# Provider Webinar
# Claim Disputes, Appeals Submissions

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# What is a claims dispute?

| Overview | File dispute based on | Before initiate dispute | How to file |
|---|---|---|---|
| • Dispute involving the payment or denial of a claim, imposition of a sanction or reinsurance | • Claim denial<br>• Claim payment<br>• Dissatisfaction with claim payment | • Ensure other attempts to resolve the matter have failed<br>• Contact CICR Team and/or Network Management representative<br>• Follow all applicable laws, policies, and contractual requirements | • Must be filed in writing<br>• Received within 12 months after the date of service or within 12 months after the date of eligibility is posted or within 60 days of the date of the denial |

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# Required documentation

## Submit to the Mercy Care Appeals department

- State the factual and legal basis for the relief requested
- All supporting documentation

## Mercy Care responsibilities

- Acknowledge a claim dispute within 5 business days of receipt
- Claim dispute will be reviewed, and a decision will be rendered within 30 days after receipt
- An extension may be requested for up to 45 days

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# Notice of decision

Notice of Decision (NOD) includes:

- 30 days to review – exceptions
    - Can exceed 30 days, up to 45 days
- The date of the decision
- The factual and legal basis for the decision
- The provider's right to request a State Fair Hearing

# Claims dispute upheld or overturned

- Upheld decision
  - A decision when original determination is maintained
- Overturned decision
  - The original processing is incorrect or incomplete and is reversed
  - Partially overturned is an when the original decision was reversed, but not entirely in the provider's favor

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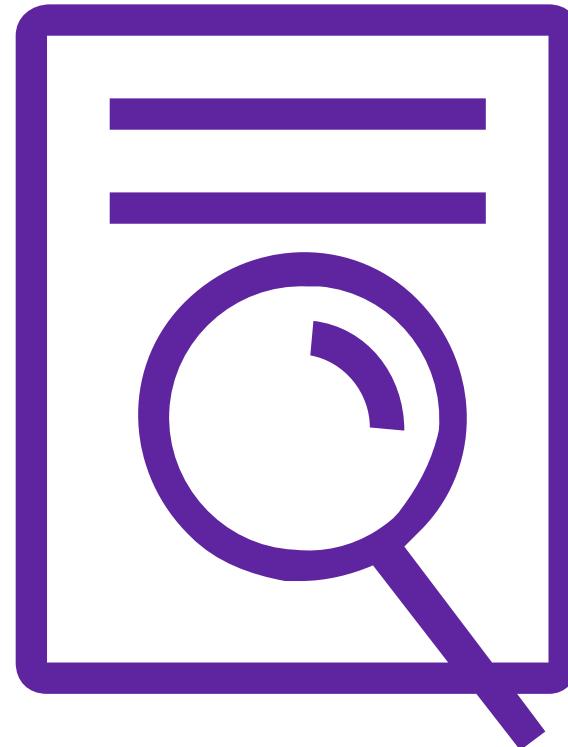
# Appeal upholds

Once a Notice of Decision is received, the next option is to file a State Fair Hearing

- Network Management is unable to reverse the decision

- If the denial is for a different reason when overturned, you can file another dispute
  - Ex: Timely filing was overturned, reprocessed, then denied for no prior authorization

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# Submitting claim dispute

**Send via:**

- Fax*
  - 602-351-2300
- Mail
  - 4500 E. Cotton Center Blvd.
    Phoenix, AZ 85040
    Attention: Mercy Care Appeals
- Email
  - **Mercycareappeals@aetna.com**

*Preferred method, receive acknowledgement letters sooner

# Prior to submitting claim dispute

- Work with CI/CR regarding denials
    - Provider load challenges
        - Provider not credentialed
    - Denial trends or projects
- Usually not overturned (are upheld)
    - Timely filing issues
    - Prior authorizations
    - Retro authorizations
    - MCA PAR providers
        - No appeal rights
        - Resubmission through claims department
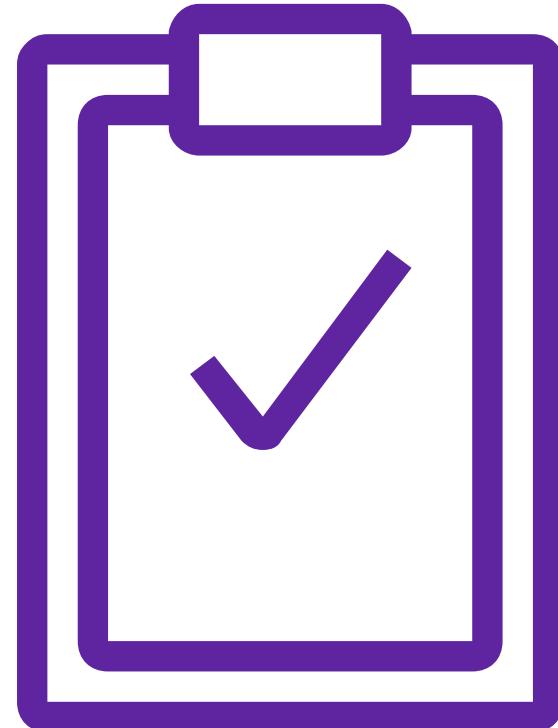
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# Submitting claims resubmission or corrected claims



**Resubmissions and corrected claims:**

- Mercy Care Claims Department
  - Mercy Care
    PO Box 982975
    El Paso, TX 79998-2975
  - Mercy Care RBHA
    PO Box 982976
    El Paso, TX 79998-29760

- If claims resubmission or corrected claim, please send to above address
  **Attention: Resubmissions**

- Electronic submission through electronic clearing house

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# What should not be sent to claim disputes

- Corrected claims
    - Adding XX7, appeal document stating corrected claim
    - Changing or adding modifiers, units, CPTs, or any change
    - Changing a date or adding more days

- Resubmissions
    - Changing or adding modifiers, units, CPTs, or any change
    - Changing or adding dates
    - Changing bill types

- Claims that were not processed
    - Voided or claims not submitted to Claims department
    - EDI denials

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# Corrected claims

Proprietary and Confidential

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# Resubmissions

Proprietary and Confidential

# Claims not processed

Proprietary and Confidential

# Claims not processed

Proprietary and Confidential

# Additional information

- Visit our website
  - **https://www.mercycareaz.org/**
- Provider Manual
  - **https://www.mercycareaz.org/providers/completecare-forproviders/manual**
- Claims
  - **https://www.mercycareaz.org/providers/completecare-forproviders/claims**
  - **Mercy Care Claims Processing Manual**

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# Questions

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# Thank you



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