QUICK REFERENCE FOR EDI CLAIMS

All payers, including ActivHealthCare (AHC) network affiliates, Medicare, and others may be submitted electronically. You may prefer to file some claims by paper. Go to www.activhealthcare.com, Network Resources, for more information submitting paper claims.

To **ENROLL** with Office Ally (OA), our partner for electronic claim submission:
- Go to www.ActivHealthCare.com, Network Resources, or refer to your Provider/CA Manual.
- Download the enrollment forms and follow the directions on the EDI page.

SUBMITTING CLAIMS

Once enrolled, OA will assign a username and password for **LOGIN** to upload or enter claims.

Note: If you have a computer with Internet, but do not have practice management software that will generate HCFA claims, you may still submit online claims through OA. View the Online Entry Tool instructions at www.activhealthcare.com, Network Resources, or refer to your Provider/CA Manual.

Preparing your practice management software

- To determine which networks should be submitted as ActivHealthCare claims, go to www.activhealthcare.com, Network Resources, and continue until you get a password request display. Enter the requested information and a password will be emailed to you. You will then be able to view network affiliations. If a network appears in the affiliations list or a patient's employer is listed in the Employer List, then their claims should be submitted as AHC claims to receive the in-network fees.

- For correct processing of your ActivHealthCare claims by OA, you will need to **insert** AHCØ1 **IN** <u>FRONT</u> **OF THE PAYER NAME** which appears in the blank area at the top of the claim form. This is critical to be sure your claims are processed correctly.

  > AHC01 Insurance Payer's Name
  > Insurance Payer's Street Address or P.O. Box
  > Insurance Payer's City, State & Zip Code

  If you have a payer that is filed both as an AHC and non-AHC claim, then you will need to set up two payers in your software (one with the AHCØ1 prefix and one without).

- Box 33 of the HCFA requires a **pin number.** If the payer requires a pin, use the payer assigned pin number; otherwise, use the doctor's license number. This will need to be set up in your software.

- You will need to know how to print your claim "to file" from your software. If you can print a claim, you have this capability. Contact your software vendor if you need assistance with this step. Once you print a claim to file, you will need to know where to locate this file on your computer for uploading.

AHC Claims

- If the patient is insured with NovaNet, an AHC network affiliate, as identified on their insurance identification card and box 11c of the CMS-1500, then the payor would be entered on the CMS-1500 with the AHCØ1 prefix in front of the payor. For example, if

Aetna is the payor for NovaNet (from box 11c), the payor is identified on the top of the CMS-1500 as AHCØ1 Aetna, using the mailing address on the insurance identification card. If the insurance card has the mailing information to NovaNet, then the payor would be AHCØ1 NovaNet

- The exception to the first situation is Coventry HMO. **All Coventry HMO claims should identify the payor as AHCØ1 ActivHealthCare** using AHC's mailing address. To determine which Coventry claims are in this category, you must call the AHC claims department. You will need the patient's ID number when you call.

- If the patient is insured with a company that is not an AHC network affiliate, as identified on their insurance ID card and box 11c of the CMS-1500, then that payor is shown on the top of the CMS-1500 **without the AHCØ1 prefix**.

Any payors that also provide third-party administrative services or pay claims for employer groups and patients affiliated with AHC will require that you set up the payor two times in your software. One would be AHCØ1 Payor name and secondly, (no AHCØ1 prefix) Payor name.

Failure to properly identify the payor information at the top of the CMS-1500, will most likely result in your claim being processed out-of-network, creating additional work for your staff and patients.

Uploading claims

- Make sure your claims include all required information **before** submission.
- Follow the steps to upload your claim file provided by OA in the training.

EDI CLAIMS FOLLOW-UP

Checking your claim status.

Within 24 hours of upload, your file summary is ready. This report lists the status of all claims received by OA. This acts as your receipt that your claims have been entered into the OA system.

- Log into www.officeally.com and click, "Download File Summary."
- Click the pink-colored day on the calendar.
- Below the calendar, click, "View" and then click, "Open."

Please note: ANSI 837 users may receive an ERR Report in place of their file summary – you should contact OA if you receive this report.

Additional follow-up tools available from Office Ally include Patient Look-Up, View Claim History. Inventory Reporting, Code Search, Claim Fix, and Eligibility Request.

*If you have questions or problems, please contact an AHC representative
at **770-455-0040** or email EDI@activhealthcare.com.
www.activhealthcare.com*

*OA representatives are available at **949.464.9129** anytime for
questions or customer support or you may email info@officeally.com.
www.officeally.com*

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