Here are some scenarios on when to send a replacement or void claim to Medicaid. See related articles on: Replacement Claims / Recoupment and Void a Claim.

\*Note: If multiple payments were made for the month, make sure you use the correct ICN when creating a replacement or void. When multiple payments are made only the most recent ICN will show up in the ICN Edit screen.

To send back a payment on supplies / visits (when multiple services paid on one claim):

- Change the quantity or delete the supply / visit charge
- If the visit/supply that was deleted is the same date as the From date of the ICN Edit screen, and the only charge on that date:
- Change the From date in the ICN Edit screen to the first chargeable date on that claim. You'll have to delete the current ICN entry and then add a new one back with the same payment date, thru date and ICN number.
- Create and send a <u>Replacement Claim</u>

## To send back a payment on a supply / visit (when it is the only service paid on one claim):

- Leave the supply or visit in the system
- Change the ICN entry to a Void
- Send the <u>Voided Claim</u>
- After payment has been taken back, you can either delete or mark item/visit nonchargeable.

If a partial payment was made on a visit / supply then complete the steps on creating a <u>Replacement Claim</u>.

## If a visit / supply did not receive any payment: (case management and aide)

By doing this process you change the date on the visit/supply date keyed and when you resend the claim only those changes will appear on the claim.

- Pull up the supply or visit from the entry screen
- Change the supply quantity or visit time and click on save
- Pull the supply or visit back up and change back to correct information
- Follow steps on creating a <u>Replacement Claim</u>
- When you rebill the claim use the **Dates These Charges Were Keyed** for the date you made the changes

If a full payment needs sent back due to changing all visits / supplies to a different payer:

- Create the <u>Voided Claim</u>
- You can change the payer code on the visits / supplies after the claim is created or you can wait until the claim is processed. If you change the visits before the claim is processed and it gets denied, then you can always go back and change the payer code to what is used to be and recreate the void claim, as needed.

Knowledgebase http://kb.barnestorm.biz/KnowledgebaseArticle50589.aspx