

ICD-10 KNOWLEDGE BRIEFS

Provider Express Claim Entry

Initial claim entry or resubmission following a denial or rejection

Outpatient/Professional Claim Submission

- Must be an in-network provider & a registered user of Provider Express
- File MH/SA or EAP claims for many memberships*
- Prevents basic ICD-10 transition submission errors
- Valid ICD-10 codes are loaded in the system
- Will not let you include both an ICD-9 and an ICD-10 code on one claim
- Will not let you bill an ICD code that is out of compliance with the Date of Service rules
- May use for resubmission following claim rejection or denial regardless of how the initial claim was submitted (paper or 837p)
- Fast, free, easy

Not a registered user?

- Click First-time User
- Follow instructions to obtain an Optum ID
- Get started

Already registered?

- Click Log In
- Select Claim Entry feature
- Get started

Need help with Provider Express Claim Entry feature?

- Click <u>Claim Entry Guided Tour</u> for brief video overview
- Click <u>Claim Entry ICD-10 Update</u> for ICD Indicator info

^{*}Continue to use membership-dedicated claim entry portals or UnitedHealthcare Online, when applicable, for online claim submissions.