



## QUESTIONS?



FOR TECHNICAL SUPPORT ASSISTANCE  
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# ELECTRONIC CORRECTED CLAIM GUIDELINES

## SHARE WITH YOUR VENDOR

Providers are encouraged to share the following guidelines with their billing software vendor to assist in the submission of corrected/voided claims to BlueCross BlueShield of Tennessee in the ANSI-837 Professional and Institutional electronic formats.

If a claim is denied on a remittance advice, it requires correction and resubmission electronically. Corrected Bills for Institutional and Professional claims can be filed electronically in the ANSI-837, version 5010 format. The following guidelines are based on National Implementation Guides found at [www.wpc-edi.com](http://www.wpc-edi.com) and BlueCare Tennessee/BlueCross BlueShield of Tennessee Companion Documents found at [www.bcbst.com/providers/ecommm/technical-information.shtml](http://www.bcbst.com/providers/ecommm/technical-information.shtml).

**NOTE:** Claims returned or rejected should not be submitted as corrected claims. Only claims that have completed adjudication should be submitted as corrected bills. When sending a Corrected/Replacement Claim you must re-send the claim in its entirety including the corrections.

The following guidelines must be completed for an **ANSI-837P (Professional) and ANSI-837I (Institutional) claim to be considered a corrected bill.**

1. In the 2300 Loop, the CLM segment (claim information), CLM05-3 (claim frequency type code) must indicate the third digit of the Type of Bill being sent. The third digit of the Type of Bill is the frequency and can indicate if the bill is an Adjustment, a Replacement or a Voided claim as follows:
  - **"7" – REPLACEMENT (Replacement of Prior Claim)**
  - **"8" – VOID (Void/Cancel of Prior Claim)**
2. In the 2300 Loop, the REF segment (claim information), must include the original claim number issued to the claim being corrected. The original claim number can be found on your electronic remittance advice.
  - **REF01 must contain 'F8'**
  - **REF02 must contain the original BlueCross BlueShield of Tennessee claim number**
3. In the 2300 Loop, the NTE segment (free-form 'Claim Note'), must include the explanation for the Corrected/Replacement Claim.
  - **NTE01 must contain 'ADD'**
  - **NTE02 must contain the free-form note indicating the reason for the corrected replacement claim.**

Example:

**REF\*F8\*1234567890~**

Example:

**NTE\*ADD\*CORRECTED PROCEDURE CODE ON LINE 3**