



Provider Connect (PCONN) Replacement Claim Training

September 27, 2018
Optum Salt Lake County

What is a replacement/corrected claim?

Replacement/Corrected claim is used to entirely modify a previously submitted claim for a specific provider, patient and service.

Claim Types: Original, Replacement, Void

- **Original** claims are subject to 90-day timely filing rule.
 - 90-days is calculated from date of service or date eligibility granted, whichever is later.
- **Replacement** claims may be submitted for up to 365 days from the date of service.
 - Allows for the correction of a service that was previously submitted.
 - 365-days is calculated from date of service to claim submission date.
 - Ensures that clean-up/replacement claim is not inappropriately denied for 90-day timely filing.
- **Void** claims allow for 365-day clean up.
 - Allows for a provider to electronically communicate to Optum SLCO that a service should not have been approved.

Please Note: Claims that were originally denied for exceeding 90-day timely filing, are not eligible for 365-day clean up.

How to determine which claim is being replaced

A claim can only be replaced once. Therefore, if a claim was denied multiple times, each replacement claim must be reference the claim that immediately proceeded it.

For example:

Claim #1: “Original” claim submitted. Claim denied because service was not authorized. Payer claim control number 000001.

Claim #2: “Replacement” claim submitted. Claim denied because the client does not have SLC Medicaid eligibility. Payer claim control number 000002.

Claim #3: “Replacement” claim submitted. Claim approved because client paid spend down and now has eligibility. Payer claim control number 000003.

In the example above, claim #2 is replacing claim #1... and claim #3 is replacing claim #2. So logistically, when submitting #3, the payer claim control number from #2 is required as this tells the system what claim is being replaced.

How create a replacement claim in Provider Connect

Member ID: 40966

Client Name: MANN, SNOW TEST
Member ID: 40966
SSN: 123-45-6789

Member Demographics

Social Security Number 123-45-6789	Date of Birth 12/25/1900	Medicaid ID 0123456789
Member Street 1 111 Santa Clause Drive	Member Street 2	Member City West Valley City
Member County Tel. Area - ZIP		Member State UT - UTAH
Member Zip Code 84119	Member Phone Number	Member Work Number
Member Language English - US	Sex Female - F	Ethnicity (Please Choose One)
Race (Please Choose One)	Client Maiden Name	Veteran
Education Level At Admission (Please Choose One)	Citizenship Status (Please Choose One)	Pre-Admission Disposition
Employment Status (Please Choose One)		

Select Treatment from left navigation bar

Click button 'Add Professional Claim'

Member ID: 40966

Client Name: MANN, SNOW TEST
Member ID: 40966
SSN: 123-45-6789

Add Professional Claim

This page defaults to treatments with services that occur during the current fiscal year. 2012016 View

Claim	Agency	Tx Date <small>(click to view details)</small>	Status	Therapist	CPTCode	Units	Duration	Billing Bill Date	Status	Expected Disbursement
ProviderConnect Claim ID: 4678977 - Institutional Date of Claim: 3/06/2016	HORIZON HOME-Dummy									
ProviderConnect Claim ID: 4679376 - Professional Date of Claim: 3/06/2016	HORIZON HOME-Dummy									
ProviderConnect Claim ID: 4522790 - Professional Date of Claim: 5/12/2016	HORIZON HOME-Dummy									

How create a replacement claim in Provider Connect con't

Member ID: 40966

Client Name: MANN, SNOW TEST
Member ID: 40966
SSN: 123-45-6789

Professional Claim Details	
Funding Source	USH Method (A)
Principal Diagnosis	Mid anxiety
Diagnosis 2	
Diagnosis 3	
Diagnosis 4	
Diagnosis 5	
Diagnosis 6	
Diagnosis 7	
Diagnosis 8	
Diagnosis 9	
Diagnosis 10	
Diagnosis 11	
Diagnosis 12	

Claim Level Comments:
replacement claim

Add Claim

Enter Funding Source and Principal diagnosis codes, then click 'Add Claim'

Click 'Add professional Service'

Member ID: 40966

Client Name: MANN, SNOW TEST
Member ID: 40966
SSN: 123-45-6789

Add Professional Service

Professional Claim Details							
Claim ID	593207	Date of Claim	08/08/2018	Funding Source	USH Method (A)	Total Charge	N/A
Diagnosis							
Principal Diagnosis	Mid anxiety	Diagnosis 2	Diagnosis 3	Diagnosis 4	Diagnosis 5	Diagnosis 6	Diagnosis 7
Diagnosis 7	Diagnosis 8	Diagnosis 9	Diagnosis 10	Diagnosis 11	Diagnosis 12		
Comments							
Claim Level Comments: replacement claim							
Add ICD							
Coordination of Benefits: No Claim-level Coordination of Benefits							
Add Claim							
Delete Claim							
Services No Services							
Return to Treatment History							

How create a replacement claim in Provider Connect con't

Member ID
56475

Demographic
Member Specific Information
Authorizations
Treatment
Provider Admission
Provider Diagnosis

Client_Discharge
Mental Health Event Record Admit/Update
Suicide Severity Rating Scale

Exit to Main Menu

ProviderConnect - Add Treatment Setup HORIZON HOME-Dummy 9/27/2018 11:52:06 AM Lookup Client | Main Menu | Log Out

Client Name: Duck, Donald
Member ID: 56475
SSN: 123-45-6789

Enter Treatment Criteria

Single Date: 05/05/2018
 Date Range: -
 Multiple Dates:

Calendar
Filter Auths on Multi Dates

Include Weekends (check this box to include weekends when adding treatment)

Authorization: Auth #, Funding Source, Valid Dates : [Auth Grouping Name], up to 3 sets Procedure Code - Description from Auth
[Auth #: 393222 FS: Utah Medicaid 5/1/2018 - 5/31/2018 :: OOTP - 99213CG - Office/OP Visit E/M, Est Pt (15min), T1017 - Targeted Case Mgmt (15min), 0791 - Psychiat

CPT Code: Procedure Code - Description ([Funding Source,] Level of Care, Valid Dates)
90791 90791 - Psychiatric Dx Eval (, 5/1/2018 - 5/31/2018)

Clinician: TEST, TEST (11/1/2014 - 3/31/2018)

Performing Provider License Type: 28 - ABA/BCBA

Units / Day: 1

Is this service a replacement? Yes No

Service to replace: 1. Treatment Date: 5/4/2018 CPT Code: (C)90791 Avatar Id: SVC.00001 Batch Number: 54488

Set Treatment

Enter Date, authorization number, CPT code, clinician information and units.

Select 'Yes' button on question "Is this service a replacement.

Next, select the service being replaced, from the drop down, then select 'Set Treatment'.

How create a replacement claim in Provider Connect con't

- Claim needs to be previously adjudicated, including EOB issued.
- Replacement claim can only contain services that are being replaced. i.e. if replacement claim contains 2 claims, both claims must be replacing previously adjudicated claims.
- A claim can only be replaced once.



Questions?



Thank you!

Contract and Provider Connect Questions

Optum SLCo Network

877-370-8953 prompt #5

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