



NETWORK *Notification*

Notice Date: April 11, 2025
To: Ohio D-SNP, Marketplace, Medicaid and MyCare Providers
From: CareSource
Subject: Corrected Claim Submission Requirements

Summary

In order to provide faster claims processing and payment, CareSource is reminding providers about the requirements for submitting corrected claims. Corrected claims should be submitted when changing or adding information.

Impact

Billing Requirements for All Lines of Business:

- **Submission Channels:** Always submit through the appropriate channel based on the line of business: Availity or Electronic Data Interchange (EDI).
- **Claim Dispute Process:** Do not submit corrected claims through the claim dispute/reconsideration process.
- **Original Reference Number:** Always include the original claim number populated (or the most recent claim number iteration for claims that have been previously corrected and/or adjusted).
- **Timeliness:** Claims received with a correction of a previously adjudicated claim must be received by CareSource no later than 365 calendar days from the date of the remit of the claim number that is being corrected. For additional information, please refer to the Provider Manual for the corresponding line of business.

Not only does the inclusion of the accurate (most recent) Original Reference Number expedite processing, it also prevents duplicate claim denials caused by incorrect submission of corrected claims. Corrected claims received without the latest iteration of claim number populated in Claim Reference Number will be systemically rejected.

Electronic Claims Submission:

- **Ohio Medicaid:** Providers may submit claims, eligibility inquiries, claim status inquiries, and associated attachments using EDI by being a trading partner (TP) authorized by the Ohio Department of Medicaid (ODM) or by contracting with an ODM authorized TP. More information can be found at: [ODM Trading Partners](#).
- **All Other Lines of Business:** Claims should be submitted through the CareSource trading partner, Availity.

CareSource Payer IDs:

CareSource payer IDs for EDI transactions are noted in the chart below.

State	State	LOB	Payer ID	PO Box
OH	Ohio	MyCare, D-SNP, Marketplace	31114	P.O. BOX 8730 Dayton, OH 45401-8730
OH	Ohio	Medicaid	0003150	P.O. BOX 8730 Dayton, OH 45401-8730
IN	Indiana	All	INCS1	P.O. BOX 3607 Dayton, OH 45401-3607
KY	Kentucky	All	KYCS1	P.O. BOX 824 Dayton, OH 45401-824
GA	Georgia	All	GACS1	P.O. BOX 803 Dayton, OH 45401-803
WV	West Virginia	All	WVCS1	P.O. BOX 804 Dayton, OH 45401-804
NC	North Carolina	All	NCCS1	P.O. Box 967 Dayton, OH 45401
AR	Arkansas	All	ARCS1	P.O. Box 2308 Dayton, OH 45401
MS	Mississippi	Medicaid	MSMCDCS1	P.O. Box 1362 Dayton, OH 45401
MI	Michigan	Medicaid	MIMCDCS1	HAP Claims P.O. Box 1186 Dayton, OH 45401
MI	Michigan	Medicare	MIMCRCS1	HAP Claims P.O. Box 1186 Dayton, OH 45401
MI	Michigan	Marketplace	MICS1	HAP Claims P.O. Box 1186 Dayton, OH 45401
WI	Wisconsin	Marketplace	77170	P.O. Box 1305 Dayton, OH 45401-130

Thank you for your attention to these important guidelines. By following these requirements, you help us ensure a smoother claims process and faster payments.

Questions?

For additional questions, please contact Provider Services at the appropriate number below:

- D-SNP: **1-833-230-2176**, Monday through Friday, 8 a.m. to 6 p.m. Eastern Time (ET)
- Marketplace: **1-833-230-2101**, Monday through Friday, 8 a.m. to 6 p.m. ET
- Medicaid: **1-800-488-0134**, Monday through Friday, 7 a.m. to 8 p.m. ET
- MyCare: **1-800-488-0134**, Monday through Friday, 8 a.m. to 6 p.m. ET

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