

HOW TO **SUBMIT A VOID CLAIM** FOR AN INSTITUTIONAL CLAIM IN “PAID” OR “PAID ADJUSTED” STATUS

Description: This step-by-step guide explains how to **submit a VOID** on an Institutional Claim in “Paid” or “Paid Adjusted” status because the claim(s) need to be **sent** to the MCO for recoupment.

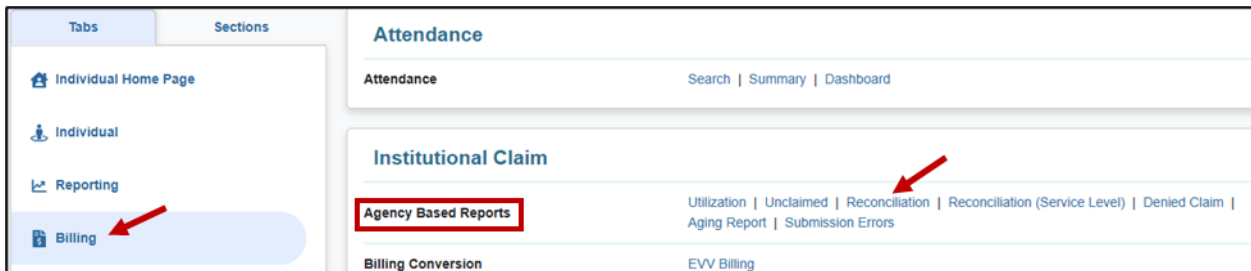
Prevention: To avoid “Voiding” claims, it is **important** to...

- **Verify billing data** to ensure all entries are accurate.
- **Follow waiver rules** consistently.
- **Review each original claim thoroughly** before submission to confirm all details are correct.

Disclaimer: The instructions below describe **one method** for searching claims. Please note that there are multiple search options available to locate claims in “Paid” or “Paid Adjusted” status.

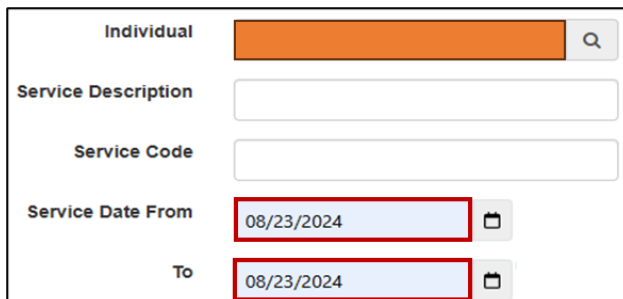
Part One: Locate The Claim

1. On the Therap dashboard, click on the “Billing” tab, locate the “Agency Based Reports” subsection, and click the “Reconciliation” link.



2. In the “Individual” field, enter the person’s name and select from the drop-down.
3. Enter the Date of Service (DOS) in the “Service Date From” field.
4. Under the “Service Date From” field, in the “To” field, enter the Date of Service (DOS).

NOTE: If there are multiple claims for a Paid” or “Paid Adjusted” status, you can enter up to a 3-month “date range.”



The screenshot shows a search form with the following fields:

- Individual:** A text input field with a search icon.
- Service Description:** A text input field.
- Service Code:** A text input field.
- Service Date From:** A date picker field with the value 08/23/2024, highlighted with a red box.
- To:** A date picker field with the value 08/23/2024, highlighted with a red box.

5. On the **"Payer,"** click on the drop-down and select the **"Payer."** **NOTE:** Multiple 'Payers' can be selected.
6. On the **"Status,"** click on the drop-down and select **"Paid"** and **"Paid Adjusted."**
7. In the **"Sent Date From"** field, **remove** the date.
8. Under the 'Output Columns' section, you can **"Add All"** or select the columns you want to display. Click the **"Search"** button.

The screenshot shows a web application interface for filtering claims. The interface is divided into several sections:

- Payer:** A dropdown menu showing "3 items selected". Below it, three items are listed: "BCBST: BCBST - 00390 (Inst.)", "United HealthCare: UnitedHealthcare - 95378 (Inst.)", and "Amerigroup: WellPoint - TNIDD (Inst.)".
- Latest Submitted Claims Only:** Radio buttons for "Yes" (selected) and "No".
- Status:** A dropdown menu showing "2 items selected". Below it, two items are listed: "Paid Adjusted" and "Paid".
- Sent Date From:** A date input field with a calendar icon, currently empty.
- To:** A date input field with a calendar icon, containing "MM/DD/YYYY".
- Check / EFT Issue Date From:** A date input field with a calendar icon, containing "MM/DD/YYYY".
- To:** A date input field with a calendar icon, containing "MM/DD/YYYY".
- Output Columns:** A section with two columns: "Available" and "Selected".
 - Available:** A search box, an "Add All" button (highlighted with a red box), and a list of columns: "Program Name", "Program Cost Center Number", "Site Name", "Site Cost Center Number", and "Authorization Number". Each column has a "+" button and a scroll bar.
 - Selected:** A search box and a "Remove All" button.
- Clear Selection:** A button with a trash icon.
- Cancel:** A button at the bottom left.
- Search:** A button at the bottom right (highlighted with a red box).

Part Two: Void Claim

1. To open, click on the “Paid or Paid Adjusted” claim from the “**Billing Reconciliation**” list for the Date of Service (DOS).

NOTE: If you displayed multiple Date of Service (DOS), click on the “**Service Date From**” header to place the claims in date order.

Program Name	Program Cost Center Number	Site Name	Site Cost Center Number	Authorization Number	Individual	Individual ID	Individual Medicaid Number	Additional ID Number	Service Description	Service Code	Procedure Modifiers	Description/Code Account Number	Funding Source	Funding Source Vendor ID	Service Date From	Service Date To
East - [REDACTED]	[REDACTED]	Greeneville			[REDACTED]				COMMUNITY PARTICIPATION SUPPORTS (LEVELS 1 - 3)	T2021	U1...		WellPoint		08/23/2024	08/23/2024
East - [REDACTED]	[REDACTED]	Greeneville			[REDACTED]				COMMUNITY PARTICIPATION SUPPORTS (LEVELS 1 - 3)	T2021	U1...		WellPoint		08/23/2024	08/23/2024

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

« Back
Cancel
Update for Replacement
Update for Void

!!! IMPORTANT !!!

Do **NOT** use the “Update for Replacement” button to **void** a claim. Doing so will result in the claim being denied by the MCO.

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

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

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

NOTE: Under the “**Claim Information**” section, the “Claim Frequency Type Code” field of the claim form will reflect “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)

Part Three: Claim(s) Generation

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

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

!!!IMPORTANT!!!: DO NOT type anything in the “Original TCN/ICN Number” field ever. Always click on the **“Original TCN/ICN Number List”** link.

Claim Information

Payer United HealthCare: UnitedHealthcare - 95378 (Inst.)

Individual Name Joe Doe

Date of Birth 10/12/1979

Gender Male

Residence Address 123 Mockingbird Lane

*** Type of Bill**

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

Original TCN/ICN Number Do not manually enter in this field. Original TCN/ICN Number List

2. On the “Original TCN/ICN Number List...”

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

Original TCN/ICN Number List ×

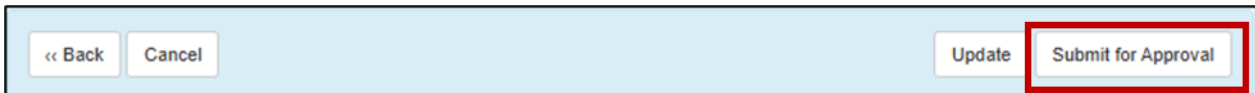
TCN #	Queued Date	Sent Date	Action
274232820000061	07/23/2024	07/23/2024	Add
274232820001215	07/23/2024	07/23/2024	Add
274232820000556	07/23/2024	07/23/2024	Add

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.

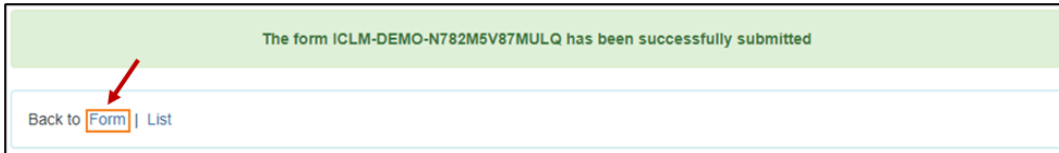
WARNING: Be aware that the corresponding billing data will no longer be “editable” AFTER submitting the “VOID” claim for approval.

IMPORTANT: DO NOT click on the ‘Update’ button for a VOID.

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



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



- Click on the “Form” link to return to the Institutional Claim form.

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

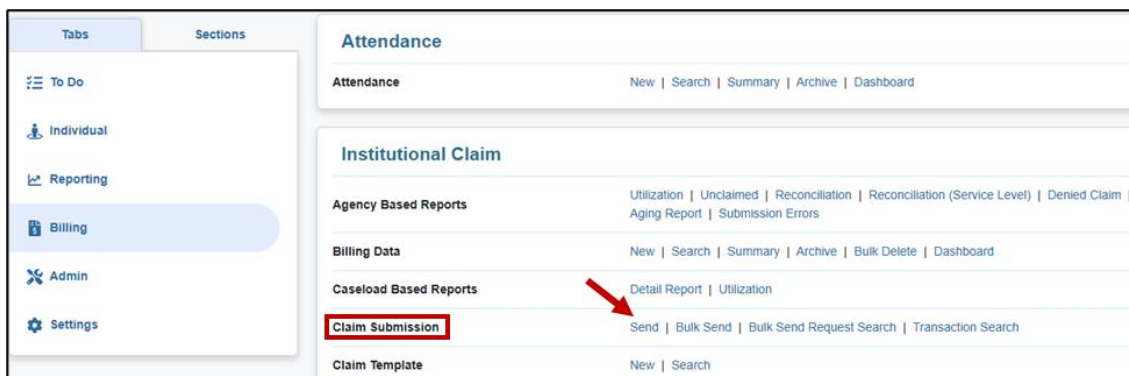
Part Four- Submit Claim to MCO

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

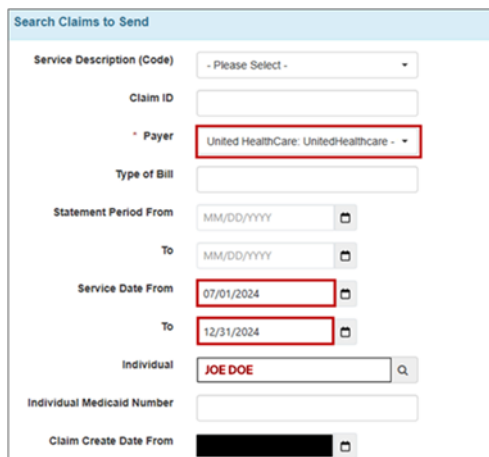


2. Click on the **“Billing”** tab.
3. Locate the **“Claim Submission”** subsection and click on **“Send.”**

NOTE: There is **no** “Bulk” feature for voids because each DOS void claim has a unique claim number.



4. On the **“Payer,”** click on the drop-down and select **“Payer.”**
5. Using the DOS **or** DOS 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. **Optional:** 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.



- In the results view, you can select 'individual' checkboxes using the **"Statement Period From (DOS)"** column as a guide for submitting individual claims **or** use the checkbox next to the **"Claim ID"** header to select and submit all claims from this page.

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- TN-NAX4 [REDACTED] YDEQLV	UnitedHealthcare	89	07/30/2024	07/30/2024	[REDACTED]
<input type="checkbox"/>	ICLM- TN-NAX4 [REDACTED] YAEQL7	UnitedHealthcare	89	07/27/2024	07/27/2024	[REDACTED]
<input type="checkbox"/>	ICLM- TN-NAX4 [REDACTED] ZNEPML	UnitedHealthcare	89	08/01/2024	08/01/2024	[REDACTED]
<input type="checkbox"/>	ICLM- TN-NAR4TQ3ZFEQL9	UnitedHealthcare	89	08/11/2024	08/11/2024	[REDACTED]

IMPORTANT:

Check if multiple pages are displayed in this view.

If there are additional pages, navigate to each page, select either individual checkboxes **or** the top checkbox in the header.

- Click on the **"Send Claim"** button.
- A **"Claim Send Summary"** will appear.
- IMPORTANT - Review Claim Send Summary**
 - Ensure **all** claims selected, populate with a 'green' checkmark next to each "Claim ID".
 - If a 'red' **X** appears next to **any** "Claim ID," take a screenshot for investigation.
 - Optional:** To send the report, click **Send report via SComm.**

NOTE: After Submission

- ✓ Claims will show **Queued** status.
- ✓ The top line in **Claim Submission Details** will display today's **Queued Date**.
- ✓ 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 Char# Amot (\$)
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 claims are sent to the MCO:

- ✓ A successfully submitted claim will reflect the **Sent Date**.

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)					

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Part Five - 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.

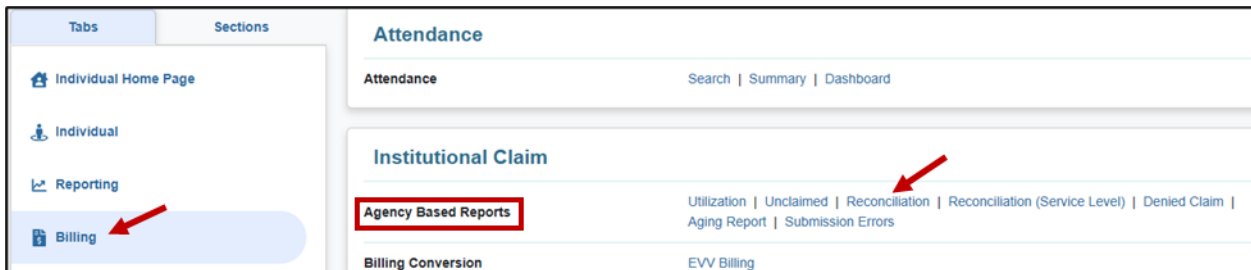
Once the MCOs or State Funded have voided the claim(s), you will need to release the units from the claim(s).

Part Six: 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”.

Locate the Claim(s)

1. On the Therap dashboard, click on the **“Billing”** tab, locate the **“Agency Based Reports”** subsection, and click the **“Reconciliation”** link.

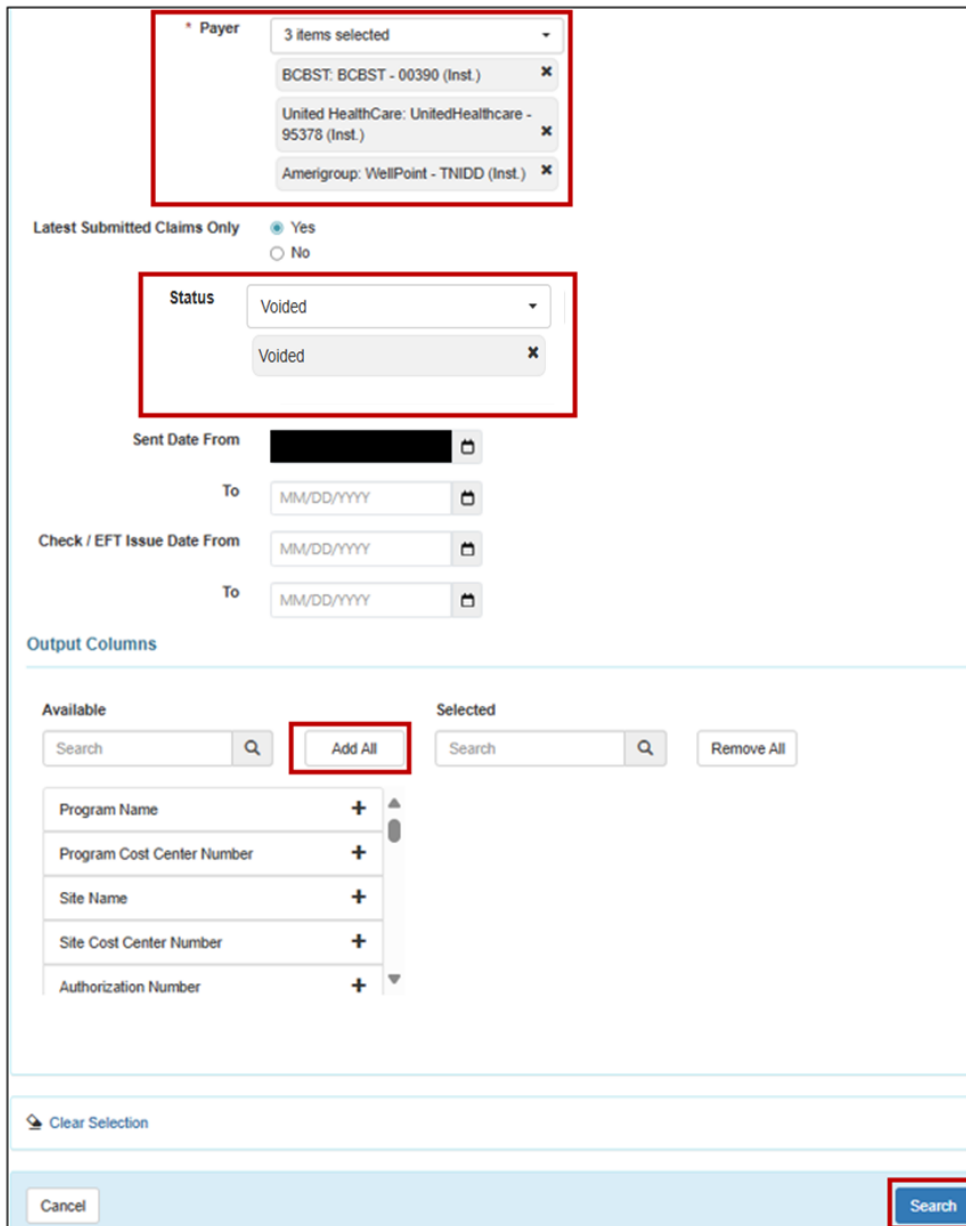


2. In the **“Individual”** field, enter the person’s name and select from the drop-down.
3. Enter the Date of Service (DOS) in the **“Service Date From”** field.
4. Under the “Service Date From” field, in the **“To”** field, enter the Date of Service (DOS).

NOTE: If there are multiple claims for a “Voided” status, you can enter up to a 3-month “date range.”

Individual	<input type="text" value=""/>	<input type="button" value="Q"/>
Service Description	<input type="text" value=""/>	
Service Code	<input type="text" value=""/>	
Service Date From	<input type="text" value="08/23/2024"/>	<input type="button" value="📅"/>
To	<input type="text" value="08/23/2024"/>	<input type="button" value="📅"/>

5. On the **"Payer,"** click on the drop-down and select the **"Payer."** **NOTE:** Multiple 'Payers' can be selected.
6. On the **"Status,"** click on the drop-down and select **"Voided."**
7. In the **"Sent Date From"** field, **remove** the date.
8. Under the 'Output Columns' section, you can **"Add All"** or select the columns you want to display. Click the **"Search"** button.



The screenshot shows a search filter interface with the following elements:

- Payer:** A dropdown menu showing "3 items selected" with three items listed: "BCBST: BCBST - 00390 (Inst.)", "United HealthCare: UnitedHealthcare - 95378 (Inst.)", and "Amerigroup: WellPoint - TNIDD (Inst.)".
- Latest Submitted Claims Only:** Radio buttons for "Yes" (selected) and "No".
- Status:** A dropdown menu showing "Voided" with a "Voided" tag below it.
- Sent Date From:** A date field with a lock icon, currently empty.
- To:** A date field with a lock icon, containing "MM/DD/YYYY".
- Check / EFT Issue Date From:** A date field with a lock icon, containing "MM/DD/YYYY".
- To:** A date field with a lock icon, containing "MM/DD/YYYY".
- Output Columns:** A section with "Available" and "Selected" columns. The "Available" column has a search box and an "Add All" button. The "Selected" column has a search box and a "Remove All" button. Below are five rows of columns: "Program Name", "Program Cost Center Number", "Site Name", "Site Cost Center Number", and "Authorization Number", each with a "+" icon.
- Clear Selection:** A button with a trash icon.
- Cancel:** A button at the bottom left.
- Search:** A blue button at the bottom right.

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.

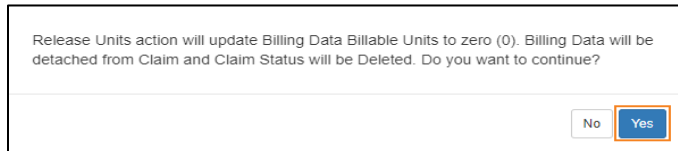
Releasing the Units

1. Click on the first claim to open the claim.
2. Scroll down and click on the **“Release Units”** button at the bottom of the form.



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

3. A pop-up message will appear asking if you wish to proceed with this action.
4. 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**

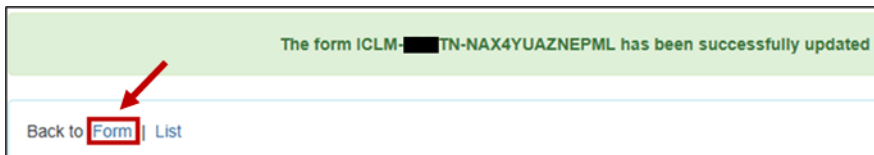
5. A success message will be shown on the following page upon successfully releasing the units.



Successfully Released Units for the Claim ICLM-DEMO-N7B2LQG3HMULQ

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

6. 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](#)

(continue to next page)

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 (\$)

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