

Type of Transaction	Purpose	Timeliness Constraints		Additional Billing Requirements	
		DMH	SUPT	DMH	SUPT
Initial	Initial Claim for Service	12 months from the date of service	12 months from the month of service starting 7/1/23	In certain circumstances, claims can be submitted after the 12-month deadline. See delay reason codes.	In certain circumstances, claims can be submitted after the 12-month deadline. See delay reason codes.
Void	To "Void" a previously claimed service	None	None	<p>1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the void transaction. Claims that have not been finalized cannot be voided.</p> <p>2 - Billing Provider EIN and Beneficiary CIN must match the original claim. In addition, two or more of the following elements must match the original claim: Procedure Code, Date of Service, Place of Service, and Facility NPI.</p> <p>3 - An original claim can be successfully voided only once.</p> <p>4- Only previously approved claims can be voided.</p>	<p>1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the void transaction. Claims that have not been finalized cannot be voided.</p> <p>2 - An original claim can be successfully voided only once.</p> <p>3- Only previously approved claims can be voided.</p>
Replacement	To "Replace" a previously Approved or Denied Claim'	15 months from the month of service	15 months from the month of service. DHCS updated their system for services 7/1/23 going forward on June 4th, 2024.	<p>1 - The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the replacement transaction. Claims that have not been finalized cannot be voided.</p> <p>2 - Billing Provider EIN, Beneficiary CIN, and number of service lines must match. In addition, two or more of the following elements must match the original claim: Procedure Code or Revenue Code, Date of Service, Place of Service, and Facility NPI.</p>	The Payer Claim Control Number of the target claim must be submitted in the Original Reference Number field of the replacement transaction.

Rebill	To "Rebill" a previously claimed initial claim for a service	12 months from the date of service	12 months from the date of service starting 7/1/23	None	None
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