

# MEDICARE REOPENING REQUEST FORM

This form should only be used to correct minor billing errors.

The following issues cannot be done as a reopening :

- ❖ Medical Necessity (when any documentation is requested) – Please complete a Medicare Redetermination Request Form
- ❖ A single request correcting the submitted charge & days / units – Please complete a Redetermination Request Form
- ❖ Unprocessable claims (identified on remittance with MA-130) – Please submit a new corrected claim

Indicate the type of reopening:

- Single claim correction** (complete sections A, B & C)
- Multiple claim corrections** (complete sections A & C and attach a copy of the Medicare remittance notices, clearly marking with blue/ black ink which claim(s) are being corrected)

## SECTION A

State service was performed in: IA  KS  MO  NE

Provider's Name: \_\_\_\_\_ Provider Group Number: \_\_\_\_\_

Requester's Name: \_\_\_\_\_ Requester's Telephone Number: \_\_\_\_\_

Requester's Relationship to Provider/Beneficiary: \_\_\_\_\_

Requester's Signature: \_\_\_\_\_ Date signed: \_\_\_\_\_

## SECTION B

Beneficiary Name: \_\_\_\_\_ Medicare Number: \_\_\_\_\_

Date of Service: \_\_\_\_\_ ICN (from remittance): \_\_\_\_\_

**PLEASE NOTE:** The carrier reserves the right to refuse to adjust a claim as requested if it appears that such an adjustment would risk incorrect payment or any claims that are not clearly identified for correction. For example, if the initial determination payment cannot be changed, we cannot process the request as a reopening.

**SECTION C** Item(s) to be corrected (please check all that apply):

- Date of Service       Billed Amount       CPT/HCPCS Code       Place of Service       Days/Units
- Referring Provider UPIN       Performing Provider Number       Replacing Modifier       Replacing ICD 9

Add Modifier: \_\_\_\_\_ Add ICD 9: \_\_\_\_\_

Explain the correction (s) needed: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Send to:

### Iowa

WPS Medicare Part B - Reopenings  
P.O. Box 8550  
Madison, WI 53708

### Kansas

WPS Medicare Part B - Reopenings  
P.O. Box 7238  
Madison, WI 53707

### Missouri

WPS Medicare Part B – Reopenings  
P.O. Box 14260  
Madison, WI 53708-0260

### Nebraska

WPS Medicare Part B – Reopenings  
P.O. Box 8667  
Madison, WI 53708