

# INTO THE VOID (...AND CLAIM REPLACEMENTS)

WHEN, WHY, AND HOW TO SUBMIT REPLACEMENT AND VOIDED CLAIMS

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## What is a void claim or a claim reversal?

- Original claim is finalized
  - Claim needs to be retracted
    - Incorrect member
    - Incorrect billing/servicing provider

## What is a replacement or a corrected claim?

- Original claim is finalized
  - Claim needs to be modified
    - Missing/Incorrect codes and/or modifiers
    - Incorrect billed amount(s)
    - Incorrect date(s) of service
    - Missing/Incorrect COB Information
    - Missing/Incorrect Diagnoses or pointers
    - Missing/Incorrect Tooth Number(s) or Surface(s)

## WHEN **NOT** TO SEND A VOID/REPLACEMENT CLAIM:

- 999 Reject (batch or claim level)
- 277CA Reject (claim level only)

*Send a claim with the needed information corrected  
but **DO NOT** mark it as a replacement claim.*

## WHEN **TO** SEND A VOID/REPLACEMENT CLAIM:

- Missing or Incorrect Information
- 835/RA received with denial



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## CLAIM FREQUENCY CODES

Code	Description	Definition
1	Admit through Discharge Claim	Use for Original Claims (have not been paid or denied on a remittance advice/835)
7	Replacement of Prior Claim	Use to correct or include additional data. The entire claim needs to be resubmitted with the corrections, not just the pieces that were missing originally. The original claim should be paid or denied on a remittance advice/835.
8	Void/Cancel of Prior Claim	Use to void or cancel a claim that has been paid or denied on a remittance advice/835.

<http://www.nubc.org/resources/PDFs/BillTypeFrequencyCodes837.pdf>

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## PAYER CLAIM CONTROL NUMBER

- This REF segment is required when the Claim Frequency code is a 7 (replacement) or 8 (void). This ID should refer back to the originally submitted claim.

CLM [REDACTED] \*

REF: [REDACTED] 169100000100~

## PAYER CLAIM CONTROL NUMBER

- If the Payer Claim Control number is not sent with a claim frequency code of a 7 or an 8, the claim will receive a 999 – Reject.

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