

## How to Submit a Refund or Retraction Request to Mass General Brigham Health Plan

### **Scenario 1: Claim billed to Mass General Brigham Health Plan in error**

- The provider can submit a cancel claim via EDI (Frequency Code 8)
- Cancel claim request can be made after claims filing limit has expired

### **Scenario 2: Corrected claims submission**

- For claims submitted with errors/omissions on the original claim submission
- Corrected EDI claim (Frequency Code 7) should be submitted within 90 days of Explanation of Payment (EOP)
- Claims past 90 days from the EOP should be submitted via paper as a Request for Review

### **Scenario 3: Request for Review of a Claim by Mass General Brigham Health Plan**

- Provider submits a [Request for Review Form](#) noting a retraction request
- The claim(s) are retracted, Mass General Brigham Health Plan applies an advance to the provider's account to retrieve the outstanding balance on the next payment cycle

### **Scenario 4: Mailing a refund check to Mass General Brigham Health Plan**

- If you receive a notice from Mass General Brigham Health Plan regarding monies owed, or you have insufficient claims activity with Mass General Brigham Health Plan to offset the balance due.
- Mass General Brigham Health Plan will accept the refund check if recoupment is not possible by way of offset against future claim payments
- The Provider can mail check to Mass General Brigham Health Plan | 399 Revolution Drive, Somerville, MA 02145.
- **Note for providers: Confirm correct fee schedule for Date of Service in question before submitting a refund request.**

## Mass General Brigham Health Plan Initiated Refund/Retraction

### **Scenario 1: Mass General Brigham Health Plan processes a claims retraction**

- Mass General Brigham Health Plan may process a claims retraction to correct a previously processed claim. Retraction reasons may include but are not limited to changes in rates, new coding requirements, or member eligibility changes.
- Claims retractions are identified via your Explanation of Payment (EOP)

### **Scenario 2: Provider claims audits**

- General post payment claims audits are conducted to ensure the accuracy of charges and the alignment of claims reimbursement with Mass General Brigham Health Plan's policies, Provider Agreements, Payment Guidelines, and applicable nationally recognized medical claims reimbursement and administration policies.
- For more information, please reference the following Provider resources on <https://massgeneralbrighamhealthplan.org/providers>
  - [Provider Manual](#)
  - [Claims Review Form](#)
  - [Claims landing page](#)