

**304.17A-704 Insurer's acknowledgment of receipt of claim -- Inaccurate or insufficient claim information -- Claim status information.**

- (1) (a) Within forty-eight (48) hours of receiving an original or corrected claim submitted electronically, an insurer, its agent, or designee shall acknowledge the date of receipt of the claim by an electronic transmission to the provider, its billing agent, or designee that submitted the claim; and
- (b) Within twenty (20) calendar days of receipt of an original or corrected claim submitted by mail or other nonelectronic means, an insurer, its agent, or designee shall acknowledge the date of receipt of the claim to the provider, its billing agent, or designee that submitted the claim.
  1. For claims containing all necessary information and having no errors, the insurer shall make available confirmation of receipt of the claim to the provider, its billing agent, or designee that submitted the claim. Acknowledgment may be in writing or the insurer, its agent, or designee may list the claim and the date it was received on a file that can be accessed electronically by the provider, its agent, or designee.
  2. Claims that contain errors or lack necessary information shall be acknowledged by an electronic transmission or in writing to the provider, its billing agent, or designee that submitted the claim.
- (2) At the time of acknowledgment under paragraph (a) or (b) of subsection (1) of this section, an insurer, its agent, or designee, shall notify the provider, its billing agent, or designee that submitted the claim, in writing or electronically, of all information that is missing from the billing instrument, any errors in the billing instrument, or of any other circumstances which preclude it from being a clean claim.
- (3) When an insurer, its agent, or designee has notified a provider, its billing agent, or designee that submitted the claim, that a claim contains errors, upon receipt of a corrected clean claim the insurer shall adjudicate the corrected clean claim within the applicable claims payment time frame for a clean claim established in KRS 304.17A-702.
- (4) By January 1, 2001, an insurer shall have in place a mechanism to inform providers of the status of a claim either through:
  - (a) Notation on the remittance; or
  - (b) By allowing providers to check claim status electronically at any time following submission of the claim to the insurer.

**Effective:** July 15, 2002

**History:** Amended 2002 Ky. Acts ch. 181, sec. 13, effective July 15, 2002. -- Created 2000 Ky. Acts ch. 436, sec. 3, effective July 14, 2000.