

Filing a Dental Claim Adjustment

If you need to adjust, or correct, a previously *adjudicated* claim, the adjustment **must** contain the following three items:

1. Frequency Code "7" (Adjustment) in the CLM05-3 segment in the 2300 Loop of the electronic claim file.

CLM*2181075TC*289*11:B:7*Y*A*Y*Y~**

2. The BCBSSC claim number, (aka "ICN" or "DCN") of the previously paid claim in an REF segment with an F8 qualifier in the 2300 Loop of the electronic claim file.

REF*F8*216504M0J0000~

3. A brief description of the reason for the adjustment (new service line, different tooth number, etc.) in an NTE segment in the 2300 Loop of the electronic claim file.

NTE*ADD*SERVICE LINE 1 – CHANGE PROCEDURE CODE TO D2110~

Note: The location of these three items will vary, depending on your dental software. Contact your software vendor for where these three fields will be found in your dental claim.

For questions or concerns, contact BCBSSC EDI Services at edi.services@bcbssc.com.