

How to fix a claim when it is rejected stating "OTHER PAYER INSURANCE TYPE CODE: REQUIRICARE SECONDARY CLAIMS"

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Rejection **OTHER PAYER INSURANCE TYPE CODE: REQUIRICARE SECONDARY CLAIMS (Secondary)** will appear only when Medicare is entered as secondary insurance for the patient. Generally, whenever Medicare is applied as secondary insurance for a patient, we need to mention the reason why Medicare is not the patient's primary insurance.

To fix the rejection and to specify the reason why Medicare is secondary, please follow the steps listed below:

1. Open the patient's chart.
2. Click on the Insurances tab.
3. Click on Secondary insurance.
4. Select the appropriate reason from the ****Secondary insurance type code****
5. Save the Demographics.
6. Once the changes are saved, please resubmit the claim.

The screenshot shows the 'Secondary Insurance' form in a medical software interface. The form includes fields for 'Insurance Company' (NJ Medicare Part B J12), 'Carrier Payer ID' (SMNJ0), 'Insurance ID Number' (123456789A), and 'Insurance claim office number'. The 'Secondary insurance type code' field is highlighted with a red box, and a red arrow points to the dropdown menu options. The dropdown menu is open, showing several options: 'Medicare Secondary Working Aged Beneficiary or Spouse with Employer Group Health Plan', 'Medicare Secondary End-Stage Renal Disease Beneficiary in the Mandated Coordination Period', 'Medicare Secondary, No-fault Insurance including Auto is Primary', 'Medicare Secondary Worker's Compensation', 'Medicare Secondary Public Health Service (PHS) or Other Federal Agency', 'Medicare Secondary Black Lung', 'Medicare Secondary Veteran's Administration', 'Medicare Secondary Disabled Beneficiary Under Age 65 with Large Group Health Plan (LGHP)', and 'Medicare Secondary, Other Liability Insurance is Primary'.