

SCENARIO: AN **ENTIRE** SERVICE AUTHORIZATION IS **INCORRECT** ON A PERSON'S PCSP AND CLAIMS ARE IN A STATUS OF "PAID" OR "PAID ADJUSTED"

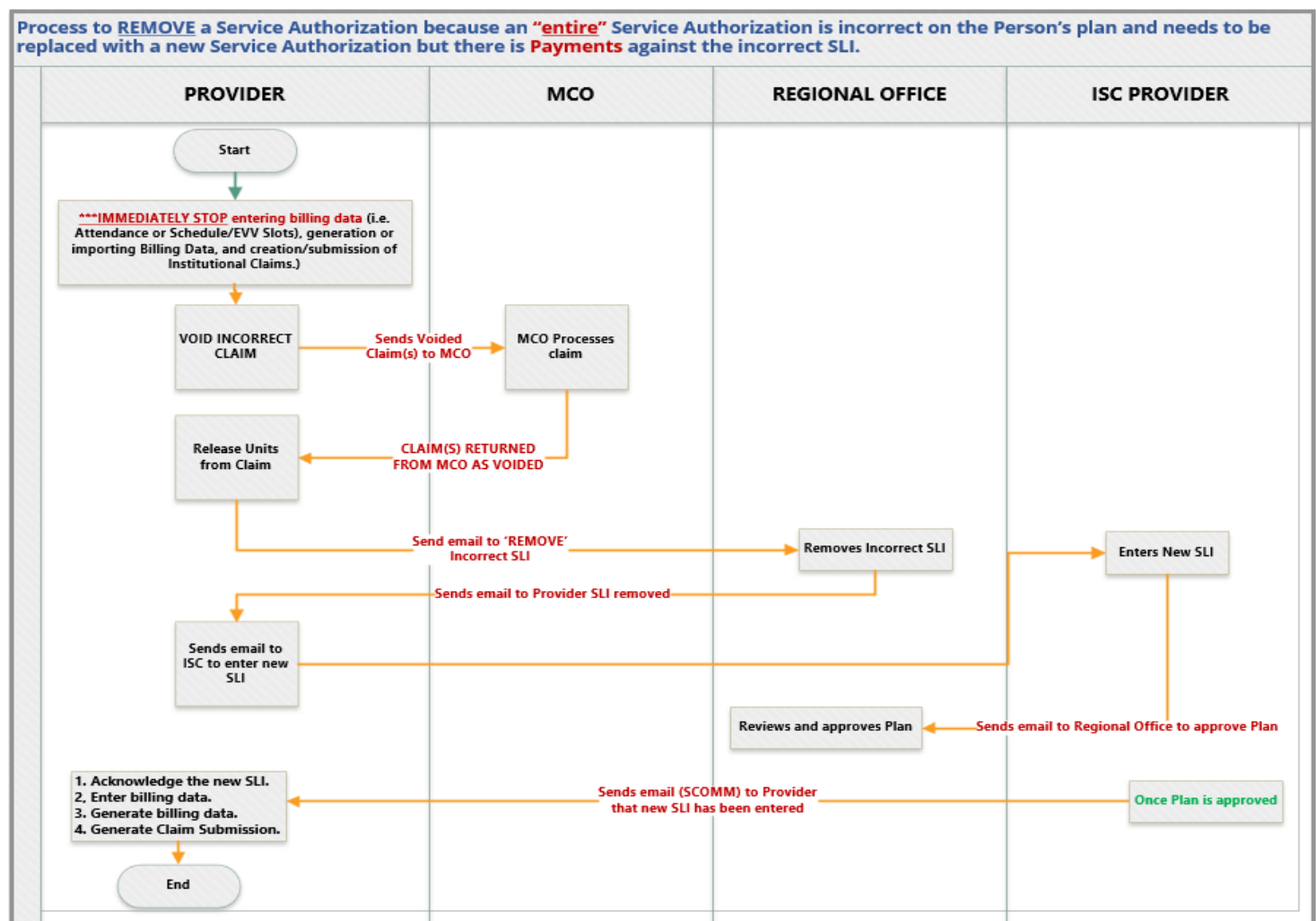
Description: The process to **REMOVE** a Service Authorization because an **"entire"** Service Authorization is incorrect on the Person's plan and needs to be replaced with a new Service Authorization, but there is **billing** against the incorrect Service Authorization.

Prevention: To AVOID incorrect Service Authorizations, it is important...

- to review **EACH** Service Authorization before acknowledging (check, check, and recheck). If not correct, contact the ISC.
- before billing on a Service Authorization, check to ensure the service is **"correct."** If not, **do not** bill on the Service Authorization.

Disclaimer: The below instructions include one way to search for claims. However, when searching for claims, multiple search options can be used to identify the claim(s) to be voided.

Overview Workflow



*****IMMEDIATELY STOP entering billing data** (i.e. Attendance or Schedule/EVV Slots), generation or importing Billing Data, and creation/submission of Institutional Claims.)

Part One – Institutional Claim Search for “Paid” or “Paid Adjusted” claims

1. On the **“Individual”** tab, locate the **“Pre Auth Service Authorization”** section and click on **“Search”** next to **“Service Authorization.”**
2. In the **“Individual”** field, enter the person’s name and select from the drop-down.

Service Auth Search

Form ID

Individual

From Date

To Date

Status

3. Click the **“Search”** button.
4. Review the list and locate the incorrect Service Authorization.

Service Auth Search

Filter

Form ID	Individual	Service	From Date	To Date
		T2033-TG - SUPPORTED LIVING SPEC NEEDS ADJUSTMENT (T2033-TG)	01/01/2025	04/01/2025
		T2033-TG - SUPPORTED LIVING SPEC NEEDS ADJUSTMENT (T2033-TG)	07/01/2024	12/31/2024
		T2021-US - INTERMITTENT EMP & COMM PART WRAPAROUND (LEVEL 4) (T2021-US)	01/01/2025	04/01/2025
		T2021-US - INTERMITTENT EMP & COMM PART WRAPAROUND (LEVEL 4) (T2021-US)	07/01/2024	12/31/2024

IMPORTANT: Make a note of the **“Service From Date”** and **“Service To Date”** for later use.

5. Click on the **“Service Authorization”** record to open.
6. Scroll down to the **“Billing Service Authorization”** section.

Billing Service Authorization

Billing Service Authorization exists for this Service Authorization.
Form ID: SA- [redacted] TN-N9S4UYFYPEKS3

7. In front of the **“SA”** drag and highlight the **“Form ID”** number and select copy.

Billing Service Authorization

Billing Service Authorization exists for this Service Authorization.
Form ID: SA- [redacted] TN-N9S4UYFYPEKS3

Hide menu
More actions
Copy
Search

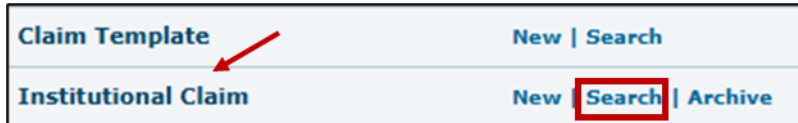
NOTE: If the pop-up for “copy” does not appear, right-click on the “Form ID” number and copy.

8. Scroll to the top of the screen and click the “Therap” icon to return to the main menu.



9. Click on the “Billing” tab.

10. Go to the “Institutional Claim” section and click on “Search” next to “Institutional Claim.”



11. Search Institutional Claims using the following search criteria:

- a. In the “Authorization ID” field, do a “right-click” and paste.

NOTE: After pasting, make sure there is not a space in front of the Authorization ID number.

- b. Using the date range from the Service Authorization fields labeled “Service Date From” and “Service To Date” fields, enter the date range in the “Service Date From” and the “To” fields on the “Institutional Claim Search” view.
- c. Scroll down to “Claim Create Date From” and remove the date.

- d. Scroll down and click the “Search” button.

Part Two - Void Claim(s)

1. In the **“Filter”** field, type **“paid.”**

NOTE: These claims need to be voided before the Regional Office can remove the Service Authorization.

IMPORTANT: If multiple claims appear, export them to Excel to use as a checklist as you complete each claim.

2. Click on the first claim to open the claim.
3. Scroll down and click on the **“Update for Void”** button at the bottom of the form.

Institutional Claim Paid ⓘ

Claim Submission Details

Transaction ID	Claim Tracking ID	Claim Frequency Type Code	TCN/ICN #	Queued Date	Sent Date	Check / EFT Issue Date	Check / EFT Number	Payer Charged Amount (\$)	P. P. A (\$)
IBTR-DEMO-N4G4GRAX8MULU	I20895045	1-Original (Admit thru Discharge Claim)	JKLMN1OP2Q34	02/14/2024 10:23:36 AM	02/29/2024 01:20:10 PM (88 days ago)	08/09/2021	720800389	\$52.46	\$-

Claim Information

Payer

BCBST: BCBST - 00390 (Inst.)

Individual Name

White, Joshua (Social Security Number: 000-12-3456)

Date of Birth

01/01/1992

Gender

Male

Service Lines

#	Billing Data ID	Date of Service	Service Code	Service Description	Procedure Code	Procedure Modifiers	Revenue Code	Rate Code	Rate Value	Locator Code	Unit Rate (\$)
1	BILL-DEMO-N4G4GNPPMULH	11/06/2023	G0153	SPEECH LANG HEARING 3 - 76+		U6-GN	Cast Room - 1915c-0700				\$26.2

Total Claim Amount (\$)

52.46

Amount Paid (\$)

52.46

<< Back

Cancel

Update for Replacement

Update for Void

NOTE: A pop-up message will appear asking if you wish to proceed with this action.

4. Click on the **“Yes”** button if you want to continue.

You are updating a Paid/Paid Adjusted Claim. Do you want to continue?

No

Yes

NOTE: Under the **“Claim Information”** section, the **“Claim Frequency Type Code”** field of the claim form will be changed to **“8-Void (Void/Cancel of Prior Claim)”**.

Claim Information

Payer Amerigroup: WellPoint - TNIDD (Inst.)

Individual Name MORRIS, JORDAN (Social Security Number: 432952532)

Date of Birth 04/06/1994

Gender Male

Residence Address 131 MCGEE LOOP, JACKSON, TN, 38305-9576

*** Type of Bill**

Claim Frequency Type Code **8-Void (Void/Cancel of Prior Claim)**

For claims generated for **1915c** services...

5. In the **“Claim Information”** section, click on the (blue) link **“Original TCN/ICN Number List.”**

Claim Information

Payer United HealthCare: UnitedHealthcare - 95378 (Inst.)

Individual Name Doe, Joe (Social Security Number: 123-45-6789)

Date of Birth 07/09 [REDACTED]

Gender Male

Residence Address [REDACTED] TN, 38555-8633

*** Type of Bill**

Claim Frequency Type Code **8-Void (Void/Cancel of Prior Claim)**

Original TCN/ICN Number **Original TCN/ICN Number List**

6. On the **“Original TCN/ICN Number List...”**
- If only one **“TCN/ICN Number”** appears, click **“Add.”**
 - If multiple **“TCN/ICN Number”** appears, click the top record **“Add.”**

Original TCN/ICN Number List

TCN #	Queued Date	Sent Date	Action
274232820000061	07/23/2024	07/23/2024	Add
274232820001215	07/23/2024	07/23/2024	Add
274232820000556	07/23/2024	07/23/2024	Add

NOTE: For the Claims generated for **KBB and State Funded** services, the Original TCN/ICN Number will be automatically assigned with the latest “Claim Tracking ID” of the claim form. You can skip this step.

WARNING: Be aware **BEFORE** submitting the **“VOID”** claim for approval, the corresponding **billing data** will **no longer be “editable.”**

- 1. Once you have verified all the information on the form, scroll down and click on the **“Submit for Approval”** button.

Institutional Claim Updating

Claim Submission Details

Transaction ID	Claim Tracking ID	Claim Frequency Type Code	TCN/ICN #	Queued Date	Sent Date	Check / EFT Issue Date	Check / EFT Number	Payer Charged Amount (\$)	P. P. A (\$)
IBTR-DEMO-N4G4GRAX8MULU	I20895045	1-Original (Admit thru Discharge Claim)	JKLMN1OP2Q34	02/14/2024 10:23:36 AM	02/29/2024 01:20:10 PM (88 days ago)	08/09/2021	720800389	\$52.46	\$-

Claim Information

Payer

BCBST: BCBST - 00390 (Inst.)

Individual Name

White, Joshua (Social Security Number: 000-12-3456)

Date of Birth

01/01/1992

Gender

Male

Residence Address

123 Main Street, Anytown, TN, 12345

Type of Bill

89

Claim Frequency Type Code

8-Void (Void/Cancel of Prior Claim)

Original TCN/ICN Number

I20895045

Back

Cancel

Update

Submit for Approval

NOTE: A confirmation message will be shown on the following page upon successfully submitting the claim form.

The form ICLM-DEMO-N782M5V87MULQ has been successfully submitted

- 2. Clicking on the **“Form”** link will go back to the Institutional Claim form.

The form ICLM-DEMO-N782M5V87MULQ has been successfully submitted

Back to

Form

List

IMPORTANT: The claim will now be in a **"Billable"** status.

Institutional Claim Billable ⓘ								
Claim Submission Details								
Transaction ID	Claim Tracking ID	Claim Frequency Type Code	TCN/ICN #	Queued Date	Sent Date	Check / EFT Issue Date	Check / EFT Number	Payer Charge Amount (\$)
IBTR [REDACTED] TN-N9L4Q4YZBELQR	I24101376	1-Original (Admit thru Discharge Claim)	24L329031700	07/18/2024 05:38:46 PM	07/18/2024 09:18:21 PM (More than 90 days ago)	07/28/2024	[REDACTED]	\$497.2

- If you know there are **multiple** claims to void on the "Institutional Claim Search" list.
 - Scroll down and click the **"<< Back"** button to return to the "Institutional Claim Search" listing.

<< Back	Cancel	Edit
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- Repeat the "Part Two – Void Claims" section until all "Paid" claims have been voided.
- If you are only voiding one claim, go to the next section.

NOTE: There is no 'bulk void' because each DOS claim has a unique claim number.

Part Three- Submit Claim to MCO

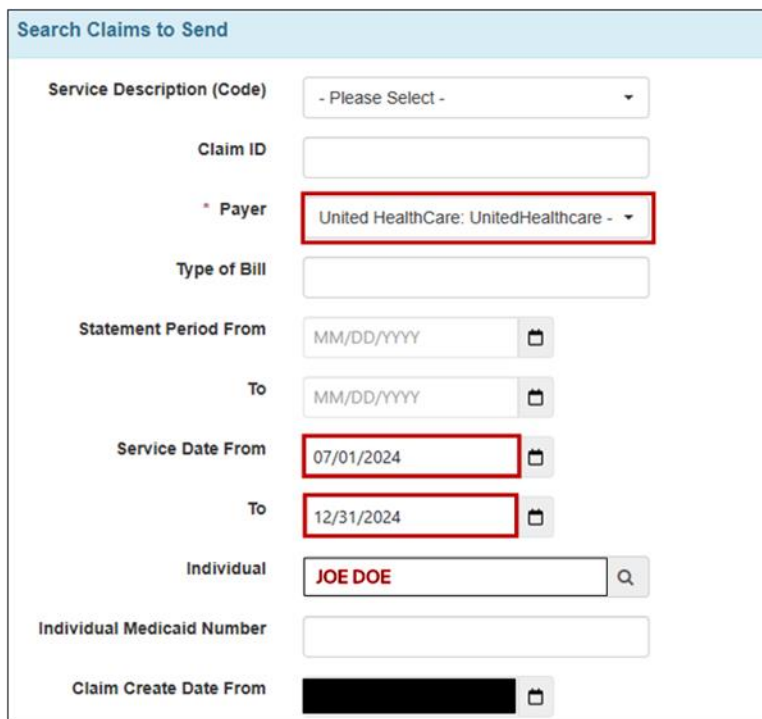
1. Scroll to the top of the screen and click the “Therap” icon to return to the main menu.



2. Click on the “Billing” tab.
3. Under the “Institutional Claim” section, locate “Claim Submission” and click on “Send.”



4. (See screenshot below) On the “Payer,” click on the drop-down and select “Payer.”
5. Using the Service Authorization date range...
 - i. Enter the “From Date” in the “Service Date From” field.
 - ii. Under the “Service Date From” field, in the “To” field, enter the “To Date”.
6. In the “Individual” field, enter the person’s name and select from the drop-down.
7. In the “Claim Create Date From” field, remove the date.
8. Scroll down and click the “Search” button.



9. If you exported an Excel spreadsheet, this is the time to review the list on the screen with your spreadsheet to ensure you voided all the claims. (skip this step if you did not export to Excel)
 - If all claims did not appear, please go back to the “Part One” section and begin again to identify the claims you are missing and void.
10. On the result's view, click on the top **“checkbox”** in the header to submit all claims.

Search Claims to Send						
Filter		You have selected 0 items.				
<input type="checkbox"/>	Claim ID	Payer	Type of Bill	Statement Period From	Statement Period To	Individual
<input type="checkbox"/>	ICLM- [REDACTED] TN-NAX4 [REDACTED] YDEQLV	UnitedHealthcare	89	07/30/2024	07/30/2024	[REDACTED]
<input type="checkbox"/>	ICLM- [REDACTED] TN-NAX4 [REDACTED] YAEQL7	UnitedHealthcare	89	07/27/2024	07/27/2024	[REDACTED]
<input type="checkbox"/>	ICLM- [REDACTED] TN-NAX4 [REDACTED] ZNEPML	UnitedHealthcare	89	08/01/2024	08/01/2024	[REDACTED]
<input type="checkbox"/>	ICLM- [REDACTED] TN-NAR4TQ3ZFEQL9	UnitedHealthcare	89	08/11/2024	08/11/2024	[REDACTED]

IMPORTANT: Check to make sure you don't have multiple pages on this view. If so, you will have to go to each page, select the top **“checkbox”** in the header, and send claims.

11. Click on the **“Send Claim”** button.
12. A **“Claim Send Summary”** will appear.

- It is **important** to review the claims listed to ensure there are no claims with (red) “X”.
 - i. If so, please take a screenshot for you to investigate the issue of the claim.
- If you want to send the report, click on the “Send report via SComm” button.

NOTE: After the claims are successfully submitted in Therap, if you go back and look up the claim(s)...

- the claims will be in a “Queued” status.
- the top line in the “Claim Submission Details” will have a “Queued Date” of today.
- Therap will send an 837i file to the MCO.

Institutional Claim Queued ⓘ								
Claim Submission Details								
Transaction ID	Claim Tracking ID	Claim Frequency Type Code	TCN/ICN #	Queued Date	Sent Date	Check / EFT Issue Date	Check / EFT Number	Payer Charge Amount (\$)
IBTR- [REDACTED] TN-P4F42X3YFMULT	I26112324	8-Void (Void/Cancel of Prior Claim)		02/13/2025 04:02:00 PM				
IBTR- [REDACTED] TN-N9L4Q4YZBELQR	I24101376	1-Original (Admit thru Discharge Claim)	24L329031700	07/18/2024 05:38:46 PM	07/18/2024 09:18:21 PM (More than 90 days ago)	07/28/2024	[REDACTED]	\$497.

NOTE: When the claims are sent to the MCOs, the **“Sent Date”** will be displayed, and if the claim is **“accepted”** by the MCO, the claims will update to a **“Sent”** status and say **“Claim Status in 999: Accepted.”**

Institutional Claim Sent ⓘ										
Claim Status in 999 : Accepted										
Claim Submission Details										
Transaction ID	Claim Tracking ID	Claim Frequency Type Code	TCN/ICN #	Queued Date	Sent Date	Check / EFT Issue Date	Check / EFT Number	Payer Charged Amount (\$)	Payer Paid Amount (\$)	Claim Status
IBTR [REDACTED] TN-NB83TYDB74TLT	I27729716	1-Original (Admit thru Discharge Claim)		09/06/2024 04:28:59 PM	09/06/2024 05:33:40 PM (More than 90 days ago)					

Part Four - MONITOR Claim(s)

IMPORTANT: Providers will monitor CLAIM(s) until the MCO processes the claim(s) and the claim(s) are in a “Voided” status.

Once the claim(s) have been voided by the MCOs or State Funded, you will need to release the units from the claim.

Part Five: Release the Units

The “Release Units” option can be applied to Claims that are in “Voided” status. The “Release Units” option will update the corresponding Billing Data Billable Units to zero (0), detach the Billing Data from the Claim, and change the status of the claim to “Deleted”.

Institutional Claim Search for “Voided” claims

1. On the **“Individual”** tab, locate the **“Pre Auth Service Authorization”** section and click on **“Search”** next to **“Service Authorization.”**
2. In the **“Individual”** field, enter the person’s name and select from the drop-down.

Service Auth Search

Form ID

Individual

From Date

To Date

Status

3. Click the **“Search”** button.
4. Review the list and locate the incorrect Service Authorization.

Service Auth Search

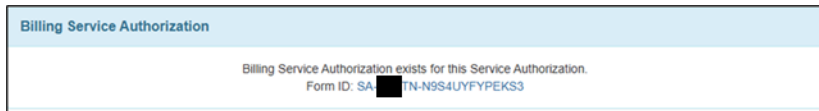
Filter

Form ID	Individual	Service	From Date	To Date
		T2033-TG - SUPPORTED LIVING SPEC NEEDS ADJUSTMENT (T2033-TG)	01/01/2025	04/01/2025
		T2033-TG - SUPPORTED LIVING SPEC NEEDS ADJUSTMENT (T2033-TG)	07/01/2024	12/31/2024
		T2021-US - INTERMITTENT EMP & COMM PART WRAPAROUND (LEVEL 4) (T2021-US)	01/01/2025	04/01/2025
		T2021-US - INTERMITTENT EMP & COMM PART WRAPAROUND (LEVEL 4) (T2021-US)	07/01/2024	12/31/2024

IMPORTANT: Make a note of the “From Date” and “To Date” for later use.

5. Click on the Service Authorization record to open.

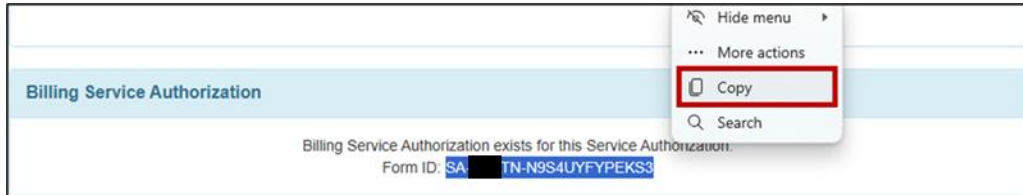
6. Scroll down to the “Billing Service Authorization” section.



Billing Service Authorization

Billing Service Authorization exists for this Service Authorization.
Form ID: SA- [REDACTED] TN-N9S4UYFYPEKS3

7. In front of the “SA” drag and highlight the “Form ID” number and select copy.



Billing Service Authorization

Billing Service Authorization exists for this Service Authorization.
Form ID: SA- [REDACTED] TN-N9S4UYFYPEKS3

Hide menu
More actions
Copy
Search

NOTE: If the pop-up for “copy” does not appear, right-click on the “Form ID” number and copy.

8. Scroll to the top of the screen and click the “Therap” icon to return to the main menu.



Therap® Linked Provider Menu

9. Click on the “Billing” tab.

10. Go to the “Institutional Claim” section and click on “Search.”



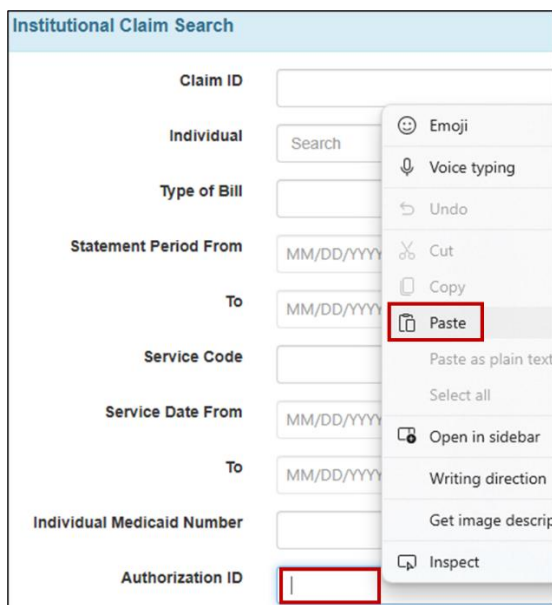
Claim Template New | Search

Institutional Claim New Search | Archive

11. Search Institutional Claims using the following search criteria:

a. In the “Authorization ID” field, do a “right-click” and paste.

NOTE: After pasting make sure there is not a space in front of Authorization ID number.



Institutional Claim Search

Claim ID

Individual Search

Type of Bill

Statement Period From MM/DD/YYYY To MM/DD/YYYY

Service Code

Service Date From MM/DD/YYYY To MM/DD/YYYY

Individual Medicaid Number

Authorization ID

Emoji
Voice typing
Undo
Cut
Copy
Paste
Paste as plain text
Select all
Open in sidebar
Writing direction
Get image descrip
Inspect

- b. Using the date range from the Service Authorization fields labeled “Service Date From” and “Service To Date” fields, enter the date range in the **“Service Date From”** and the **“To”** fields on the “Institutional Claim Search” view.
- c. Scroll down to “Claim Create Date From” and remove the date.
- d. Scroll down and click the **“Search”** button.

Institutional Claim Search

Claim ID

Individual

Type of Bill

Statement Period From

To

Service Code

Service Date From

To

Claim Create Date From

12. In the “Filter” field, type “void”.

NOTE: These claims are the claims that need the units released before the Regional Office can remove the Service Authorization.

IMPORTANT: If multiple claims appear, export to Excel to use as a checklist as you complete each claim.

12. Click on the first claim, to open the claim.

13. Scroll down and click on the **“Release Units”** button at the bottom of the form.

<< Back Cancel Update for Resubmission **Release Units**

A pop-up message will appear asking if you wish to proceed with this action.

14. Click on the **Yes** button.

Release Units action will update Billing Data Billable Units to zero (0). Billing Data will be detached from Claim and Claim Status will be Deleted. Do you want to continue?

No Yes

A success message will be shown on the following page upon successfully releasing the units.

Successfully Released Units for the Claim ICLM-DEMO-N7B2LQG3HMULQ

Back to [Form](#) | [List](#)

15. Clicking on the **“Form”** link will take you back to the Institutional Claim form.

The form ICLM-████TN-NAX4YUAZNEPML has been successfully updated

Back to **Form** | List

NOTE: The status of the Institutional Claim will be changed to “Deleted”.

Institutional Claim Deleted ⓘ

Claim Information

Payer

Amerigroup: WellPoint - WLPNT (Inst.)

Individual Name

Doe, Joe (Social Security Number: 123-45-6789)

Date of Birth

Gender

Residence Address

Type of Bill

89

Claim Frequency Type Code

1-Original (Admit thru Discharge Claim)

Service Lines

No Service Lines found.

Total Claim Amount (\$)

0.00

Amount Paid (\$)

0.00

Check / EFT Number

Check / EFT Issue Date

Patient Responsibility Amount (\$)

<< Back

Cancel

NOTE: The Total Billable Units in the corresponding Billing Data will also be updated to zero (0) units.

16. If you know there were multiple claims to release the units on the “Institutional Claim Search” list
- Scroll down and click the **“<< Back”** button to return to the “Institutional Claim Search” listing.

<< Back

Cancel

Edit

17. Repeat the “Part Five – Release the Units” section until all “Voided” claims units have been released.

18. If you are only releasing the units on one claim, go to the next step.

19. After **ALL**, "Paid" or "Paid Adjusted" claims have been "voided" and "units released" for the incorrect Service Authorization, the Provider will notify the regional office by email to **remove** the incorrect Service Authorization from the person's PCSP.

OPTIONAL PROCESS: Once the units have been released from the claim, you can delete the billing data and remove the service data (Attendance or Schedule/EVV Slots) at this time.

Part Six: Remove the “incorrect” Service Authorization

Regional Office:

1. Remove the incorrect Service Authorization from the person’s PCSP.
2. The Regional Office will reply to the Provider letting them know the Service Authorization has been removed.
3. Provider will notify the ISC to enter the new Service Authorization.

Part Seven: ISC to add Service Authorization

ISC:

1. Enters the new Service Authorization in the person’s PCSP.
2. Send an email to the Regional Office to review the plan.
3. Once Service Authorization is approved, the ISC will send SCOMM to the Provider for review and acknowledgment.

Provider:

1. Provider will then...
 - a. Acknowledge the new Service Authorization (**check, check, and recheck**).
 - b. Enter billing data.
 - c. Generate billing data.
 - d. Send the claim to MCO for payment.