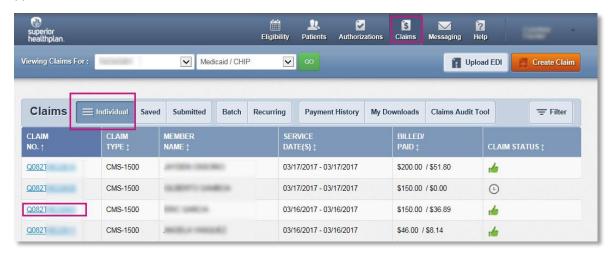
## Secure Provider Portal: Claim Corrections



Providers have the ability to correct a claim and attach documentation to any claim online. Attachment functionality is available for new claim submissions, claim corrections and claim appeals.

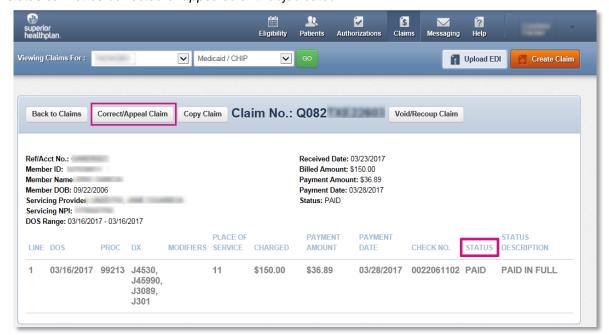
## Review the steps below to see the process for correcting a claim and attaching documentation.

- 1. Log into the Secure Provider Portal: Provider.SuperiorHealthPlan.com
- 2. Use the navigation bar at the top to select the Claims feature.
- 3. Select Individual in the Claims toolbar.
- 4. Click the Claim Number in the CLAIM NO. column for the specific claim that either needs to be corrected or appealed.

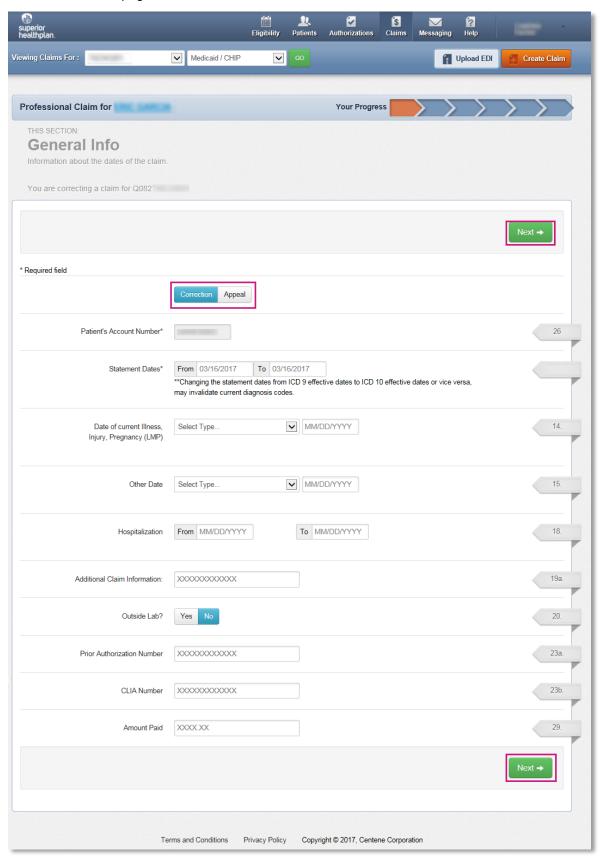


Once the claim is opened, select Correct/Appeal Claim from the claim details page to begin a claim correction or appeal.

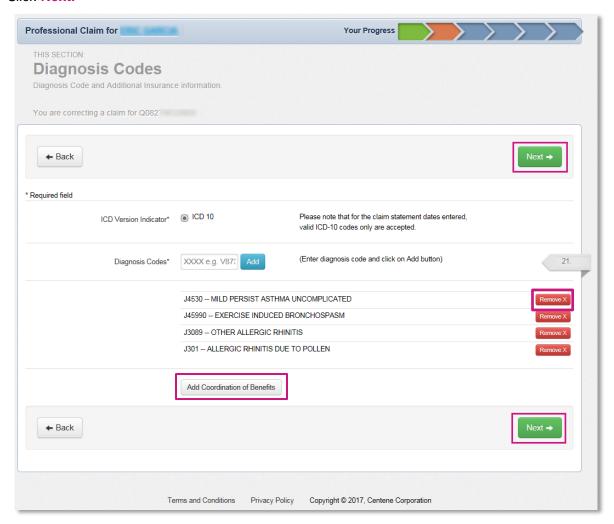
Please note: Claims with a Status of PAID or DENIED can be corrected/appealed online. Claims with a PENDING status cannot be corrected or appealed until adjudicated.



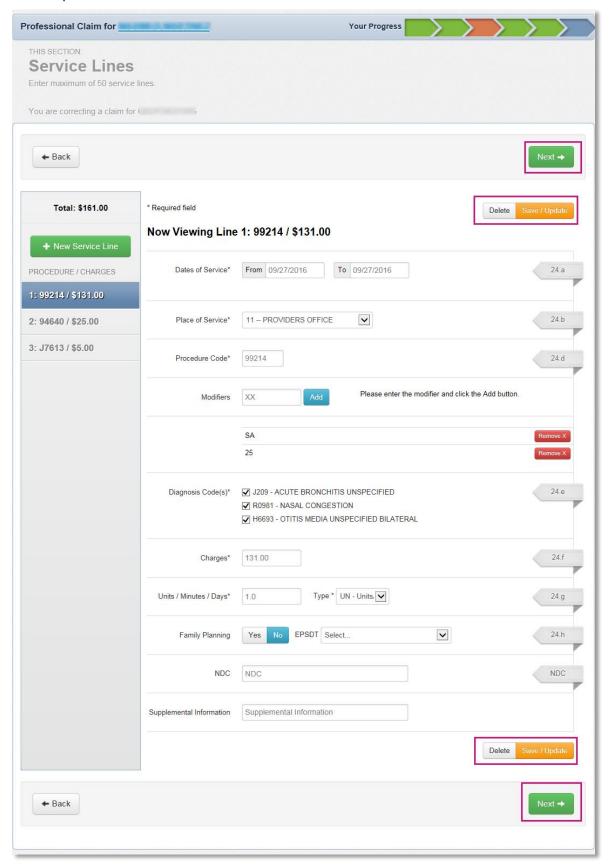
6. On the General Info page, select Correction and then click Next.



- 7. On the Diagnosis codes page you will need to verify any Diagnosis Codes. If a code is incorrect please click Remove.
- 8. Select Add Coordination of Benefits to for additional insurance information.
- 9. Click Next.



10. On the Service Lines page, click on Save/Update to update each service line details, as necessary, and click Next when complete.

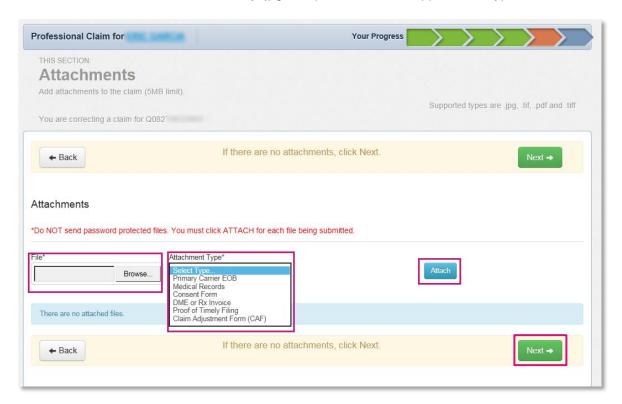


11. Provider information will remain the same from the original claim. Click Next.

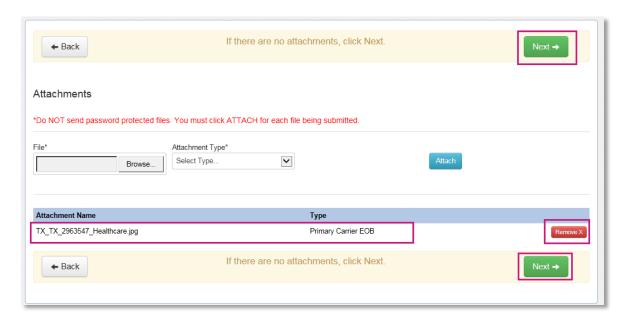
- 12. On the Attachments page, click **Browse** to attach supporting documentation.

  Please note: Attachments are optional if submitting corrected claims. If providers are submitting corrected claims and do not need to attach any documents and hit **Next** to be taken to the Review page.
- 13. Select the **Attachment Type** and then click **Attach**. The attachment file name will appear when it has been successfully uploaded to the claim.

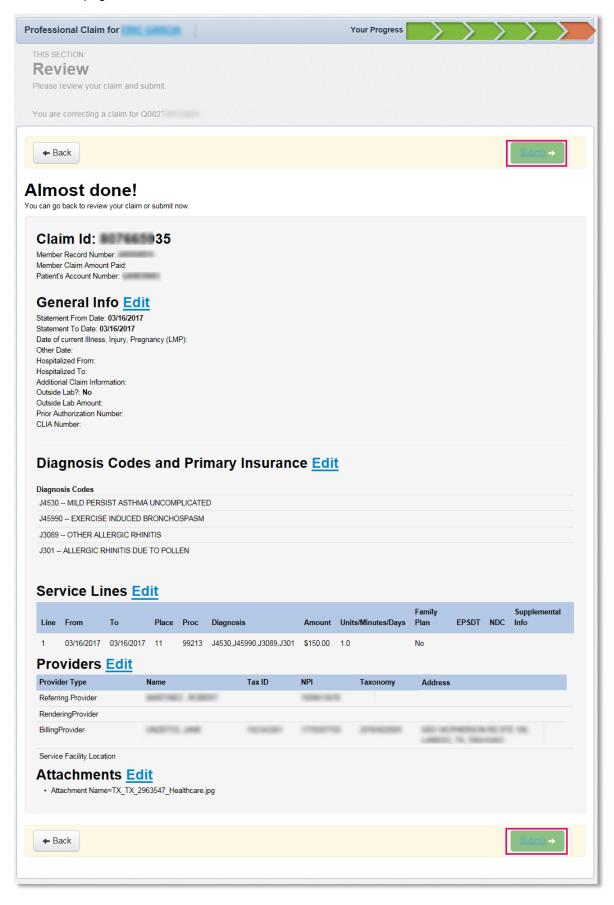
Please note: There is a 5mb limit and only .jpg, .tif, .pdf and .tiff are supported file types for attachments



14. Click Remove to withdraw the attachment, when necessary.



15. The Review page is used to review and confirm claim details. Once confirmed, click Submit.



16. When the claim is successfully submitted, the **Web/Ref#** (web/reference number) will display as confirmation. Please note: The Web/Ref# number is not a claim number. It only serves as confirmation that the claim was submitted using the Secure Provider Portal.

