



New Requirements for Claim Submission and Appeals Filing Deadlines

Effective Oct. 1, 2016, UnitedHealthcare Community Plan will have new timeline requirements for filing claim submissions and dispute or appeal requests.

To help ensure your claims are paid and your appeals and disputes are heard in a timely manner, please submit your requests within these timeframes:

- Original and corrected claims must be submitted within 365 days from the date of service.
- Claims that were processed by a primary carrier must be submitted within 365 days from the date of the primary carrier's notice of payment or denial.
- Level 1 Disputes or Claim Reconsideration requests must be submitted within 90 days from the date of the dissatisfaction or explanation of payment.
- Level 2 Disputes or appeals must be submitted within 30 days from the date of the first level or claim reconsideration letter of determination.

For more information, please see the Provider Manual at **UHCommunityPlan.com** > For Health Care Professionals > Louisiana > Provider Training Information > Manuals.

If you have questions, please call **866-675-1607**. Thank you.