

# Claim resolution reference guide

Corrections, reconsideration and disputes

Please review this guide to learn how to submit a corrected claim or claim reconsideration, or file a claim dispute. Following these guidelines can help us process your claim resubmissions more quickly and accurately. If you have questions, call:

- **800-293-3740** for questions about Long-Term Care
- **800-445-1638** for questions about AHCCCS Complete Care (ACC) and Developmental Disabilities (DD) services



## Corrected claims and claim reconsiderations

### Time frame for submitting a corrected claim or claim reconsideration

If your claim was originally denied for missing or incorrect information, or you believe your claim was incorrectly paid, the time frame for resubmitting a clean claim is whichever is later:

- 12 months from the date of service
- 12 months from the date eligibility posting

A claims inquiry or reconsideration does not extend the dispute filing deadlines.

If you're resubmitting a previously recouped claim, the time frame for resubmitting a clean claim is whichever is later:

- 12 months from the date of service
- 12 months from the date eligibility posting
- 60 days from the date of the adverse action



## How to submit a corrected claim or claim reconsideration

There are 2 ways to submit a corrected claim or claim reconsideration:

**Online:** You can resubmit your claims using the Claims tool. Go to [UHCprovider.com](https://UHCprovider.com) and click **Sign In** in the top-right corner. When you submit your request, please include:

- Copy of the original claim
- Copy of the remittance advice that includes the denied or incorrectly paid claim
- Updated copy of the claim
- Any additional documentation

**Mail:** If you need to submit a paper corrected claim or reconsideration, use the claim reconsideration request form. You can download the form by going to [UHCprovider.com/AZcommunityplan](https://UHCprovider.com/AZcommunityplan) > Claims and Payments > Claim Reconsideration, Administrative Disputes/Appeals. Then, click on "**UnitedHealthcare Community Plan paper claim reconsideration form.**"

Send your claim reconsideration request form to:  
UnitedHealthcare Community Plan  
P.O. Box 5290  
Kingston, NY 12402



## Claim disputes

### Time frame for submitting a claim dispute

The time frame for filing a claim dispute is whichever is later:

- 12 months after the date of service
- 12 months after the date eligibility is posted
- 60 days after the payment date, denial or recoupment of a timely claim submission

### How to submit a claim dispute

The dispute must state that you are filing a **dispute**, not an appeal. Send your information electronically or by mail. Please include the factual and legal basis for the dispute, along with supporting documentation and the relief requested. We may deny your claim dispute if these requirements aren't met.

**Electronic submission:** Use the Claims tool on [UHCprovider.com](https://www.uhcprovider.com). You may upload attachments.

**Mail:** Send your claim dispute to this address for Medicaid:

UnitedHealthcare Community Plan  
Claim Disputes  
1 E. Washington St., Suite 900  
Phoenix, AZ 85004

We'll acknowledge claim disputes in writing within 5 business days of receiving them. If you disagree with our decision, you can request a hearing within 30 calendar days, and we'll forward the hearing request to the **Arizona Health Care Cost Containment System**, office of grievance and appeals.

Thank you for following these guidelines, so we can process your claim resubmissions more quickly.