

TIPS & TRICKS IN CONNECT:

Rebilling Claims

Types of Rebills Available in Connect

<i>Rebill</i>	<i>Action</i>	<i>Supporting Help Topic</i>
REBILL 1	New Original Claim	Rebilling Claims with Fee Changes
REBILL 2	Corrected Claim	Rebilling Claims without Fee Changes
REBILL 3	Voided Claim	Voiding Claims Sent in Error



Key Points

- ❖ Rebill 2 & 3 ALWAYS requires a payment posted to the original/current active claim, and the Payer Control Number entered on the payment.

Getting Resubmission Code 7 or 8 onto the Claim

The system automatically adds the 7 or 8 to the claim, but does require a payment with the Payer Control Number to be posted to the claim ID being rebilled.

- Electronic claims have the 7 or 8 added along with the REF02 segment and the Payer Control Number listed.
- Paper claims print the 7 or 8 code in box 22a with the Payer Control Number listed in 22b. These settings need to be updated on the Paper Claim Options in the insurance plan in Connect.

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Entering the Payer Control Number

The Payer Control Number is entered into the **Control Number** field (under the **Payment Rank** field) on the Payment's **Distribution** page. Imported ERA payments have the Payer Control Number automatically filled from the remit file. Manually posted payments need to have this field filled out by a user.



Navigation: **Payer Control Number**

- **Payment [ID]** page > click **Add Next** in **Service Lines** section > **Distribution** page

Claim Information	
Claim ID: <input type="text" value="4770"/>	Patient: SMITH, VAUGHN
Payment Rank: <input type="text" value="1 - BCBSATLANTA"/>	Account: SMITH, VAUGHN
Control Number: <input type="text" value="75121321312"/>	Expected Fee Schedule: <input type="text"/>
Network Status:	

If the number wasn't entered during payment entry, it can be added to a posted payment.

1. If you have the permission, select the *IPYMT* line from the **Active AR** tab in an account.
2. Click **View Transaction** and the posted payment distribution will open in a new tab.
3. The user can then add the **Payer Control Number** and **Save** the payment.
4. Proceed in rebilling the claim, as needed.

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Determining Rebill Type

Utilize the list below as a helpful starting place in determining the type of Rebill to perform. It depends on what information needs to be changed on the claim.

<i>Rebill 1</i>	<i>Rebill 2</i>
<ul style="list-style-type: none"> • Patient • Guarantor • Date of Service • Facility • Procedure Code • Provider • Provider Time 	<ul style="list-style-type: none"> • Patient Demographic Information • Guarantor Demographic Information • Subscriber Demographic Information • Subscriber ID • Member ID • Group ID • Coverage Confirmed • Referral Information • Pre-Auth # • Referral # • Adding Additional Payers • Generating a Medigap Plan Claim • Paper Work Attachments • Referring Provider • Hospitalization Dates • Paper Claim Local Use Fields • Work Comp/Accident Information • Emergency Indicator • Medicare Secondary Insurance Type • Type of Service (Except for 7) • Procedure Description (Override Procedure Description) • Modifiers • ICD-10 Code • NDC Information • Place of Service • Additional Dates • Reason for Delayed Submission of Claim • Signature & Release • Programs & Exceptions • Additional Identifiers



Key Points

- ❖ The following case information can be updated without needing a rebill done: Facility Case ID, External Case ID, Room #, Case Reporting Type, Quality Outcomes, and Notes.

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Frequently Asked Questions

Why isn't my additional payer available in the Rebill To dropdown on a Rebill 2, even though it's checked on the case?

- Check to see if a payment has been posted to the primary payer claim.

How do I generate a claim to a plan secondary to Medicare when the responsibility in the account shows that plan, but there wasn't a claim generated?

1. Highlight the claim for Medicare and choose *Rebill 2* and click **Next**.
2. Select the plan from the **Bill To** dropdown options.

How do I generate a voided claim?

1. Verify a payment with a payer control number has been posted to current claim id.
2. Highlight claim line and click **Rebill**.
3. Select the **Rebill 3** option (Void Claim).
4. Click **Next**.



Key Points

- ❖ Electronically voided claims need time to be transmitted to the clearinghouse from Connect before the Rebill 1 can be completed on the service line. Doing a Rebill 1 before the claim is transmitted will result in the voided claim being cancelled.

Why doesn't my Rebill 2 for Medicare show as corrected claim (7)?

- Medicare doesn't accept resubmission codes 7 & 8. All corrected claims are sent with a submission code 1 (original).