP that is sent out for the newly submitted corrected claim.
2. Adjudication of corrected claim - The corrected claim will be processed with the newly submitted information and noted with an adjustment code CL025 "Adjusted per corrected bill." This process will pay out the newly calculated amount on a new claim with a new claim number.

The Void Process involves the following transaction:

Reversal of the original claim - The original claim will be reversed and the subsequent claim submitted with an 8 (Void/cancel of prior claim) will be processed as a zero payment and noted with an adjustment reason code RV059 "Payment Reversal – Payment lost/voided/missed." This process will deduct the prior payment or zero net amount if applicable.