



Overpayment/Refund Form

Participating providers are entitled access to the NaviNet® web portal and should be initiating an adjustment to correct an overpayment through NaviNet by selecting the *Claim Inquiry and Maintenance* transaction and then *Claim Status Inquiry*. Enter the appropriate search criteria: Billing Provider and Member ID and DOB **or** Billing Provider and Member Last Name, First Name, and DOB. The Claims Search Results screen and Claim Details screen both offer a link to Claim Investigation. Through this preferred and expedited method, credits and/or retractions will automatically appear on a future Statement of Remittance (SOR), Provider Explanation of Benefits (Provider EOB), or Provider Remittance.*

If you are a participating provider but not NaviNet-enabled, please visit www.navinet.net to sign up. Once you are enabled, you may submit your adjustment request as outlined above.

If you are not a participating provider, please call Customer Service at **1-888-YOUR-AH1 (1-888-968-7241)** or you may complete this form and mail it along with a copy of the SOR, Provider EOB, or Provider Remittance to:

AmeriHealth New Jersey Claims Overpayment
 1901 Market Street
 Treasury Services, 39th Floor
 Philadelphia, PA 19103-1480

Date:	Provider ID # or NPI:
Provider name:	
Provider address:	
Contact at provider's office:	Telephone number:

Providing patient information enables us to credit your account in a timely manner.

MEMBER NAME AND ID #	DATES OF SERVICE	CLAIM #	REMIT AMOUNT

REASON FOR REFUND:	TYPE OF REFUND:
<input type="checkbox"/> Payment of outstanding credit balance or A/R <input type="checkbox"/> Duplicate payment <input type="checkbox"/> Worker's compensation <input type="checkbox"/> Medicare <input type="checkbox"/> Other insurance _____ <input type="checkbox"/> Provider billing error <input type="checkbox"/> Processing error <input type="checkbox"/> Unable to identify patient <input type="checkbox"/> Multiple payments (If multiple members are affected, attach a copy of your SOR, Provider EOB, or Provider Remittance with names highlighted.)	<input type="checkbox"/> Medical claim <input type="checkbox"/> Capitation <input type="checkbox"/> Other _____ _____ _____

COMMENTS

NaviNet is a registered trademark of NaviNet, Inc.

*AmeriHealth New Jersey is in the process of migrating its membership to a new operating platform. Once a member has been migrated to the new platform, professional providers will receive a Provider EOB instead of an SOR and facility providers will receive a Provider Remittance.