ADJUSTMENT OR VOID CLAIM TRAINING
Laura Holzworth, Medical Services Division
ND Health Enterprise Web Portal Adjustment or Void Claim Form Submission Instructions

Go to https://mmis.nd.gov/portals/wps/portal/EnterpriseHome
Welcome to the North Dakota MMIS Web Portal.

ND MMIS has established a scheduled maintenance window for calendar year 2019 from 9:00PM to 4:00AM Central Time on the 2nd Thursday of the month with the following exceptions: Jan 17, Apr 17, May 16, Nov 7, and Dec 19. During the maintenance window, the

➢ Sign In - Provider
Provider

The Health Enterprise Portal is a state-of-the-art electronic health care administration system that gives patients, doctors, pharmacists and other users easy, secure and efficient access to health care information.

➢ Provider Login

• USER ID and Password
➢ Submit a Claim

- Claims
- Create Claims
- Create – Select the appropriate claim type: Professional, Institutional, Dental, Travel/Lodging or HCBS/DD Claim
New Claim

- Is this a void/replacement?
  - ✓ Defaults to “No”
  - ✓ Select “Yes” when replacing/adjusting or voiding a previously processed claim.
  - ✓ Resubmission Type Code – Replacement or Void
  - ✓ TCN to Void/Replace – last TCN number in the chain ending in 0 or 3
    - ✓ Example: 20094300040011060 or 20087300270000493

Note: For Void/Replacement of a Paid Claim, prior claim data (if available) will populate once the user has either a) tabbed out of the TCN field, or b) selected another field on this page.
Replacement and Void Reasons

*Adjust/Void using the last TCN Number in the chain

*Do Not Adjust/Void a TCN Number ending in a 2

Incorrect/Missing **Member ID Number**
- If the claim status is in a **Denied** status
  ✓ Refile a new claim with the correct **Member ID Number**
- If the claim is in a **Paid** status
  ✓ Void the claim
  ✓ Refile a new claim with the correct **Member ID Number**

Incorrect/Invalid **Provider ID Number**
- If the claim status is in a **Denied** status
  ✓ Refile a new claim with the correct **Provider ID Number**
- If the claim is in a **Paid** status
  ✓ Void the claim
  ✓ Refile a new claim with the correct **Provider ID Number**
Replacement and Void Reasons

*Adjust/Void using the last TCN Number in the chain
*Do Not Adjust/Void a TCN Number ending in a 2

Invalid/Missing **Procedure, Revenue, ADA, DME or NDC Code ect**
- If the claim status is in a **Denied** status
  ✓ Refile claim with the correct code
- If the claim status is in a **Paid** status
  ✓ Adjust claim with the correct code

Missing/Invalid **Modifier(s)**
- If the claim status is in a **Denied** status
  ✓ Refile claim with the correct **Modifier(s)**
- If the claim status is in a **Paid** status
  ✓ Adjust claim with the correct **Modifier(s)**
Replacement and Void Reasons

*Adjust/Void using the last TCN Number in the chain

*Do Not Adjust/Void a TCN Number ending in a 2

Member with two applicable Insurance Policies
• If the claim status is in a Denied status
  ✓ Refile claim with correct insurance information (primary and secondary)
• If the claim status is in a Paid status
  ✓ Adjust claim to add the correct insurance information (primary and secondary)

Member eligible on Sanford Expansion Plan
• If the claim status is in a Paid status
  ✓ Void the claim
Replacement and Void Reasons

*Adjust/Void using the last TCN Number in the chain

*Do Not Adjust/Void a TCN Number ending in a 2

Incorrect/Missing Insurance Payment
- If the claim status is in a Denied status
  ✓ Refile a new claim with the correct insurance information
- If the claim is in a Paid status
  ✓ Adjust the claim with the correct insurance information

Ambulance 2nd trip on same day
- If the claim status is in a Denied status
- Denied as a duplicate
  ✓ Adjust claim with both trip notes attached
Replacement and Void Reasons

*Adjust/Void using the last TCN Number in the chain

*Do Not Adjust/Void a TCN Number ending in a 2

**Attaching documentation** to a claim

- If the claim status is in a **Denied** status
  - ✓ Refile the claim
  - ✓ Indicate an attachment is being submitted for the claim
  - ✓ Fax in documentation with SFN177 cover sheet
- If the claim status is in a **Paid** status
  - ✓ Adjust the claim
  - ✓ Indicate an attachment is being submitted for the claim
  - ✓ Fax in documentation with SFN177 cover sheet

SFN177 link: https://www.nd.gov/eforms/Doc/sfn00177.pdf

Claim Submitted Confirmation Page on the Web Portal maybe substituted for the SFN177 cover sheet