



Paper Claim Submission Request

In the event that a provider is unable to bill on a regular basis using the Alliance Claims System (ACS) provider portal or electronic file submission, a Paper Claim Submission Request may be submitted for prior approval of paper submission. If approved, this approval will only be for thirty (30) days and the provider will work with an assigned Claim Research Analyst to transition to the ACS provider portal. **Please note that this request will only be considered for institutional services. Professional services must be billed electronically.**

General Information *

1	Provider name _____
	Services provided _____
	Approximate number of consumers _____
	Month of service to submit _____
	Reasons for paper submission _____ _____
	Time frame to transition to ACS _____
	Agency contact name _____
	Email _____ Phone _____

For Internal Use Only

2	Claims Manager Approval _____ Date (mm/dd/yyyy) _____
	Sr. Director of Claims and Enrollment Approval _____ Date (mm/dd/yyyy) _____
	Received Date (mm/dd/yyyy) _____ Sr. Director of Claims and Enrollment Review Date (mm/dd/yyyy) _____
	Approved Decision _____ (This section shall include the justification for approval, strategy for moving to ACS and plan for technical assistance) _____ _____

Submission Instructions Please email completed form to Claims@AllianceHealthPlan.org within 30 days of the date of service.