

# ATTENTION: PRACTICE/OFFICE MANAGERS

## VA Claims Timely Filing Deadline Now Extended

**If your office has VA claims that were denied more than 180 days ago due to timely-filing requirements, the deadline to request reconsideration is now Feb. 19, 2021.**

Starting Oct. 1, 2020, providers who initially submitted a claim to the wrong Department of Veterans Affairs (VA) payer (e.g., VA or Optum Public Sector Solutions, Inc. instead of TriWest) were given more leeway with VA's 180-day timely filing limit. The deadline to resubmit those claims for reconsideration has been extended to Feb 19, 2021.

After Feb. 19, 2021, requests for reconsideration of claims that were denied because they were sent to the wrong payer must be submitted within 180 days of the denial.

Follow these instructions to successfully correct your claim submission:

1. Retain a copy of the remittance advice from original submission to wrong entity. This serves as documentation of timely filing and should be retained to ensure that the original submission date can be confirmed in the event of an audit.
2. If submitting a Paper Claim: Print out and complete the Provider Timely Filing Form on TriWest's Payer Space on Availity, and submit the Provider Timely Filing Form with your paper claim to WPS MVH.
3. If submitting an Electronic Claim via EDI: Use an indicator "9" on the 837 in the data element field CLM20 to indicate resubmission for timely filing. The "9" indicator definition is Original Claim rejected or denied for reason unrelated to the billing limitation rules. Claims with the "9" resubmission indicator will bypass automatic timely filing denials.
4. Submit the claim to WPS MVH (TriWest) within 180 days from the date of the denial by the incorrect VA payer.

Claims that do not meet the above requirements will be denied if submitted after 180 days. TriWest can no longer accept remittance advice documentation from non-VA payers, such as TRICARE, Medicare, or other health insurers.