

Resubmit Claims in 'System Rejected' and 'Service Coordinator Rejected' Status

Claims in 'System Rejected' Status

A submitted claim containing the Billing Data you have entered may not be recorded as a Service Consumption for the following reasons:

- Before the claim was generated by the system, the Service Authorization may have been updated and needs to be Acknowledged by the Linked Provider
- Before the claim was generated by the system, the Service Authorization may have been deleted by the Oversight agency

1. To check whether there are any claims that are in 'System Rejected' status, go to the To do tab of the Dashboard. If there are claims of this status, a 'System Rejected Worklist' notification will appear under the Professional Claim section of the To Do tab. To access these claims, click on the number beside 'System Rejected Worklist' and select the claim to update on the following page.

The screenshot shows the 'To Do' dashboard with a notification for 'System Rejected Worklist' under the 'Professional Claim' section. A red box highlights the notification, and a red arrow points to a detailed view of the worklist.

System Rejected Worklist

One item found.

Individual	Entered By	Individual Medicaid Number	Claim ID	Billing Provider NPI Number	Billing Provider	Medicaid Provider Number	Total Claim Amount (\$)	Patient Responsibility Amount (\$)	Create Date	Payer	Claim Status
Williams, Abigail	Hayes, Sophia	3598227339	CLM-DEMONE-D7N34CVYGD7Y		DEMO Billing Provider (EIN: 999999)		101.00	0.00	05/20/2015	NFOCUS	System Rejected

Export To Excel

Cancel

Claim List

Professional Claim

Form ID: CLM-DEMONE-D7N34CVYGDF7Y

Status: System Rejected
 Created By: Sophia Hayes, Other
 Create Date: Wed, 20 May 2015 01:46:17 AM

Reject Reason(s):
 Service Auth is Not Acknowledged

Claim Information

Payer	NFOCUS
Billing Provider	DEMO Billing Provider (EIN: 999999)
Pay-to Provider	DEMO Billing Provider (EIN: 999999)
Rendering Provider	DEMO Billing Provider (EIN: 999999)
Individual Name	Williams, Abigail (Medicaid Number: 3598227339)
Individual ID	01878344
* Signature On File	Yes ▾
* Place Of Service	99-Other Unlisted Facility ▾
* Claim Frequency Type Code	1-Original (Admit thru Discharge Claim)

Claim Form

- For claim forms in 'System Rejected' status, you will be able to edit the Billing Data to review any information contained within if necessary, such as Total Billable Units. Click on the link below Billing Data ID under the 'Service Lines' section to open the Billing Data form

Service Lines

#	Billing Data ID	Date of Service	Service Code	Service Description	Procedure Modifiers	Primary Diagnosis Code	Diagnosis Code Pointer	Unit Rate (\$)	Billable Units	Unit of Measure	Amount Billed (\$)	Paid
1	BILL-DEMONE-D7N4MPHKSED8S	05/01/2015	5665	CLDS In Home Daily		7999	1	\$1.00	101	daily	\$101.00	No

Click [here](#) to open the Billing Data

Total Claim Amount ()

Amount Paid (\$)

Patient Responsibility Amount 4.50 (\$)

3. On the Billing Data form, make the appropriate changes and click on the 'Update' button.

Billing Data

Form ID: BILL-DEMONE-D7N4MQEYNED8L
Created By: Sophia Hayes, Other
Create Date: Wed, 20 May 2015 05:22:34 AM
Last Updated By: Sophia Hayes, Other
Last Update Date: Wed, 20 May 2015 05:27:15 AM

Service Authorization Information

Authorization ID	SA-DEMONE-D7N4MQ6Y9ED8S
Program Name	DEMO Program 1
Individual Name	Abigail Williams
Authorization Number	
Funding Source	Region 2
Funding Provider Number	

Billing Data Input

Service Date From	<input type="text" value="11/02/2015"/>	Service Date To	<input type="text" value="11/24/2015"/>
Total Billable Units	<input type="text" value="10"/>		
Remaining Units	150.00		
Unit Rate (\$)	1.00		
Total Non-billable Units	<input type="text" value="0"/>		
Procedure Modifiers	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>		
Primary Diagnosis Code	ICD-9: <input type="text" value="7999"/>		
Diagnosis Code Pointer	<input type="text" value="1"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>		
Service Provider	<input type="text" value="Select"/>		

Comments

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[Update History \(1\)](#)

<< Back Update

4. On the claim form, click on the 'Submit for Approval' button at the bottom to resubmit for approval.

Service Lines												
#	Billing Data ID	Date of Service	Service Code	Service Description	Procedure Modifiers	Primary Diagnosis Code	Diagnosis Code Pointer	Unit Rate (\$)	Billable Units	Unit of Measure	Amount Billed (\$)	Paid
1	BILL-DEMONE-D7N4MPHKSED8S	05/01/2015	5665	CLDS In Home Daily		7999	1	\$1.00	10	daily	\$10.00	No

Total Claim Amount (\$) 10.00
Amount Paid (\$) 0.00
Patient Responsibility Amount (\$) 4.50

Note Reference Code

Comments

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[Display PDF \(Portrait\)](#)
[Display PDF \(Landscape\)](#)

Update Submit for Approval Delete

Click here to submit the updated form

Click here to 'Delete' the form

5. A success message will be displayed on the following page to confirm the claim submission.

The form CLM-DEMONE-D7N34D4ZWDF7G has been Successfully Submitted

[Back to Claim Form](#)

[New Professional Claim](#)

[Back to Search Results](#)

6. The status of the claim will change to 'Pending Approval'.

Professional Claim

Form ID: CLM-DEMONE-D7N34CVYGDF7Y

Status: Pending Approval

Created By: Sophia Hayes, Other
Create Date: Tue, 19 May 2015 11:30:00 PM
Last Updated By: Sophia Hayes, Other
Last Update Date: Wed, 20 May 2015 12:42:19 AM

Claim Information

Payer	NFOCUS
Billing Provider	DEMO Billing Provider(EIN: 999999)
Pay-to Provider	DEMO Billing Provider(EIN: 999999)
Rendering Provider	DEMO Billing Provider(EIN: 999999)
Individual Name	Williams, Abigail (Medicaid Number: 3598227339)
Individual ID	01878344

Claims in 'Service Coordinator Rejected' Status

Claims have with status 'Service Coordinator Rejected' are generated when Service Coordinators on the Oversight Agency rejects the submitted Service Consumption recorded by the Linked Provider. These claims may need to updated further to meet the requirements of the Oversight Agency.

- To check whether there are any claims that are in 'Service Coordinator Rejected' status, go to the **To do** tab of the Dashboard. If there are claims of this status, a 'Service Coordinator Rejected Worklist' notification will appear under the Professional Claim section of the To Do tab. To access these claims, click on the number beside 'Service Coordinator Rejected Worklist' and select the claim to update on the following page.

To Do

Individual

Health

Agency

Billing

Modules
High Medium Low

❖	Individual Data - Search	
	Worklist	2
	Emergency Data Form - Search	
	Acknowledge Print	11
❖	Professional Claim - Search	
	Service Coordinator Rejected Worklist	1
	System Rejected Worklist	1

Issue Tracking

My Issues

SComm

Inbox

Sent Items

Compose

Drafts

Custom User Group

Message Audit

Service Coordinator Rejected Worklist

One item found.

Individual	Entered By	Individual Medicaid Number	Claim ID	Billing Provider NPI Number	Billing Provider	Medicaid Provider Number	Total Claim Amount (\$)	Patient Responsibility Amount (\$)	Create Date	Payer	Claim Status
Williams, Abigail	Hayes, Sophia	3598227339	CLM-DEMONE-D7S4NDQWZED8N		DEMO Billing Provider (EIN:999999)		60.00	5.00	05/23/2015	NFOCUS	Service Coordinator Rejected

Export To Excel

Cancel

Professional Claim

Form ID: CLM-DEMONE-D7S4NDDWZED8N

Status: Service Coordinator Rejected
Created By: Sophia Hayes, Other
Create Date: Sat, 23 May 2015 11:15:00 PM

i **Reject Reason(s):**
Need to change Number of Units

Claim Information

Payer	NFOCUS
Billing Provider	DEMO Billing Provider (EIN: 999999)
Pay-to Provider	DEMO Billing Provider (EIN: 999999)
Rendering Provider	DEMO Billing Provider (EIN: 999999)
Individual Name	Williams, Abigail (Medicaid Number: 3598227339)
Individual ID	22112211
* Signature On File	Yes <input type="button" value="v"/>
* Place Of Service	99-Other Unlisted Facility <input type="button" value="v"/>
* Claim Frequency Type Code	1-Original (Admit thru Discharge Claim) <input type="button" value="v"/>

- For claim forms in 'Service Coordinator Rejected' status, you will be able to edit the Billing Data to review any information contained within, such as Total Billable Units. Click on the link below Billing Data ID under the 'Service Lines' section to open the Billing Data form.

Service Lines

#	Billing Data ID	Date of Service	Service Code	Service Description	Procedure Modifiers	Primary Diagnosis Code	Diagnosis Code Pointer	Unit Rate (\$)	Billable Units	Unit of Measure	Amount Billed (\$)	Paid
1	BILL-DEMONE-D7S4MA8SJED7Z	05/01/2015	5665	CLDS In Home Daily		7999	1	\$3.00	20	daily	\$60.00	No

Click [here](#) to open the Billing Data

Total Claim Amount (Amount Paid (\$))	
Patient Responsibility Amount (\$)	4.50

3. On the Billing Data form make the appropriate changes and click on the 'Update' button.

Billing Data

Form ID: BILL-DEMONE-D7N4MQEYNED8L

Created By: Sophia Hayes, Other
Create Date: Wed, 20 May 2015 05:22:34 AM
Last Updated By: Sophia Hayes, Other
Last Update Date: Wed, 20 May 2015 05:27:15 AM

Service Authorization Information

Authorization ID	SA-DEMONE-D7N4MQ6Y9ED8S
Program Name	DEMO Program 1
Individual Name	Abigail Williams
Authorization Number	
Funding Source	Region 2
Funding Provider Number	

Billing Data Input

Service Date From	<input type="text" value="11/02/2015"/>	Service Date To	<input type="text" value="11/24/2015"/>
Total Billable Units	<input type="text" value="10"/>		
Remaining Units	150.00		
Unit Rate (\$)	1.00		
Total Non-billable Units	<input type="text" value="0"/>		
Procedure Modifiers	<input type="text"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>		
Primary Diagnosis Code	ICD-9: <input type="text" value="7999"/>		
Diagnosis Code Pointer	<input type="text" value="1"/> - <input type="text"/> - <input type="text"/> - <input type="text"/>		
Service Provider	<input type="text" value="Select"/>		

Comments

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[Update History \(1\)](#)

<< Back Update