

## Claim Submission Reminders: Corrected and Duplicate Claims

### Neighborhood News – July 2025

Neighborhood Health Plan of Rhode Island (Neighborhood) reminds providers to follow [Centers for Medicare & Medicaid Services](#) and [health plan guidelines](#) to avoid duplicate claim denials and incorrect payments. Please use the following information to assist you in submitting claims to Neighborhood.

- **Corrected claims** - When making changes to a claim, the corrected claim replaces the original, making the original claim invalid. To ensure accurate processing of corrected claims:
  - a. Allow up to thirty (30) days for Neighborhood to process your claims before submitting any necessary corrections. If you haven't received payment within the standard processing time, check the claim status before resubmitting a new one. Resubmitting a claim while the original claim has not completed adjudication may create a duplicate claim resulting in a denial.
  - b. Submit corrected claims with the appropriate frequency code (7) referencing the original processed claim number. Do not submit corrections as initial claim submissions.
  - c. Include all originally billed services rendered to the member by the provider, not just the line being corrected. Failure to submit all previous billed services on a corrected claim will result in processing of the amended line and the retraction of the absent lines.
- **Multiple new claim submissions for the same date of service**
  - a. Submit one (1) claim for all services rendered on the same date(s) of service by the same provider for an individual member. If multiple original claims are submitted for the same date(s) of service, the first claim submission will adjudicate and the subsequent claim(s) will deny as duplicate.

You can always verify the status of a claim through our provider portal, [NaviNet](#), or by calling the Provider Services Call Center at 1-800-963-1001.

Submit Corrected Claims For...
• Date of Service
• Place of Service
• Diagnosis Code
• CPT or HCPCS Code
• Modifiers
• Units
• Originally Billed Charges

For detailed guidance and further resources on how to manage your claims efficiently and avoid common errors, please refer to the following provider resources:

- [Provider Manual](#) pages 34-35
- [Provider Quick Reference Guide](#)
- [Billing and Guidelines Payment Policies](#)
- [Claim Form Finder](#)