



FROM



mhs health  
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## Quick Reference Guide for Claims, Reconsiderations, and Appeals

Allwell from MHS Health Wisconsin

Name	Description	Timeline
<b>Corrected Claim</b>	<p>A corrected claim is when a provider submits a correction to the original claim</p>	<p>All requests for corrected claims, reconsiderations or claim disputes must be received within 90 days from the date of explanation of payment or denial is issued.</p>
<b>Request for Consideration (Level I)</b>	<p>Provider disagrees with the original claim outcome (payment amount, denial reason, etc.)</p> <p>*Mailed to the appropriate location indicated on the Allwell Request for Reconsideration and Claim Dispute Form (found at <a href="http://mhswi.com">mhswi.com</a>)</p>	<p>All requests for corrected claims, reconsiderations or claim disputes must be received within 90 days from the date of explanation of payment or denial is issued.</p>
<b>Claim Dispute (Level II)</b>	<p>A claim dispute should be used only when a provider has received an unsatisfactory response to a request for reconsideration</p> <p>*Mailed to the appropriate location indicated on the Allwell Request for Reconsideration and Claim Dispute Form (found at <a href="http://mhswi.com">mhswi.com</a>)</p>	<p>All requests for corrected claims, reconsiderations or claim disputes must be received within 90 days from the date of explanation of payment or denial is issued.</p>