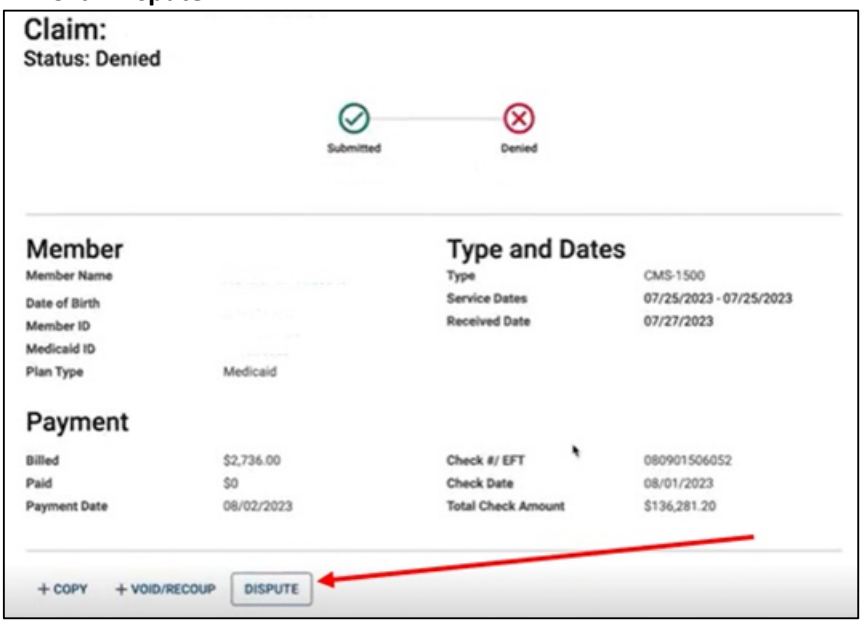
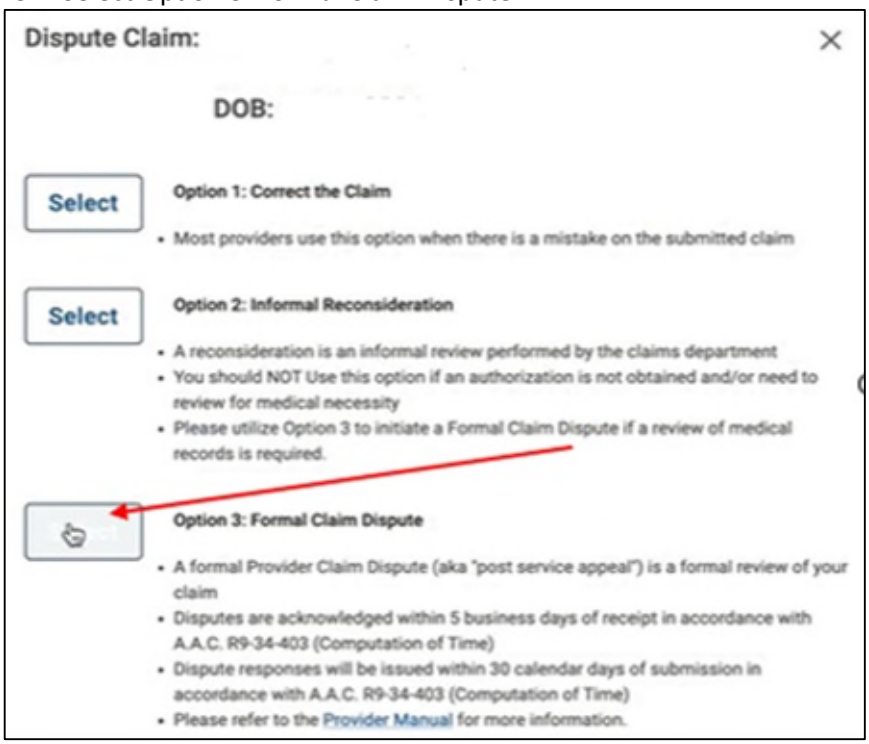
Formal Provider Claim Dispute Submission of an Arizona Complete Health Medicaid Claim via Secure Portal:

The pages below outline how to submit a formal Medicaid claim dispute via our secure portal. However, we highly encourage you to use the corrected claim process and/or reconsideration process PRIOR to submitting a formal claim dispute whenever possible. When needed, the formal claim dispute process may be used to dispute (aka appeal) a claim denied partly or in whole.

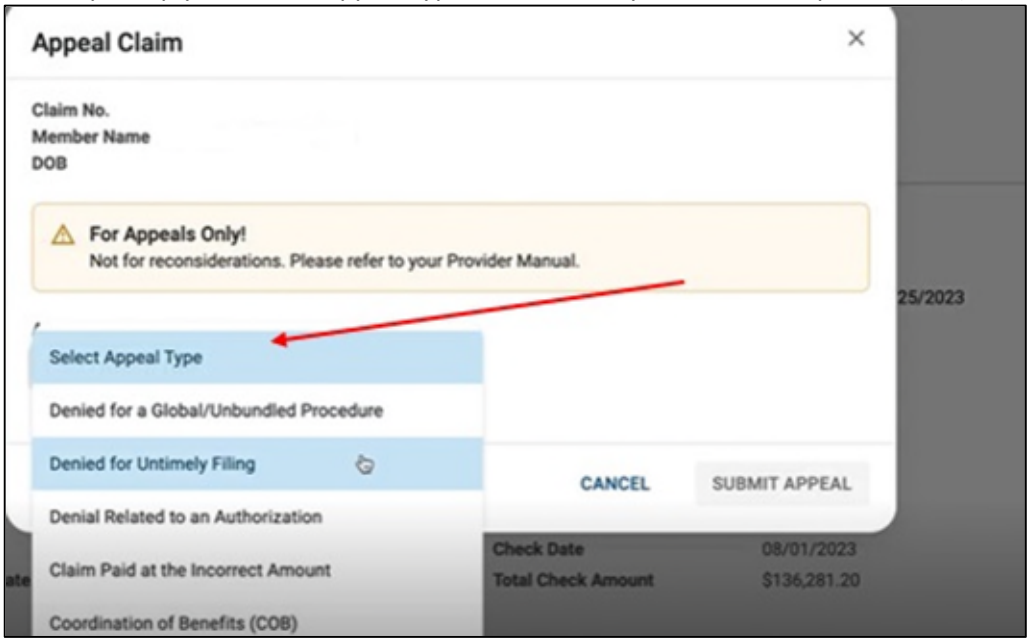
1. Once you've logged on to the secure portal https://www.azcompletehealth.com/providers/login.html, use the Claims option to look up the claim and access its details
2. Click **Dispute**



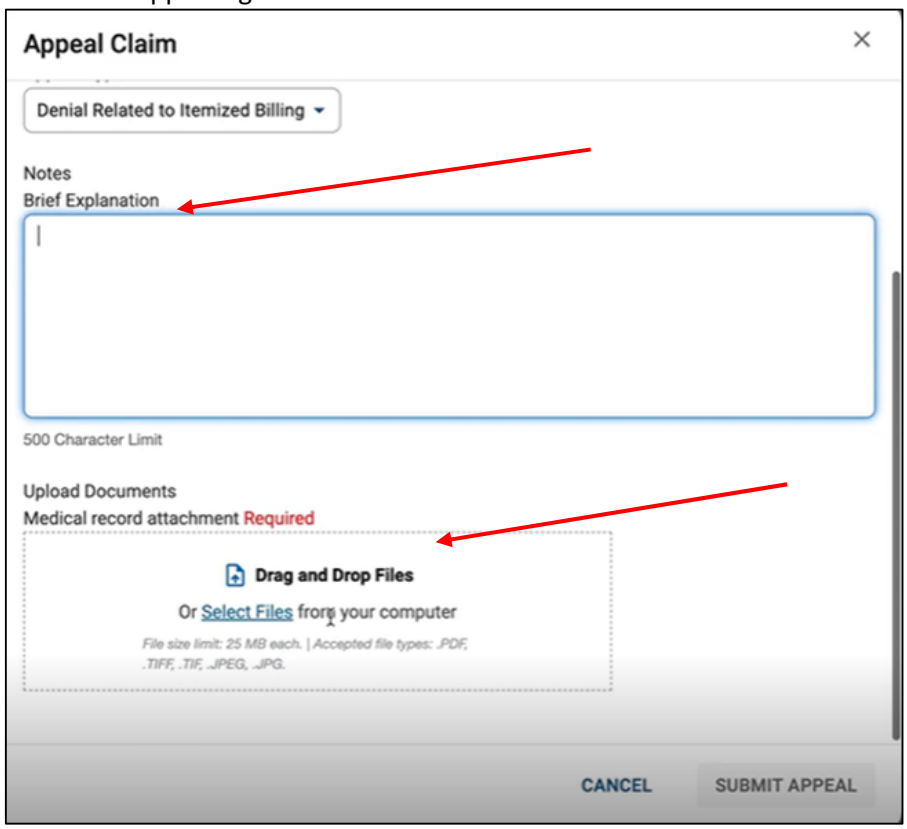
3. Select Option 3: Formal Claim Dispute



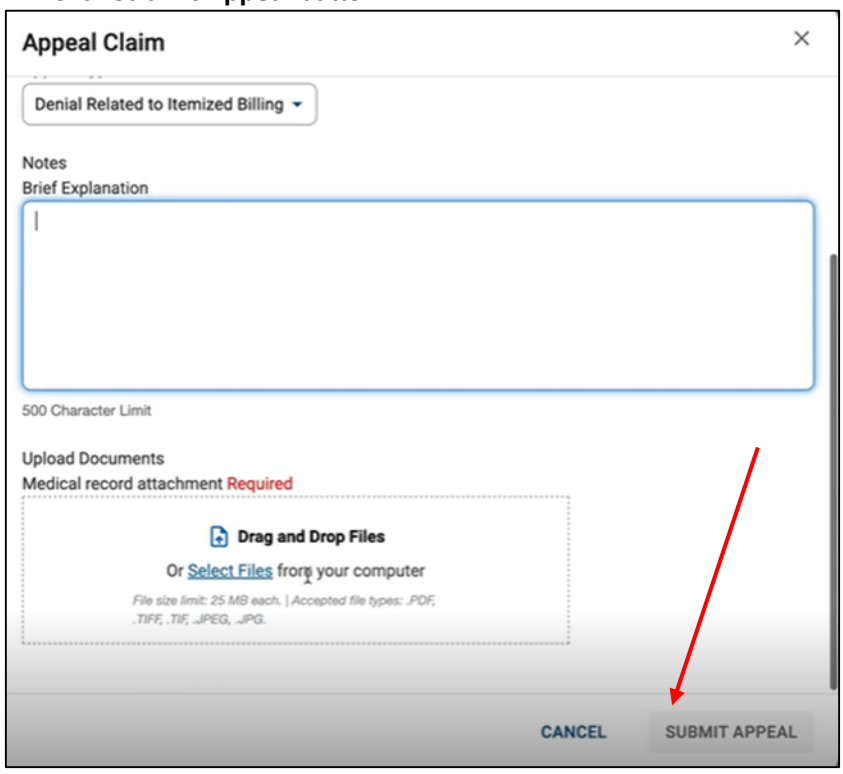
4. Select **Appeal Type** from the drop-down box (you'll be able to add details or specific comments in Step 5, for this step, simply select the appeal type that best fits your current dispute reason)



5. Enter the reason for your claim dispute including pertinent facts and data that supports your request for payment/additional payment. There is a 500-character limit, so this should be a summary. You can upload a dispute letter and any medical records or other supporting documents in Step 6
6. Drag and drop files or select files from your computer to upload your dispute letter, medical records, and/or other supporting documentation



7. Click **Submit Appeal** button



8. A "Success" notification appears once you've submitted the dispute

9. Within five (5) business days of your successful Claim Dispute submission, an acknowledgment letter is mailed to the address listed on your uploaded claim dispute documentation in accordance with A.A.C. R9-34-403 (Computation of Time)
10. Claim dispute decisions are issued with 30 calendar days of submission in accordance with A.A.C. R9-34-403 (Computation of Time)
11. If you need status of a successfully submitted claim dispute *and it has been over* 30 calendar days since your submission, you may email an inquiry to the Arizona Complete Health Grievance and Appeals Department at AzCHGrievanceAndAppeals@azcompletehealth.com
12. For general assistance on the grievance and appeal system, please visit the Grievance and Appeal System page and the Claim Dispute page on our website:
    - https://www.azcompletehealth.com/providers/resources/grievance-process.html
    - https://www.azcompletehealth.com/providers/resources/grievance-process/provider-claim-disputes.html
13. If you require assistance with our secure provider portal, please contact your Provider Engagement representative for assistance. If you need your assigned Provider Engagement Specialist's contact information, please email AzCHProviderEngagement@azcompletehealth.com