

Instruction Sheet

ForwardHealth Portal Adjusting a Claim

September 12, 2022



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Adjusting a Claim

After reviewing both the claim and ForwardHealth remittance information, a provider may determine that a paid claim needs to be adjusted. Providers may file adjustment requests through the ForwardHealth Portal for reasons including the following:

- To correct billing or processing errors.
- To correct inappropriate payments (overpayments and underpayments).
- To add and delete services.
- To supply additional information that may affect the amount of reimbursement.
- To request professional consultant review (for example, medical, pharmacy).

Any claim that is in a *Pay* status can be adjusted and resubmitted through the Portal regardless of how the claim was originally submitted. Each claim submission and adjustment request received by ForwardHealth will be assigned a unique claim number or internal control number (ICN).

Each ICN can be adjusted only once. If an additional adjustment is needed, the second adjustment must be made to the ICN assigned to the first adjustment. The claim must also be in a *Pay* status in order for it to be eligible to be adjusted again.

Note: The Adjust button will not be displayed on a previously adjusted ICN. In addition, for adjustment claims, the Submission button will not be displayed on a claim that cannot be adjusted.

1. Search for a claim following the procedures in the ForwardHealth Portal Claim Search Instruction Sheet, which is located on the [Portal User Guides page](#) of the ForwardHealth Portal.

Note: If the claim is already open, you will not need to search for the claim.

2. Make applicable changes to the claim.

If the original claim did not have an attachment and the user wishes to add one, they may do so through the Attachments panel. For more information, refer to the Attachments Panel section of the applicable claim submission user guide (that is, professional, institutional, or dental).

If there was an attachment associated with the original claim, the user may use the previously submitted attachment or delete the previously submitted attachment by using the Delete button.

3. Click **Adjust** at the bottom of the Claim Information page to submit the adjustments.

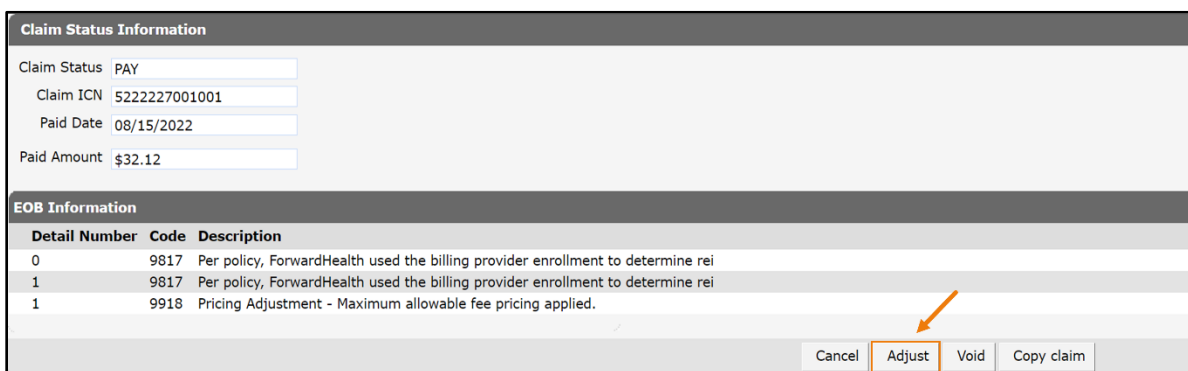


Figure 1 Adjust Button

If there is a problem and the claim does not process, an adjustment ICN will not be assigned, and an error message that indicates what needs to be corrected will be displayed at the top of the page.

If the claim processes, the Adjustment Information panel will be displayed. Note: Initial claims that permit attachments will have ICNs starting with 23- (if submitted via the Portal), 22- (Portal claims with no attachments) or 21- (if submitted via Electronic Data Interchange [EDI] batch, including Provider Electronic Solutions [PES] software). Adjusted claims will start with 59- (Provider-initiated electronic adjustment or void).

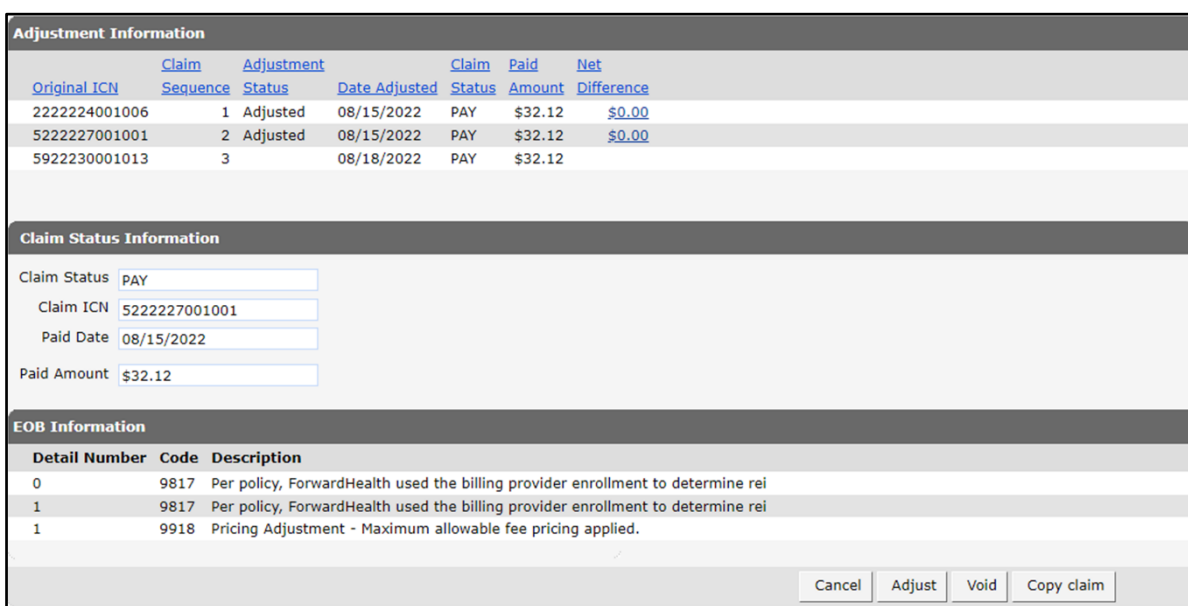


Figure 2 Adjustment Information Panel

Information displayed on the Adjustment Information panel includes the following elements:

- Original ICN—This is the parent ICN.
- Claim Sequence—Identifies the sequence number of the ICN in the family of adjustments. The claim sequence is automatically assigned after the adjustment request

is initiated. For example, for the first-time adjustment, the original/parent ICN claim sequence number will be set to “1,” and its adjustment/child ICN claim sequence number will be set to “2.” Any subsequent adjustment within the claims family will have the claim sequence number will change by an increment of one from its previously adjusted ICN.

- Adjustment Status: The Adjustment Status is automatically set to one of three options at completion of the adjustment:
 - o Adjusted—When the claim is either in a paid or denied status.
 - o Adj. In Progress—When the claim has suspended or the adjustment is waiting for the batch cycle.
 - o Voided—When the claim is voided/reversed.
- Date Adjusted: Indicates the date the claim was adjusted.
- Claim Status: Indicates the status of the claim. Values are Pay, Deny, or Suspend.
- Paid Amount: The total paid amount applied towards the provider check amount for the claim.
- Net Difference: The paid amount differences between the parent ICN and child ICN. The user can click the net difference value, which opens the new Adjustment Net Difference panel in a different tab. The net difference clickable value will appear in the mother ICN row only after both mother and daughter ICN paid amounts are available.

If the user indicates an attachment is to be submitted with the claim, the Upload Claim Attachments button will be displayed on the bottom of the page. Users may upload attachments electronically through the Portal or submit the attachment by mail or fax using the [Claim Form Attachment Cover Page](#) available on the ForwardHealth Forms page of the Portal.

Note: If the user indicates on the Attachments panel that an attachment will be included with the claim, the claim will suspend for 30 days pending the receipt of the indicated attachment.



Figure 3 Upload Claim Attachments Button

If the user is not ready to upload a file, exit this page or go to another area of the Portal.

If the user is ready to upload an attachment, click **Upload Claim Attachments**.

The Upload Claim Attachment File panel will be displayed. For information about uploading attachments, refer to the [ForwardHealth Portal Uploading Claim Attachments Instruction Sheet](#), which is located on the Portal User Guides page of the ForwardHealth Portal.

1.1 Adjustment Net Difference Panel

The Adjustment Net Difference panel displays the header and detail amounts and its net differences between the Parent/Mother and Child/Daughter claims for several different pricing elements. The header panel displays the accumulated dollar values from the detail panel for each of the different elements. The detail sub panel displays the number of details on a claim record for a parent ICN followed by the number of details on a daughter ICN. The detail sub panel only shows the amount incurred for each of the elements but does not calculate the net differences. This Adjustment Net Difference – Detail panel will include information only when the ICN is paid at the Detail level and grayed out showing no information when the ICN paid at the Header level.

- Under the Adjustment Information panel, the user can access the Adjustment Net Difference panel by clicking the amount indicated under the Net Difference column.

Adjustment Information						
Original ICN	Claim Sequence	Adjustment Status	Date Adjusted	Claim Status	Paid Amount	Net Difference
2222228001014	1	Adjusted	08/16/2022	PAY	\$51.00	<u>\$10.00</u>
5922228001006	2		08/16/2022	PAY	\$61.00	

Figure 4 Adjustment Information Panel

The Adjustment Net Difference panel will be displayed.

Adjustment Information						
Original ICN	Claim Sequence	Adjustment Status	Date Adjusted	Claim Status	Paid Amount	Net Difference
2222228001014	1	Adjusted	08/16/2022	PAY	\$51.00	<u>\$10.00</u>
5922228001006	2		08/16/2022	PAY	\$61.00	

Adjustment Net Difference - Header			
	Original ICN	Adjustment ICN	Net Difference
Sequence Number	1	2	
Adjustment Status	Adjusted		
Billed Amount	\$100.00	\$100.00	\$0.00
Allowed Amount	\$123.24	\$123.24	\$0.00
Paid Amount	\$51.00	\$61.00	\$10.00
Payment Adjustment	\$24.24	\$24.24	\$0.00
Other Insurance (OI)	\$50.00	\$40.00	(\$10.00)
Spenddown	\$0.00	\$0.00	\$0.00
Copay	\$0.00	\$0.00	\$0.00
Coinsurance/Deductible	\$0.00	\$0.00	\$0.00
Dispense/Repackage Fee	\$0.00	\$0.00	\$0.00
Medicare Paid	\$0.00	\$0.00	\$0.00
Medicare Coinsurance/Deductible	\$0.00	\$0.00	\$0.00

Adjustment Net Difference - Detail													
	Detail Number	Detail Status	Billed Amount	Allowed Amount	Paid Amount	Payment Adjustment	Other Insurance (OI)	Spenddown	Copay	Coinsurance/Deductible	Dispense/Repackage Fee	Medicare Paid	Medicare Coinsurance/Deductible
Original ICN	1	PAY	\$100.00	\$123.24	\$51.00	\$24.24	\$50.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Adjustment ICN	1	PAY	\$100.00	\$123.24	\$61.00	\$24.24	\$40.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Figure 5 Adjustment Net Difference Panel

The following elements are included in the Adjustment Net Difference panel.

Field Name	Description
Original ICN	The parent claim ICN .

Field Name	Description
Adjustment ICN	The daughter/adjustment claim ICN.
Sequence Number	The number assigned to denote sequence of adjustments for the claim's family.
Adjustment Status	The status to identify the parent claim adjustment status.
Billed Amount	The amount requested by the provider for services rendered.
Allowed Amount	The maximum amount determined by the payer to pay for services provided to a beneficiary under a financial payer/benefit plan.
Paid Amount	Amount sent to a provider for payment of services rendered to a recipient.
Payment Adjustment	The sum of all the adjustment payment amounts applied to the claim based on adjustment EOBs that are grouped under EOB Group Type 1004—Incentives.
Other Insurance (OI)	The amount paid by third party for services rendered.
Spenddown	The amount an individual must pay or incur before Medicaid makes payment. The amount of patient liability that was used on the claim.
Copay	The amount paid by recipient for services rendered.
Coinsurance/Deductible	The recipient's coinsurance payment/deductible amount that must be paid by the recipient before a payment will be paid for a claim.
Dispense/Repackage Fee	The dispense/repackaging fee.
Medicare Paid	The recipient's Medicare paid amount.
Medicare/Coinsurance Deductible	The recipient's Medicare/Coinsurance payment amount that must be paid by the recipient before a payment will be paid for a claim. The following amounts when found on applicable claim will be included in this field: Medicare Deductible, Medicare

Field Name	Description
	Coinsurance, Medicare Copayment, Medicare Blood Deductible, and Medicare Psychiatric Reduction.
Detail Status	Indicates the status of the parent or adjustment detail in the Medicaid Management Information System. They can be Pay, Deny, Suspend, or Super Suspend.
Detail Number	The number of the detail on a claim record. If there are multiple rows for the same detail number, it is displaying how it is priced per Fund Code/Rate Type. It will not contain detail number 0. It will start with detail line 1.