

## Claims Processing Guidelines

- **Submit claims electronically to ICW**
  - Payer ID 91164
  - Includes COB and corrected claims
- **Timely filing requirements**
  - From date of service, date of primary payor payment, or date recouped by another payor, whichever is later
  - ICW contracted providers: 6 months timely filing
  - Non-ICW contracted providers: 365 days timely filing
- **Claims Status Inquiries**
  - Typical turnaround time is 7-14 days from the claim receipt date for clean claims
  - Allow at least 45 days from date of submission before submitting an inquiry
  - Inquiries can be submitted via *secure* email to [claims@ic-wa.org](mailto:claims@ic-wa.org) using the **Claims Status Inquiry Form**. A maximum of 50 claims can be reviewed per inquiry
  - Phone inquiries are limited to a maximum of three claims per day for review
- **Paid claims for services not supported by the medical record will be recouped**
  - Medical record must be signed before claim is submitted
  - Denied services can be reconsidered for payment
    - Must be documented by an amended medical record
    - Must be re-submitted timely
- **Provider reconsiderations**
  - ICW contracted providers must submit a request within 1 year from the date of payment
  - Non-ICW contracted providers
    - Medicare must submit a request within 1 year from the date of payment
    - Medicaid must submit a request within 2 years from the date of payment
  - Send formal written requests in letter format to ICW by fax to 206-834-6000 or *secure* e-mail to [claims@ic-wa.org](mailto:claims@ic-wa.org)
  - Include provider name, patient name, health plan ID number, date of service, billed amount and description of dispute. Do not include medical records.