

# HOW TO EDIT A DENIED CLAIM IN AUTHENTICARE



The Federal 21st Century Cures Act, requires states to implement an Electronic Visit Verification (EVV) system. The Arkansas Department of Human Services (DHS) partnered with Fiserv to develop Arkansas's EVV system called AuthentiCare. Palco processes and pays for claims that are reported through AuthentiCare. Each client has a budget and cash expenditure plan (CEP) managed by DHS. Employers must schedule workers for shifts that fit within the client's CEP.

Palco **cannot** process and pay for claims that exceed a CEP. That includes claims for your caregiver's time. **Caregiver timesheets submitted that charge more hours than allowed by a client's CEP will be denied. The employer must correct the timesheet before Palco can process and pay the claim.**

## Step 1: Reference the failure notification email sent by Palco.

Hello **EMPLOYERNAME**

Palco has discovered the following items that require your attention for payment(s) not to be delayed.

### Issue(s) to Correct:

**EEPALCO ID EENAME**

Timesheet ID: 029263-4A1F4F

4/12/2021 03:00 PM: Service Authorization lacks sufficient funds

4/12/2021 08:00 AM: Service Authorization lacks sufficient funds

The dates of service denied and the denial reason will be listed in the email.

A denial reason that states "service authorization lacks sufficient funds" means that more hours have been charged than are allowed per the client's CEP. If the worker reports time for early arrival for a shift or staying even 10 minutes late to deliver services, the entire claim may be denied.

## Step 2: Find denied claims for the pay period.

Claims

Add New > **Claim (Standard)**

Search Type:  Claim  Confirm Billing - View

Claim ID:

**Go!** **Clear**

Claim Status:

Claim Start:

Claim End:

Service:

Authorization ID:

Client:

Provider:

Worker:

Representative:

Payer:

Procedure Code:

User Option:

Include Inactive Claims?

**Go!** **Clear**

- Insert the start and end date of the pay period on the Claims screen. (ex. 03/30/2021 - 04/12/2021). You can find the payment schedule with all pay period dates here: [www.palcofirst.com/arkansas](http://www.palcofirst.com/arkansas)
- Leave the other fields blank and click the blue "GO!" button at the bottom of the screen.
- When the records are shown for the date of service (see below), click on the Claim ID number in the first column to select the claim that was denied.
- You must review all of the denied claims for that pay period.

Claims (total of 4 records)

ID	Status	Client ID	Client Name	Date Range	Information
<a href="#">11523</a>	ConfirmBillingForClaim, DuplicateClaim, EventMatching, MissingActivityCode, OverlappedWorker, WebClaimSuppress	9999900321		04/12/2021 - 04/12/2021	
<a href="#">11406</a>	ConfirmBillingForClaim, EventMatching, MissingActivityCode, OverlappedWorker, WebClaimSuppress	9999900321	LRONNIE, RONNIE	04/12/2021 - 04/12/2021	
<a href="#">11488</a>	Denied	9999900321	LRONNIE, RONNIE	04/12/2021 - 04/12/2021	
<a href="#">11522</a>	InfoExceptions	9999900321	LRONNIE, RONNIE	04/12/2021 - 04/12/2021	

### Step 3: Click Replace Claim button (which will generate a new claim).

#### Claim Details

**\* Client**  
LRONNIE, RONNIE

**\* Worker**  
LVICTORIA, VICTORIA

**\* Service**  
AGENCY ATTENDANT CARE

Date	Time	Amount	Date	Time
04/12/2021	08:00 AM	04:00	04/12/2021	12:00 PM

**Activity Codes:**  
(ex: 3,5,8)

Total Lines: 1 Total Claims: 1 Total Amount: \$136.48 Total Authorized: \$136.48

**Denied** Delete | Add Lines Above | Add Lines Below | Move Up | Move Down

Claim ID: **11488**  
Filed On: **Web**

Printer Friendly  
Show All Claims

Total Claims: **1**  
Total Calculated Amount: **\$136.48**  
Total Authorized Amount: **\$136.48**  
Total Units: **16**  
Total Hours: **04:00**  
Scheduled Units: **0**  
Scheduled Hours: **00:00**

Inactive Claim

**Save**  
**Delete All**  
**Cancel**

**Replace Claim**

### Step 4: Edit the New Claim and click Save when finished.

#### Claim Details

**\* Client**  
LRONNIE, RONNIE

**\* Worker**  
LVICTORIA, VICTORIA

**\* Service**  
AGENCY ATTENDANT CARE

Date	Time	Amount	Date	Time
04/12/2021	08:00 AM	03:00	04/12/2021	11:00 AM

**Activity Codes:**  
(ex: 3,5,8)

Click here  more service(s)

Total Lines: 1 Total Claims: 1 Total Amount: \$136.48 Total Authorized: \$136.48

Delete | Add Lines Above | Add Lines Below | Move Up | Move Down

Claim ID: **11653**  
Filed On: **Web**

Printer Friendly  
Show All Claims

Total Claims: **1**  
Total Calculated Amount: **\$136.48**  
Total Authorized Amount: **\$136.48**  
Total Units: **16**  
Scheduled Units: **0**  
Scheduled Hours: **00:00**

Billing Confirmed  
 Inactive Claim

**Save**  
**Delete All**  
**Cancel**

### Step 5: Repeat for any other denied claims. Submit all claims to Palco and Confirm for Billing. You must resubmit all claims on that timesheet / pay period even if you did not edit them.

Visit [www.palcofirst.com/arkansas](http://www.palcofirst.com/arkansas) to find helpful videos and resources including the "Arkansas EVV Employer User Manual," which explains how to submit claims and other AuthentiCare features.