

Billing Timelines and Appeal Procedures

Timelines

30 Days	This is the average time for both electronic (EDI) and paper claims to process on a remittance advice.
60 Days	This is the usual turnaround time for Medicare/MassHealth crossover claims forwarded to MassHealth by the Massachusetts Medicare fiscal agent to be processed.
90 Days	Initial claims must be received by MassHealth within 90 days of the service date. If you had to bill another insurance carrier before billing MassHealth, you have 90 days from the date of the explanation of benefits (EOB) of the primary insurer to submit your claim.
12 Months	This is the final submission deadline. You have 12 months from the date of service to resolve your claim, if you originally submitted the claim within 90 days from the date of service. If you exceed this deadline, your claim will be denied for error code 853 or 855 (Final Deadline Exceeded) on a paper remittance advice (RA).
18 Months	This is the final submission deadline if you had to bill another insurance carrier before billing MassHealth. You have 18 months from the service date to resolve your claim, as long as the claim was received by MassHealth within 90 days of the EOB date. If you exceed this deadline, your claim will be denied for error code 853 or 855 (Final Deadline Exceeded) on a paper RA.
36 Months	If the date of service is more than 36 months when it is received by MassHealth, the claim will be

36 Months If the date of service is more than 36 months when it is received by MassHealth, the claim will be denied for error 856 or 857 (Date of Service Exceeds 36 Months) on a paper RA. A claim with this error cannot be appealed.

Final Deadline Exceeded Appeal Procedures

To be eligible for appeal, your claim must have been denied for error code 853 or 855 (Final Deadline Exceeded). The appeal must be filed within 30 days of the date that appears on the remittance advice on which your claim first denied with error code 853 or 855. In order for your appeal to be approved, you must demonstrate that the claim was denied or underpaid as a result of MassHealth error, and could not otherwise be timely resubmitted.

If you wish to file an appeal, send a cover letter, a corrected claim form, all the remittance advices the claim has appeared on (including the 853/855 denial) and any other supporting documentation to the following address.

MassHealth ATTN: Final Deadline Appeals Unit 100 Hancock Street, 6th Floor Quincy, MA 02171

You can inquire on the status of your appeal request by sending an e-mail to <u>fdeappeals@state.ma.us</u> or by calling 617-847-3115.