

CLAIMS SUBMISSION TIMELINES

1. **COMMERCIAL LINE OF BUSINESS:** KAMG shall not impose a deadline for the receipt of a claim that is less than ninety (90) days for contracted providers and one hundred and eighty (180) days for non-contracted providers after the Date of Service for Commercial claims.

2. **MEDICARE LINE OF BUSINESS:** KAMG shall not impose a deadline for the receipt of a claim that is less than ninety (90) days for contracted providers and three hundred sixty-five day (365) days for non-contracted providers after the Date of Service.

REIMBURSEMENT TIMELINES

CLEAN CLAIMS: MEDICARE

KAMG shall reimburse each Complete Claim, or portion thereof, whether in state or out of state, as soon as practical, but no later than thirty (30) calendar days for Non-Contracted Medicare providers and no later than sixty (60) calendar days for Contracted Providers, after the date of receipt of the claim from the provider, unless the Complete Claim or portion thereof is contested or denied, in accordance with provisions of this policy.

CLEAN CLAIMS: Commercial

KAMG shall reimburse each Complete Claim, or portion thereof, whether in state or out of state, as soon as practical, but no later than forty-five (45) business days for Commercial Line of Business.

NON-CLEAM CLAIMS: Medicare

1. If KAMG receives a claim that lacks required information, it shall change the claim status to “pend” status.
2. KAMG shall notify a Provider of a Non-Clean Claim no later than thirty (30) working days after the date or receipt, in writing, with a request for the missing information. If KAMG requests Reasonably Relevant Information from a Provider in addition to information that the Provider submits with a claim, KAMG shall provide a written explanation of the necessity for such request.
3. A Claim lacking any of the information above is considered incomplete, and will be developed for the missing information:
 - A letter is generated to the provider requesting the identified missing information within thirty (30) days of receipt of claim.
 - If the information is not received by the 40th day, a second Pend Letter is generated to the provider requesting the additional information.
 - If KAMG does not receive the requested information within fifty-five (55) calendar days after it receives the claim, KAMG shall review the claim with the information available and shall make an initial determination to pay or deny the claim no later than **sixty (60) calendar days**.
 - If the information is received between the 55th and 60th day, the claim is re-opened utilizing the original received date and processed for adjudication.

- If the information is received after the 60th day, the claim is re-opened utilizing the new received date. (The new receipt date is based on the day when the requested information is received).

NON-CLEAM CLAIMS: Commercial

A Claim lacking any information for adjudication is considered incomplete and unclean, and will be contested within 45 working days.