



## Reminder When Filing Corrected Claims

Currently, all CMS-1500 corrected claims must be submitted on paper with the [Provider Request for Claim Review form](#) attached to the top of the claim. This form must be printed and mailed to:

Blue Cross and Blue Shield of New Mexico  
ATTN: Mail Services  
P.O. Box 27630  
Albuquerque, NM 87125

Please check the "Corrected Claim" box and specify the corrections that were made. This will ensure timely and accurate processing, and will help to reduce duplicate claim denials. Claims that are submitted with a "corrected claim" stamp or notation are not recognized by our system; this could delay the processing of your corrected claim.

UB-04 corrected claims should be submitted electronically whenever possible. If you must file the UB-04 corrections on paper, please make sure to attach the "Provider Request for Claim Review" form following the instructions listed above. In addition, when filing corrected UB-04 claims, use the appropriate Type of Bill indicating a corrected claim (i.e. 117 vs. 111).