



**BlueCross BlueShield  
of Oklahoma**

### **Instructions for filing corrected claims**

Currently, all **CMS-1500** corrected claims must be submitted on paper with the Provider Request for Claim Appeal/Reconsideration Review Form attached to the top of the claim. The form is available in the provider section of the Blue Cross and Blue Shield of Oklahoma Web site at [www.bcbsok.com](http://www.bcbsok.com). This new interactive form can be filled out, printed and mailed to the appropriate address listed on the form. To help ensure timely and accurate processing of the correction and reduce duplicate claim denials, please check the “corrected claim” box and list the corrections. Claims that are submitted with a “corrected claim” stamp or notation are not recognized by our system and could delay the processing of your corrected claim.

**UB-04** corrected claims should be submitted electronically, whenever possible. If the UB-04 corrections must be filed on paper, please attach the Provider Request for Claim Appeal/Reconsideration Review Form and follow the instructions listed above. In addition, when filing a corrected UB-04 claim, please make sure to bill with the appropriate type of bill indicating that the claim is a corrected claim (i.e. 117 vs. 111).