

# Submit Basic Bill

This How-To is for submission of claims for Social Services. For information on how to submit Social Service Medical services, please see the How-To titled “*Submitting Social Service Medical Claims*”.

The “Submit Basic Bill” How-To provides instructions on:

- ♦ **Pay Periods** ..... 2
- ♦ **Unit Types** ..... 5
- ♦ **Date Range** ..... 6
- ♦ **Submit Basic Bill** ..... 7
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**Note:**

*Providers should turn **off** popup blockers before logging into ProviderOne.*

*Having popups on or enabled will not allow full functionality of claims submissions.*

# Pay Periods

With ProviderOne, you choose when you get paid. You can enter claims at anytime.

ProviderOne pays on Fridays. Claims submitted by **Tuesdays at 5 pm** will be paid as follows:

- ◆ If you have EFT (Electronic Fund Transfer/ Direct Deposit) your payment will be in your account on **Friday**,
- ◆ If you are paid by paper check, it will be mailed on **Friday**,
- ◆ When you are paid, your Remittance Advice (RA) will be posted in ProviderOne on **Friday**.

**Note:**

*Claims successfully entered after the Tuesday deadline of 5pm would pay out the the following week on Friday.*

*Holidays may delay receipt of paper warrants dependent on mailing schedules. Check with you local post of-fice for more information about holiday mailing schedules.*

## Weekly Pay Schedule

**Sun Mon Tue Wed Thu Fri Sat**

				<b>1</b>	<b>2</b>	<b>3</b>
<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>
<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>
<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	

**Deadline is 5pm each Tuesday to submit claims and receive payment the following Friday.**

**Possible paydays. Refer to your method of payment description for more details.**

# Pay Periods

ProviderOne pays on Fridays. Claims must be submitted by **Tuesdays at 5 pm** for payment the following **Friday**.

## To be paid every two weeks:

- ◆ Choose your Friday paydays.
- ◆ Submit your claims within the 7 day period ending in Tuesday of the payment week.
- ◆ When you are paid, your Remittance Advice (RA) will be posted in ProviderOne on **Friday**.

### Note:

*Claims successfully entered after the Tuesday deadline of 5pm would pay out the the following week on Friday.*

*Holidays may delay receipt of paper warrants dependent on mailing schedules. Check with you local post office for more information about holiday mailing schedules.*

## Two Week Pay Schedule

**Sun Mon Tue Wed Thu Fri Sat**

				<b>1</b>	<b>2</b>	<b>3</b>
<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>
<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>	<b>17</b>
<b>18</b>	<b>19</b>	<b>20</b>	<b>21</b>	<b>22</b>	<b>23</b>	<b>24</b>
<b>25</b>	<b>26</b>	<b>27</b>	<b>28</b>	<b>29</b>	<b>30</b>	

**Deadline is 5pm each Tuesday to submit claims and receive payment the following Friday.**

**Possible paydays. Refer to your method of payment description for more details.**

# Pay Periods

ProviderOne pays on Fridays. Claims must be submitted by **Tuesdays at 5 pm** for payment the following **Friday**.

**To be paid monthly:**

- ◆ Choose your Friday payday.
- ◆ To receive payment the first week of the following month, submit your claims within the first 7 day period of that month (see calendar).
- ◆ When you are paid, your Remittance Advice (RA) will be posted in ProviderOne on **Friday**.

**Note:**

Month of service	First Available Claim Dates of New Month
5pm Tuesday Deadline	Pay Date

*Claims successfully entered after the Tuesday deadline of 5pm would pay out the the following week on Friday.*

*Claiming for an entire month will result in varying pay dates throughout the year depending on what day of the week the month ends and its relationship to the first Tuesday and Friday of the new month.*

## Month Service Was Performed

Sun	Mon	Tue	Wed	Thu	Fri	Sat
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1

## Following Month

Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Claims submitted before the first available **Tuesday** will process that evening for payment the following Friday.

You may not bill for future dates. To bill for an entire month, submit clams the first available date of the new month.

## Unit Types:

**1/4 hour** = 15 min.

**1/2 hour** = 30 min.

**Hour** = 60 min.

**Each** = Each occurrence of the service.

**Per visit** = Every visit that led to performance of the service. *(May have multiple visits on same day.)*

**Mile** = Each mile driven to provide the service.

**Daily** = Each day the service was provided in a given month.

**Monthly** = Each month the service was provided. *(See your authorization for the unit.)*

- ◆ Each service line is a single day. *(See date range for daily & monthly unit types pg. 6.)*
- ◆ The number of units provided on each day of service can be more than 1 (except daily).

## Date Range (Daily and Monthly Only):

Date range from and to dates must be consecutive (*in a row with no breaks*) within the same calendar month, and daily or monthly units.

The number of units must equal the number of days in the range for daily unit types, or 1 unit for the month within the range for monthly unit types.

When you Add Service Line, the date range will be a single service line. A note will appear on your billing page telling you that the date range will be broken down into individual daily service lines when the claim is processed (*more details in submitting basic bill section page*).

### **A date range, or span, can only be used when:**

- ◆ *Unit Type = daily or monthly.*
- ◆ *Days were worked consecutively (in a row with no breaks).*
- ◆ *The date range is within the same calendar month.*
- ◆ *The number of units match the number of days (daily units).*
- ◆ *For monthly, 1 monthly unit per range (max. date range is one calendar month, less than month date ranges will be prorated by ProviderOne).*

# Submit Basic Bill

This section is on how to Submit a Basic Bill.

This process is direct entry, meaning that you will fill in all the needed billing information into a billing form.

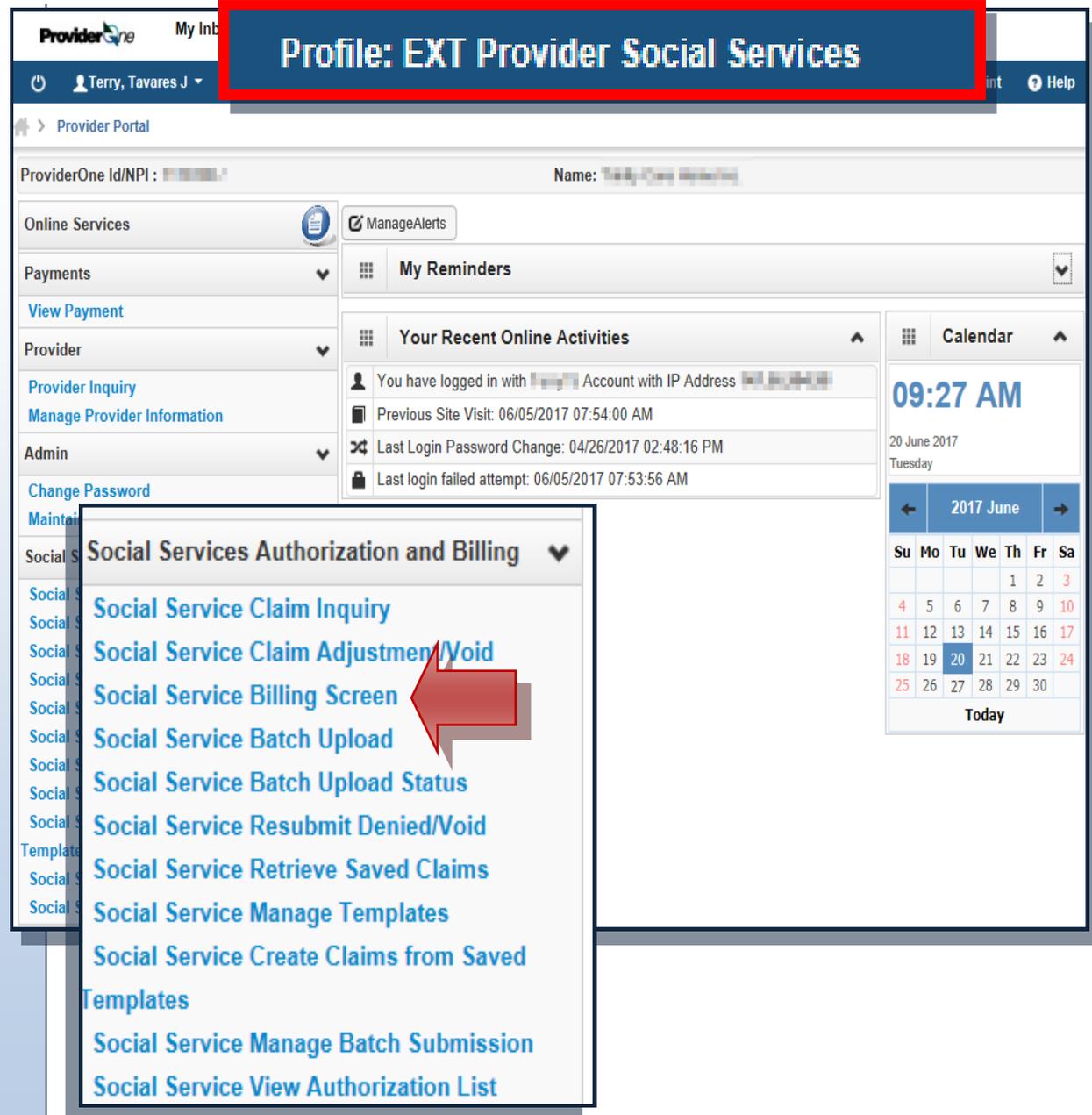
The direct entry process is the basis for building and submitting templates and for adjusting claims.

To submit a basic bill:

- ◆ Login to ProviderOne using the 'EXT Provider Social Services' profile.
- ◆ Click on Social Service Billing Screen.

**NOTE:**

*You must turn off your pop-up blocker before you begin billing.*



The screenshot shows the ProviderOne web portal interface. At the top, a blue banner displays the profile name: "Profile: EXT Provider Social Services". Below this, the user's name "Terry, Tavares J" is visible. The main navigation area includes sections for "Online Services", "Payments", "Provider", "Admin", and "Social Services Authorization and Billing". A dropdown menu is open under "Social Services Authorization and Billing", listing various options such as "Social Service Claim Inquiry", "Social Service Claim Adjustment/Void", "Social Service Billing Screen", "Social Service Batch Upload", "Social Service Batch Upload Status", "Social Service Resubmit Denied/Void", "Social Service Retrieve Saved Claims", "Social Service Manage Templates", "Social Service Create Claims from Saved Templates", "Social Service Manage Batch Submission", and "Social Service View Authorization List". A red arrow points to the "Social Service Billing Screen" option. On the right side of the portal, there is a "My Reminders" section, "Your Recent Online Activities" log, and a calendar for June 2017 showing the current time as 09:27 AM on Tuesday, June 20, 2017.

# Submit Basic Bill

The basic billing screen appears.

Enter the following:

- ◆ **Provider ID** (7 digit domain plus 2 digit location code)
- ◆ **Client ID** (Client ID ends in WA)
- ◆ **Authorization Number**

## NOTE:

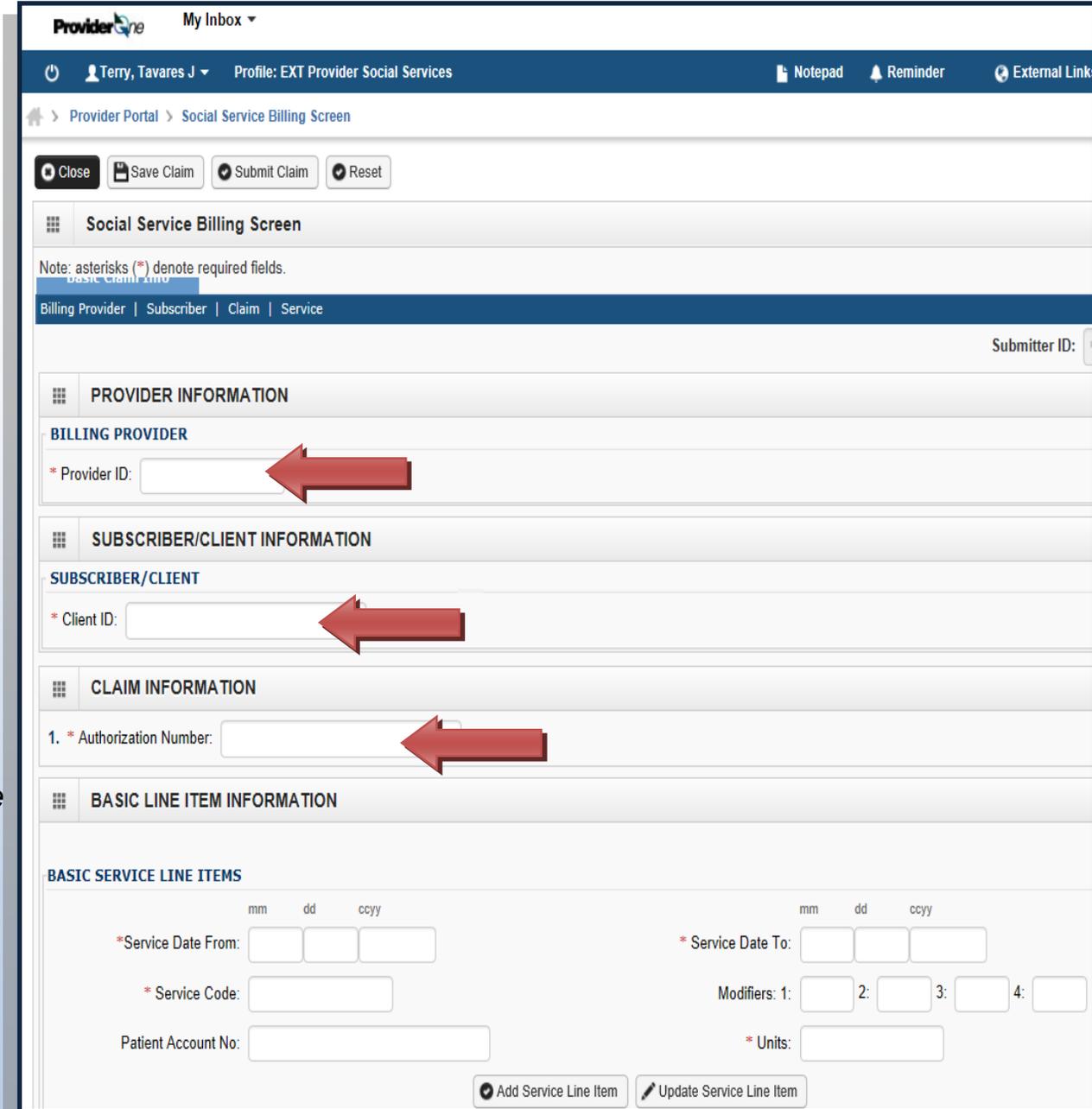
You must turn off your pop-up blocker before you begin billing.

Asterisks (\*) denote required fields.

The billing information is taken directly from the authorization.

Exporting the authorization to an Excel file allows you to copy and paste information for accuracy.

**Check your authorization before each billing. Authorizations may change.**



ProviderOne My Inbox ▾  
 Terry, Tavares J ▾ Profile: EXT Provider Social Services  
 Notepad Reminder External Links  
 Provider Portal > Social Service Billing Screen  
 Close Save Claim Submit Claim Reset  
 Social Service Billing Screen  
 Note: asterisks (\*) denote required fields.  
 Billing Provider | Subscriber | Claim | Service  
 Submitter ID:   
**PROVIDER INFORMATION**  
**BILLING PROVIDER**  
 \* Provider ID:   
**SUBSCRIBER/CLIENT INFORMATION**  
**SUBSCRIBER/CLIENT**  
 \* Client ID:   
**CLAIM INFORMATION**  
 1. \* Authorization Number:   
**BASIC LINE ITEM INFORMATION**  
**BASIC SERVICE LINE ITEMS**  
 \*Service Date From: mm dd ccyy      
 \* Service Date To: mm dd ccyy      
 \* Service Code:  Modifiers: 1:  2:  3:  4:   
 Patient Account No:  \* Units:   
 Add Service Line Item Update Service Line Item

# Submit Basic Bill

## Under 'Basic Service Line Information',

Enter the following:

- ◆ **Service Date From**
- ◆ **Service Date To**
- ◆ **Service Code**
- ◆ **Modifier** (If applicable)
- ◆ **Units** (see unit types)

Once billing information is entered, select '**Add service Line Item**'.

## NOTE:

*You must turn off your pop-up blocker before you begin billing. Asterisks (\*) denote required fields.*

*The billing information is taken directly from the authorization. Exporting the authorization to an Excel file allows you to copy and paste information for accuracy.*

***Check your authorization before each billing. Authorizations may change.***

☰ **BASIC LINE ITEM INFORMATION**

**BASIC SERVICE LINE ITEMS**

	mm	dd	ccyy		mm	dd	ccyy						
*Service Date From:	01	01	2017	←	* Service Date To:	01	31	2017	←				
* Service Code:	T1020			←	→	Modifiers: 1:	U1	2:		3:		4:	
Patient Account No:					* Units:	31			←				

Add Service Line Item
 

 Update Service Line Item

*Monthly billing shown in picture*

# Submit Basic Bill

ProviderOne will display a message in **red** that:

**The service line will be split into separate service lines; one for each day within the span you have entered** (*applicable when submitting more than one date of service*).

## Note:

*ProviderOne will display directional information before this message if any data entered is incorrect, i.e., Provider ID, Client ID, Authorization Number or if Service Date To is earlier than Service Date From. Correct data per the message and continue.*



**The service line will be split into separate service lines one for each day within the span you have entered.**



**Social Service Billing Screen**

# Submit Basic Bill

The **'Basic Service Line Information'** clears. This allows entry of any subsequent service lines before submitting your claim, i.e., billing for multiple months.

**Additional service lines must be for the same authorization. Different service codes are allowed if they are from the same authorization.**

A claim service line appears under **'Previously Entered Line Information'**. The claim service line will show service dates, service code and modifier, as well as units entered. The total charges submitted will also be available to view.

**Check the line information for accuracy.**

**BASIC SERVICE LINE ITEMS**

\*Service Date From:         \* Service Date To:

\* Service Code:       Modifiers: 1:  2:  3:  4:

Patient Account No:       \* Units:

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 5398.03

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete



To enter additional service lines, there are 2 options.

## Option 1:

- ◆ Enter basic service line items in the cleared fields

- ⇒ *Service Date From/To,*
- ⇒ *Service Code,*
- ⇒ *Modifier,*
- ⇒ *Units.*

### Note:

Each line must be for the **same authorization number**. Different Service Codes can be used as long as they are from the same authorization number. You can add up to **31** claim service lines per bill.

- ◆ Click on '**Add Service Line Item**' (The new service line appears. Shown below as line #2.)

**BASIC SERVICE LINE ITEMS**

\*Service Date From:         \* Service Date To:

\* Service Code:       Modifiers: 1:  2:  3:  4:

Patient Account No:       \* Units:

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 10273.67

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete

Monthly billing shown in picture

## Option 2:

- Click on a **service line number**.
- The entered service line information populates.
- Enter **new data**.
- Click on 'Add Service Line Item'.
- New service line appears (*shown below as line #3*).

### Note:

Each line must be for the **same authorization number**. Different Service Codes can be used as long as they are from the same authorization number. You can add up to **31** claim service lines per bill.

**BASIC SERVICE LINE ITEMS**

\*Service Date From: mm dd ccy 03 01 2017      \*Service Date To: mm dd ccy 03 31 2017  
 \* Service Code: T1020      Modifiers: 1: U1 2: 3: 4:  
 Patient Account No:      \* Units: 31

↑

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 15671.70

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete
3	03/01/2017	03/31/2017	T1020	U1				31	Delete

Monthly billing shown in picture

# Edit Service Line

## Editing a Service Line:

You may see that information previously entered has an error. To correct the data so that the service line is correct:

- ◆ Select the line number you wish to edit.
- ◆ The service line data appears.
- ◆ Make the needed correction to the service line data.
- ◆ Now select 'Update Service Line Item'.

### Note:

The new data you entered will now be shown on the chosen line (line #2 shown in picture).

**BASIC SERVICE LINE ITEMS**

\*Service Date From:    \* Service Date To:

\* Service Code:  Modifiers: 1:  2:  3:  4:

Patient Account No:  \* Units:

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 15671.70

Line No	Service Dates		Service Code	Modifiers				Units	
	From	To		1	2	3	4		
1	01/01/2017	01/31/2017	T1020	U1				31	Delete
2	02/01/2017	02/28/2017	T1020	U1				28	Delete
3	03/01/2017	03/31/2017	T1020	U1				31	Delete

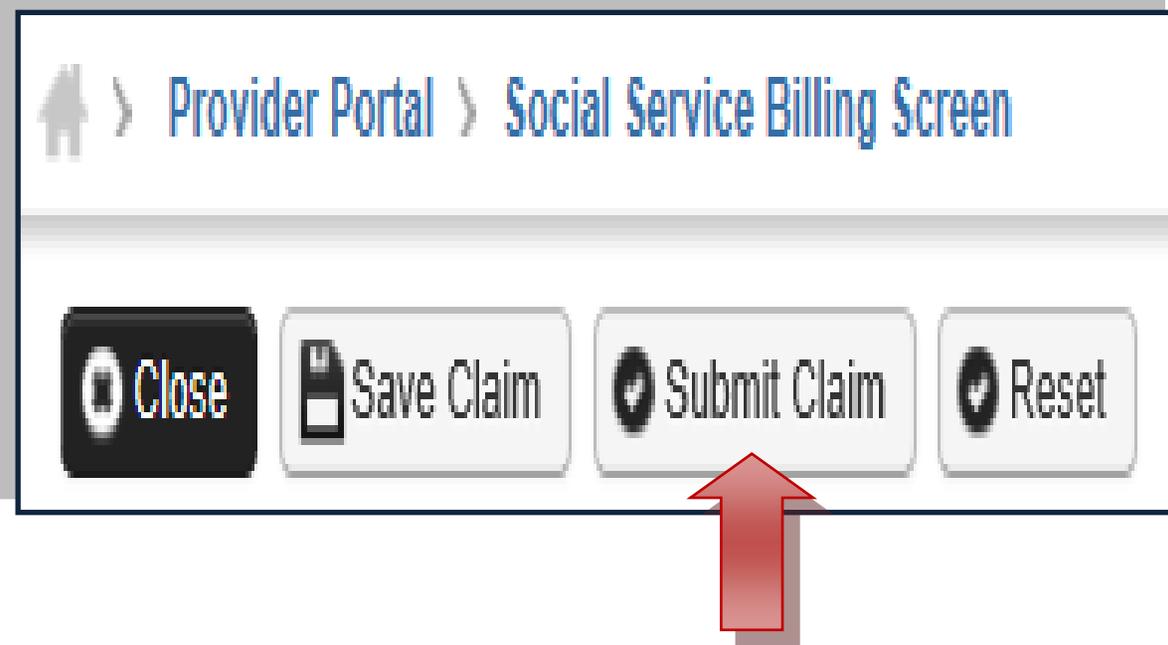
Monthly billing shown in picture

# Submit Basic Bill

Once all service line information is entered and checked for accuracy, click '**Submit Claim**' at the top of the screen.

Your pop-up blockers must be turned off to allow the Claim Detail screen to appear.

If the pop-up blockers are not turned off, the screen will flash and no pop-up will appear which allows you to complete billing.



**Note:**

*If submitting a claim with the pop-up blockers on, the claim information will remain on the screen. Providers should turn off popup blockers before logging into ProviderOne.*

*Attempting to click 'Submit Claim' again will return an error message that the information you are trying to submit, has been queried by another user.*

*To remedy this, log out of ProviderOne, turn off your browser's pop-up blockers, then login to ProviderOne again and return to the billing screen to submit a new claim.*

# Submit Basic Bill

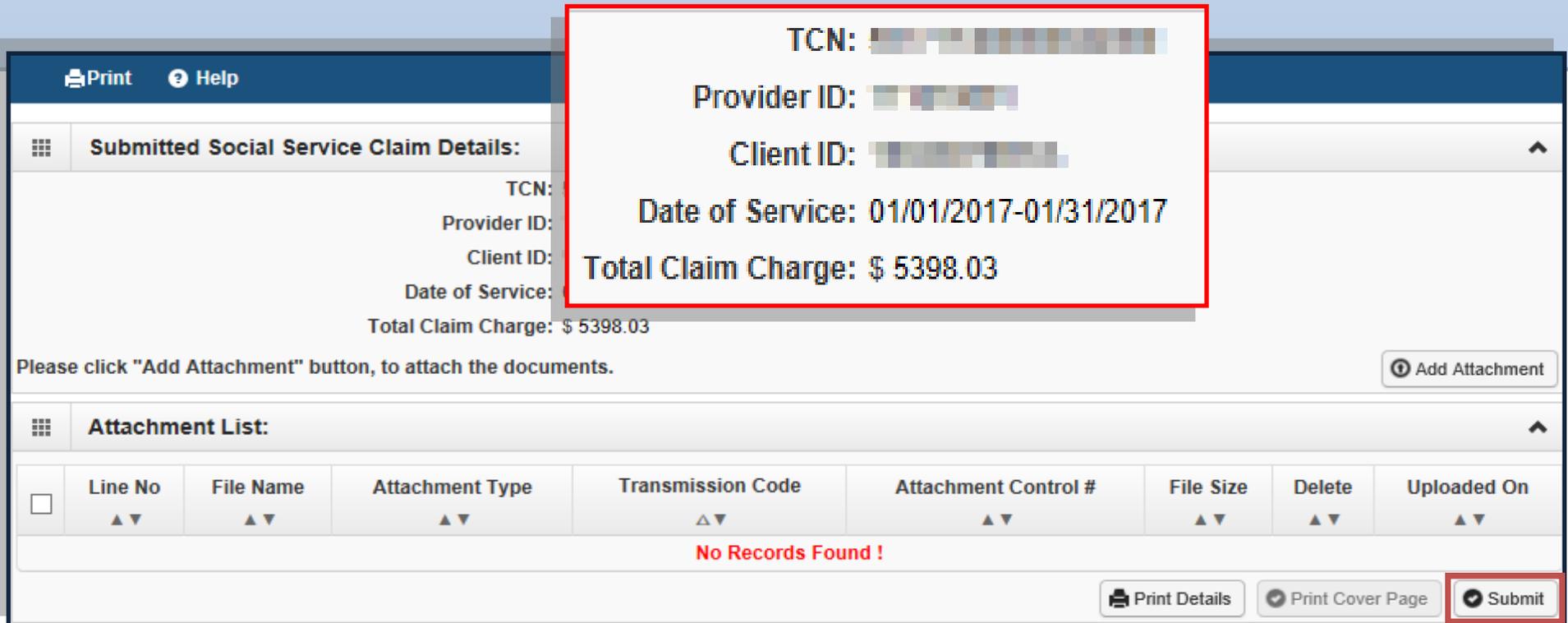
With the pop-up blockers turned off, select **'Submit Claim'**. The **'Submitted Social Service Claim Details'** screen appears.

Here you will see the **'Transaction Control Number'** (TCN). The TCN is the **18** digit unique identifier for each submitted claim. The TCN is used to identify and track claims.

You will also see the **'Provider ID'**, **'Client ID'**, **'Date of Service'** and **'Total Claim Charge'**.

## Note:

*No records found refers to attachments such as backup documentation. Social service providers will not add attachments. Social Service Medical providers may need to add attachments. Refer to your service billing guides for more information.*



The screenshot shows the 'Submitted Social Service Claim Details' screen. A red box highlights the following information:

- TCN: [Redacted]
- Provider ID: [Redacted]
- Client ID: [Redacted]
- Date of Service: 01/01/2017-01/31/2017
- Total Claim Charge: \$ 5398.03

Below the highlighted information, the screen displays the following text:

TCN: [Redacted]  
 Provider ID: [Redacted]  
 Client ID: [Redacted]  
 Date of Service: 01/01/2017-01/31/2017  
 Total Claim Charge: \$ 5398.03

Please click "Add Attachment" button, to attach the documents. [Add Attachment](#)

**Attachment List:**

Line No	File Name	Attachment Type	Transmission Code	Attachment Control #	File Size	Delete	Uploaded On
No Records Found !							

At the bottom right, there are three buttons: [Print Details](#), [Print Cover Page](#), and [Submit](#) (highlighted with a red box).

# Submit Basic Bill

When you see the **Submitted Social Service Details** or **TCN Pop-Up** screen you will want to record the information. You may print, print to a file on your machine, or record this information in another manner.

**\*\*\*However, your claim has not yet been submitted\*\*\***

To submit the claim, you must click on the 'Submit' button (located in the bottom right corner of the page) to complete the claims submission and send the claim to ProviderOne for processing.

## Note:

No records found refers to attachments such as backup documentation. Social service providers will not add attachments. Social Service Medical providers may need to add attachments. Refer to your service billing guides for more information.

Print Help

**Submitted Social Service Claim Details:**

TCN: [REDACTED]  
Provider ID: [REDACTED]  
Client ID: [REDACTED]  
Date of Service: 01/01/2017-01/31/2017  
Total Claim Charge: \$ 5398.03

Please click "Add Attachment" button, to attach the documents. Add Attachment

**Attachment List:**

Line No	File Name	Attachment Type	Transmission Code	Attachment
No Records Found !				

Print Details Print Cover Page Submit

# Save Basic Bill

You may need to stop your work and return to complete it at a later time.

## To Save a Basic Bill:

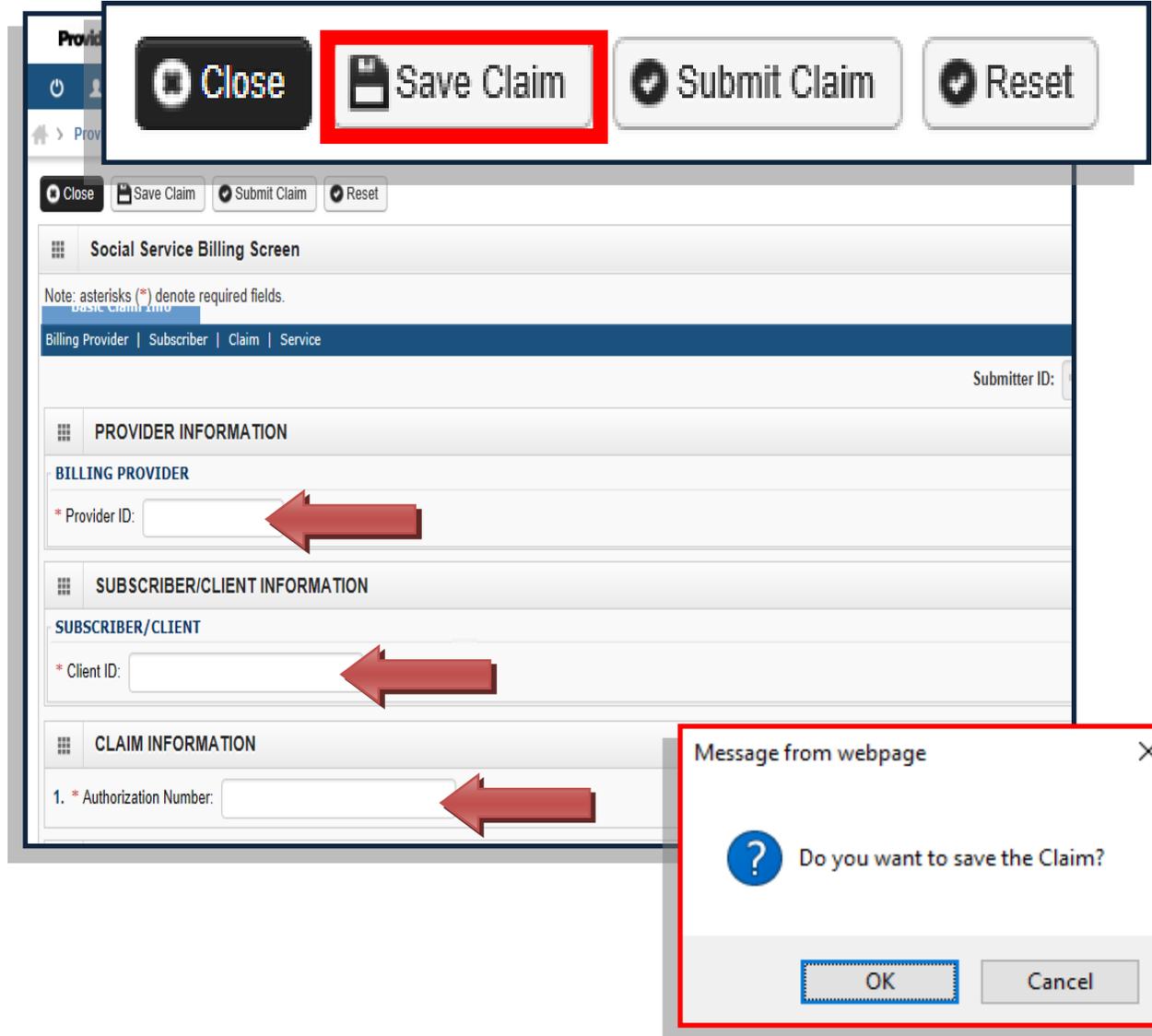
- ◆ Navigate to the Social Service Billing Screen.
- ◆ Enter the 'Provider ID'
- ◆ Enter the 'Client ID'
- ◆ Enter the 'Authorization Number'
- ◆ Click on 'Save Claim'  
(Located near the top right of the page.)

Confirm that you would like to save the claim by pressing 'Ok' on the pop-up message.

## Note:

To save a claim, at minimum, you must fill in the:

- ◆ Provider ID
- ◆ Client ID
- ◆ Authorization Number



The screenshot shows the 'Social Service Billing Screen' interface. At the top right, there are four buttons: 'Close', 'Save Claim' (highlighted with a red box), 'Submit Claim', and 'Reset'. Below the buttons, the screen is divided into sections: 'PROVIDER INFORMATION', 'SUBSCRIBER/CLIENT INFORMATION', and 'CLAIM INFORMATION'. Each section has a corresponding input field with a red arrow pointing to it: 'Provider ID' in the 'PROVIDER INFORMATION' section, 'Client ID' in the 'SUBSCRIBER/CLIENT INFORMATION' section, and 'Authorization Number' in the 'CLAIM INFORMATION' section. A pop-up dialog titled 'Message from webpage' is displayed in the bottom right corner, containing a question mark icon and the text 'Do you want to save the Claim?'. The dialog has two buttons: 'OK' and 'Cancel'.

# Retrieve Saved Claim

In order to retrieve a claim you have saved, navigate to the provider portal and do the following.

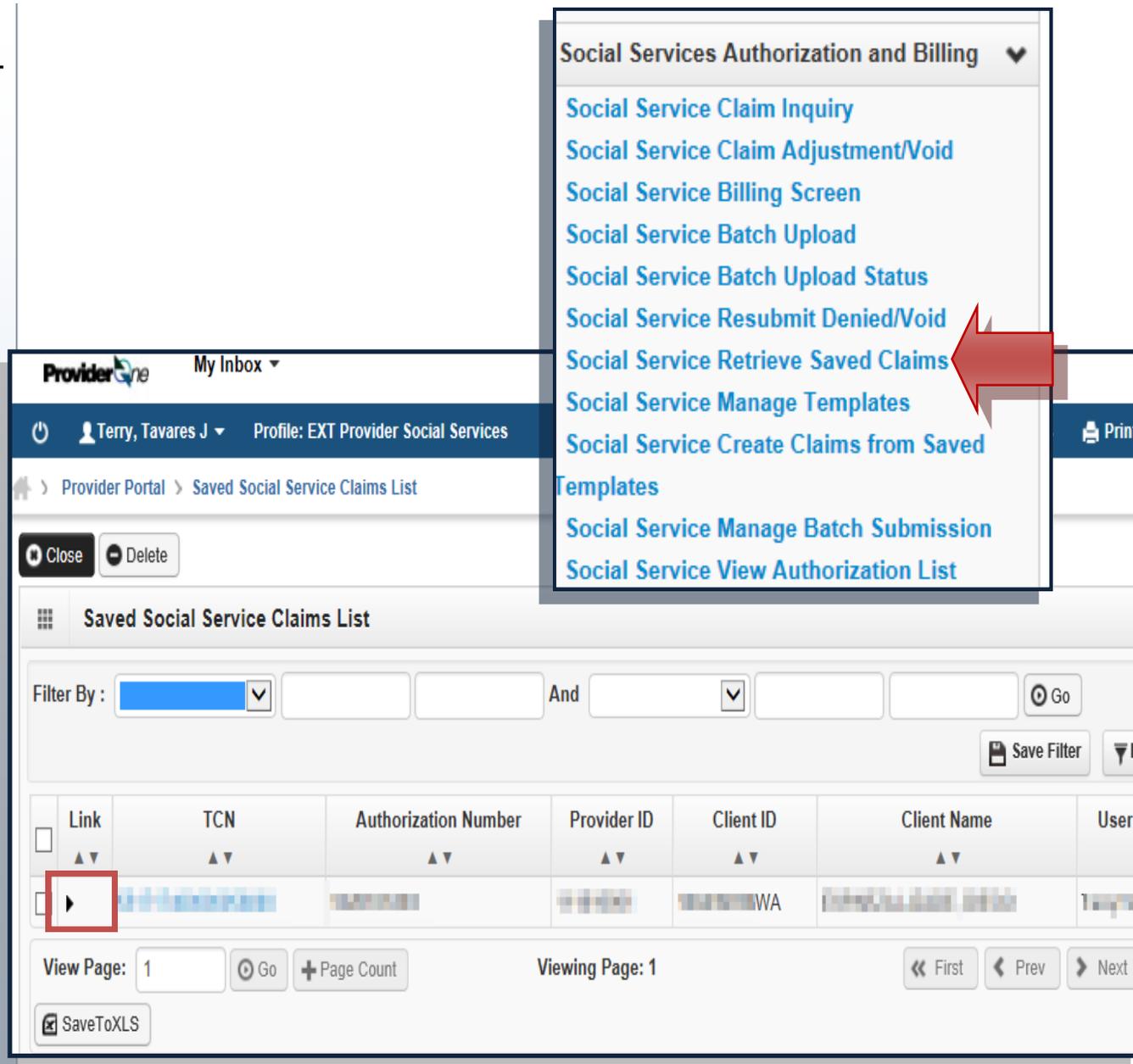
## To Retrieve a Saved Claim:

- Click on 'Social Service Retrieve Saved Claims'.
- The 'Saved Social Service Claims List' appears.
- Click on the  next to the claim you would like to retrieve.

## Note:

You can see that a TCN has been created for the claim.

However, this TCN is not known to ProviderOne for claims processing until you complete the claim submission.



Social Services Authorization and Billing ▾  
 Social Service Claim Inquiry  
 Social Service Claim Adjustment/Void  
 Social Service Billing Screen  
 Social Service Batch Upload  
 Social Service Batch Upload Status  
 Social Service Resubmit Denied/Void  
 Social Service Retrieve Saved Claims  
 Social Service Manage Templates  
 Social Service Create Claims from Saved Templates  
 Social Service Manage Batch Submission  
 Social Service View Authorization List

ProviderOne My Inbox ▾  
 Terry, Tavares J ▾ Profile: EXT Provider Social Services  
 Provider Portal > Saved Social Service Claims List  
 Close Delete

**Saved Social Service Claims List**  
 Filter By: [dropdown] [input] And [dropdown] [input] [input] Go Save Filter

Link	TCN	Authorization Number	Provider ID	Client ID	Client Name	User
	[blurred]	[blurred]	[blurred]	[blurred]	[blurred]	[blurred]

View Page: 1 Go + Page Count Viewing Page: 1 First Prev Next SaveToXLS

# Retrieve Saved Claim

Once the claim you wish to finish has been selected, the basic billing screen appears.

The previously saved information will populate. From here:

- ◆ Enter the basic service line information.
- ◆ Click on 'Add Service Line Item'
- ◆ Once all service line information is entered, click on 'Submit Claim' to complete the claims submission.  
( See pg. 9 for billing instruction details.)

## Note:

If submitting a claim with the pop-up blockers on, the claim information will remain on the screen.

Attempting to click 'Submit Claim' again will return an error message that the information you are trying to submit has been queried by another user.

To remedy this, close out of the screen you are on, turn off your browsers pop-up blockers, then re-enter the billing screen and submit a new claim.

Close
Save Claim
Submit Claim 

### Social Service Billing Screen

Note: asterisks (\*) denote required fields.

Billing Provider | Subscriber | Claim | Service

Submitter ID:

#### PROVIDER INFORMATION

**BILLING PROVIDER**

\* Provider ID:

#### SUBSCRIBER/CLIENT INFORMATION

**SUBSCRIBER/CLIENT**

\* Client ID:  WA

#### CLAIM INFORMATION

1. \* Authorization Number:

#### BASIC LINE ITEM INFORMATION

**BASIC SERVICE LINE ITEMS**

<p>* Service Date From: <input type="text"/> mm <input type="text"/> dd <input type="text"/> ccyy</p> <p>* Service Code: <input type="text"/></p> <p>Patient Account No: <input type="text"/></p>	<p>* Service Date To: <input type="text"/> mm <input type="text"/> dd <input type="text"/> ccyy</p> <p>Modifiers: 1: <input type="text"/> 2: <input type="text"/> 3: <input type="text"/> 4: <input type="text"/></p> <p>* Units: <input type="text"/></p>
---	--

**Enter new data**

Previously Entered Line Item Information

Click a Line No. below to view/update that Line Item Information. Total Charges Submitting: \$ 0.00

Line No	Service Dates			Service Code	Modifiers				Units
	From	To			1	2	3	4	
20									



Below is a short list of common Adjustment Reason and Remarks Codes you may find on your Remittance Advice (RA)

RA adjustment reason/remark code/description	Possible causes	Provider action
142- Monthly Medicaid patient liability amount.	Client responsibility (participation) applied to the claim	You must collect this amount from the client
198- Precertification/authorization exceeded	Social Service Authorization Approved Units have already been claimed	Contact your case worker if you question the number of units authorized
16-Claim/service lacks information or has submission/billing error(s) which is needed for adjudication	<ol style="list-style-type: none"> <li>1. Claimed dates of service are not within the authorization period</li> <li>2. The authorization line is in error</li> </ol>	<ol style="list-style-type: none"> <li>1. Contact your case worker if you have questions about the authorization dates</li> <li>2. Contact your case worker if you have questions about authorization errors</li> </ol>
18- Exact duplicate claim/service	<ol style="list-style-type: none"> <li>1. Claimed the same units on two different lines for the same day, or</li> <li>2. Claim is an exact duplicate of one already submitted</li> </ol>	<ol style="list-style-type: none"> <li>1. Adjust the claim and report the number of units on a single claim line</li> <li>2. No action is needed if duplication was unintended.</li> </ol>
177-Patient has not met the required eligibility requirements	The client is not financially eligible	Contact your case worker if you have questions
A1-Claim/Service denied	The authorization is in cancelled status	Contact your case worker if you have questions
B7-This provider was not certified/eligible to be paid for this procedure/service on this date of service	Your contract may be expired.	Contact your contract manager or case worker if you have questions
N54-Claim information is inconsistent with pre-certified/authorized services	Authorization line is in error	Contact your case worker if you have questions
N63-Rebill services on separate claim lines	A separate claim line is required for each date of service for the service/procedure code entered	If you are billing quarter hour units or for each unit types, do not use a date span (example: 1/1/2015 to 1/31/2015) to bill. Adjust the claim to reflect separate claim lines for the date of service for each service provided and resubmit claim
N362 : The number of Days or Units of Service exceeds our acceptable maximum	Too many units claimed. Example: Provider billed two units on monthly units or provider billed two units on daily units with one day date span	Change the number of units to the correct amount and resubmit your claim