



**State of Maine**

**Department of Health & Human Services (DHHS)**

**MaineCare**

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**Medicaid Management Information Systems**

***Maine Integrated Health Management Solution  
Claims Statuses Throughout Claims Cycles***

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## Version History

Version	Date	Author	Action/Summary of Changes	Status
1.0	02/07/2011	K. Goldhammer	First edition published to provide further clarity on MIHMS Claims Statuses and their relation to the claims processing cycle.	Final

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## 1. Introduction

This document gives an overview of claims statuses in MIHMS and is intended for use by providers.

## 2. Claims Status in MIHMS

MIHMS processes claims in cycles that move claims through different statuses. Claims loaded to MIHMS are in open status, where nightly processing moves them to a pay, pend or deny status. Figure 1 shows the typical pattern of claim cycles and statuses. While claims generally follow along this pattern, a claim in any of the initial statuses could be reprocessed returning it to open status and claims in Wait statuses could encounter additional processing that will stall its finalization.

Claims in pay or deny status typically move to Wait Pay or Wait Deny during a weekly cycle generally occurring on Thursdays. Those claims Awaiting Finalization are generally included in the provider's next payment when they become finalized.

Claim Status and Cycles					
Cycles	Daily	Nightly or by Provider		Weekly	Weekly
<b>Statuses</b>	OPEN	ADJUDICATED	PAY	WAIT PAY	PAID
			DENY	WAIT DENY	DENIED
			PEND: claims will go to PAY or DENY without the Provider doing anything		
	Initial			Awaiting Finalization	Finalized
<b>Edit Options</b>	Claims may be edited in any of these statuses. Edited claims should be saved and will return to an OPEN status.			These claims are locked and cannot be edited.	PAID claims may be correct (Reversed or Replaced)

**Figure 1: Claim Status and Cycles**

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Figure 2 represents cycles and statuses from reversal and replacement (adjustment) claims.

Reversal and Replacement: Claim Status and Cycles					
Cycles		Nightly or by Provider		Weekly	Weekly
Replacement	Reversed Claim	REVSYNCH	REV	WAIT REV	REVERSED
	Replacement Claim	ADJUDICATED	PAY	WAIT PAY	PAID
			DENY	WAIT DENY	DENIED
Reversed Claim ONLY		REV		WAIT REV	REVERSED
		Initial		Awaiting Finalization	Finalized
<p><b>*Note*</b> Claim Number for Reversals and Replacements: Reversed Claims will be the <b>original claim number</b> followed by <b>R1</b> Replacement Claims will be the <b>original claim number</b> followed by <b>A1</b>. Subsequent replacements will be incremented by 1, so <b>A1</b> will be <b>A2</b> for the second correction.</p>					

**Figure 2: Reversal and Replacement: Claims Status and Cycles**

Based on regular processing reviews claims may be reprocessed by MaineCare in any of the statuses except for finalized claims. Corrections to paid claims must be done as a reversal or replacement. Corrections to denied claims must be resubmitted and cannot be reprocessed.

Reprocessing may occur for many reasons including the following:

- A system change/correction has been identified and implemented
- A new business process has been defined and is in place
- A failure in financial processing has occurred

Reprocessing should only affect a subset of claims and the need to reprocess will diminish as MIHMS' performance continues to improve. Providers are not expected to take action unless they have been contacted.

### 3. Status Definitions

- Initial
  - OPEN: The claim has been entered with the required fields for submission.
  - ADJUDICATED: The claim has been processed against the business rules of the system.
  - DENY: The claim has failed the adjudication process.
  - PAY: The claim has passed the adjudication process and is ready to be submitted for payment.
  - PEND: The claim has been set aside for review to determine if it should be paid or denied.
  - REV: An inverse of a previously paid claim that is created to take away any payment error.

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- REVSYNCH: The REV claim is held in this status until the companion replacement claim moves to Pay or Deny.
- Awaiting Finalization
  - WAITDENY: Awaiting the finalization of the claim denial for inclusion on the remittance advice.
  - WAITPAY: Awaiting the finalization of the claim payment submitted to AdvantageME for inclusion on the check and remittance advice
  - WAITREV: Awaiting the finalization of the claim reversal for inclusion on the check and remittance advice.
- Finalized
  - PAID: The payment process is complete and is included in a Remittance Advice.
  - DENIED: The claim has failed the adjudication process, has been denied and is included in a Remittance Advice.
  - REVERSED: The negative claim has been finalized and is included in a Remittance Advice.
  - VOID: May be created as part of a mass adjustment (reversal and replacement) to void the replacement (adjustment) claim when only a reversal should have occurred. These transactions do not appear on a remittance advice or in an 835. They are administrative transactions only.

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