# ForwardHealth Portal Basics for New Users-Claims

Part 3 of 3 Training Sessions



## Claims

## Agenda

- Electronic Claims Submission Methods
- Submitting Paper Attachments with Electronic Claims
- Accessing Claims Information
- Search Claims Tool
- Adjusting, Copying, and Voiding Paid Claims
- Resubmitting Denied Claims
- Provider Resources
- Communications
- Questions
- Surveys



### Electronic Claims Submission Methods

- Submitting claims electronically is the most efficient claims submission method.
- Providers may submit claims using the following electronic claims submission options:
  - ForwardHealth Portal via Direct Data Entry (DDE).
  - Provider Electronic Solutions software.
  - 837 Health Care Claim transactions for Electronic Data Interchange (EDI).
  - National Council for Prescription Drug Programs.



#### **DDE**

Forms available for DDE include:

- 1500 Health Insurance Claim Form
- UB-04 Claim Form
- ADA 2006/2012 Dental Claim Form
- Compound Drug Claim form, F-13073
- Noncompound Drug Claim form, F-13072



#### **DDE** (Cont.)

- Users can access the Claims tab within the secure Provider area of the Portal.
- o Refer to the Claims Submission User Guide for detailed information.



#### Claims

#### **Claims Submission Options**

Providers may submit claims to ForwardHealth electronically or on paper. Providers are encouraged to submit claims electronically as it improves efficiency, reduces billing and processing errors, and allows for the timely processing of payments.

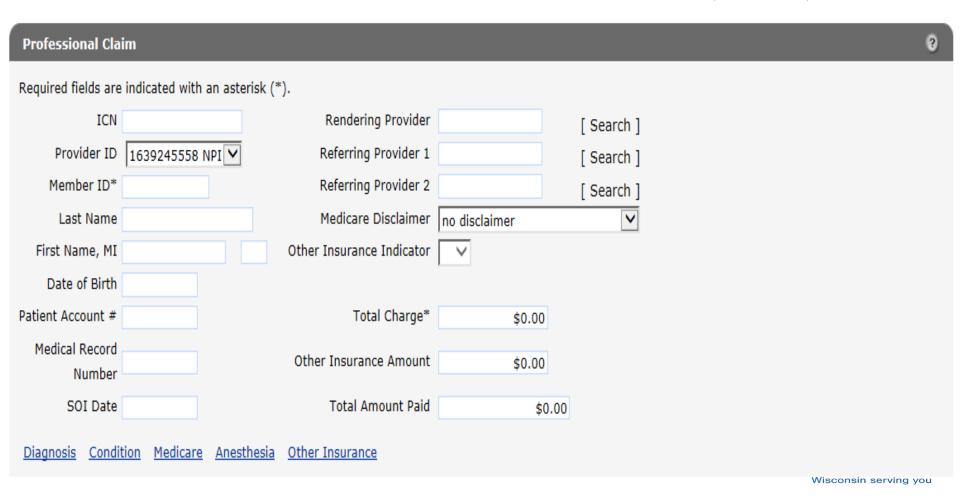
Providers may begin the claim processing function by clicking on the following options.

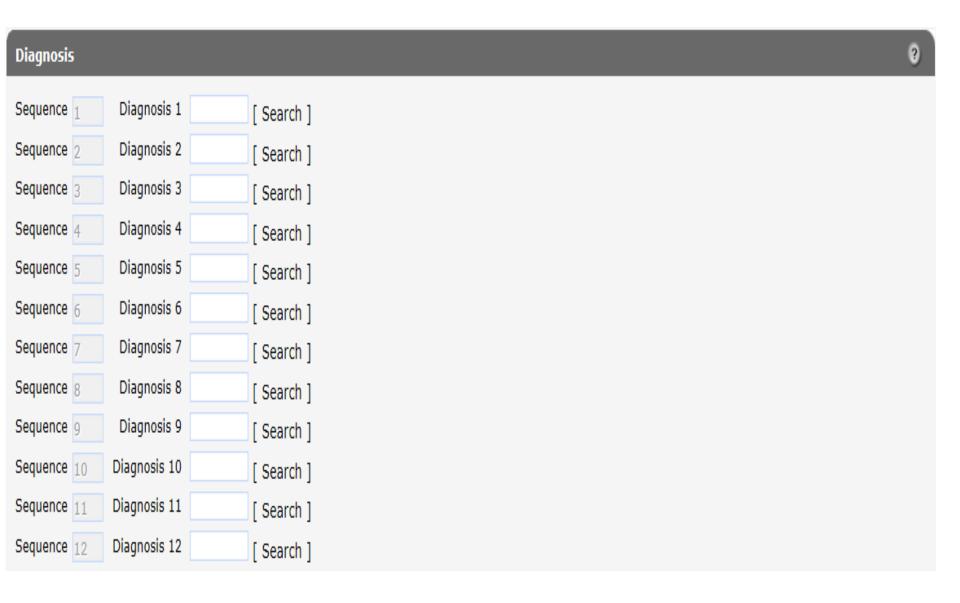
#### What would you like to do?

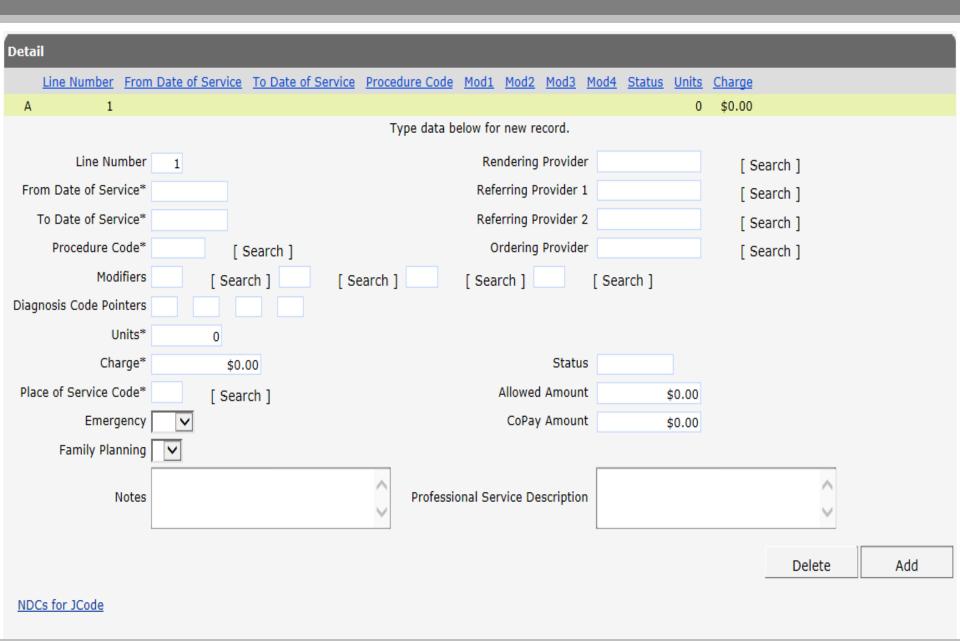
- Claim search
- Claims Submission Report
- Submit Dental Claim
- Submit Institutional Claim
- Submit Compound/Noncompound Claim
- Submit Professional Claim
- Upload Claim Attachments
- WWWP Reporting Form Search
- Submit WWWP Breast Cancer Diagnostic and Follow Up Report
- Submit WWWP Cervical Cancer Diagnostic and Follow Up Report
- Submit WWWP Breast and Cervical Cancer Screening Activity Report
- Private Duty Nursing Prior Authorization Claims Report

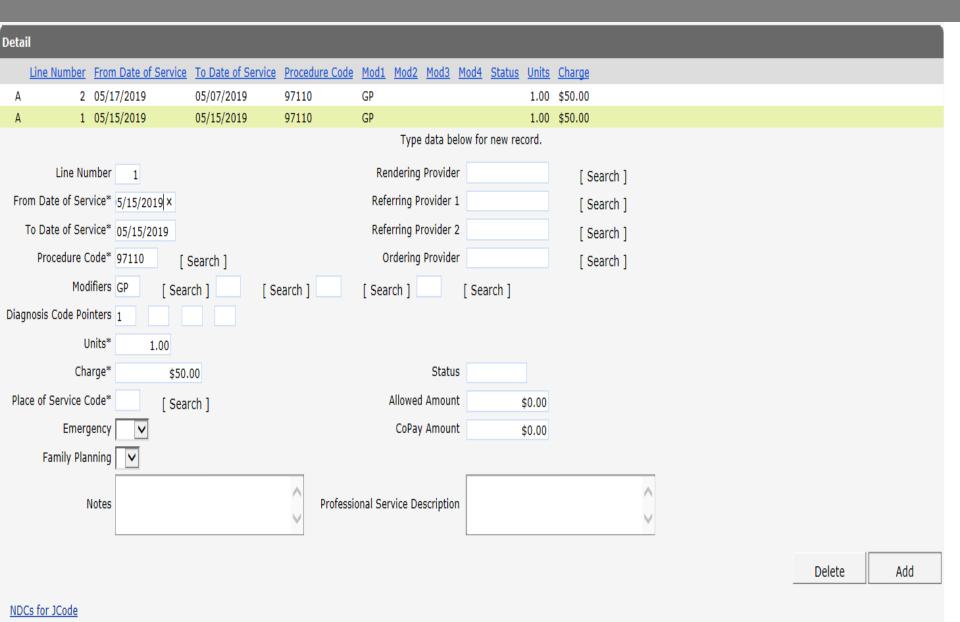
#### **User Guides**

· Portal User Guides

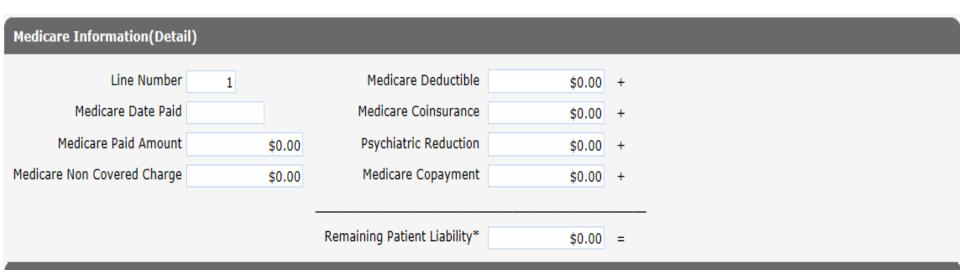




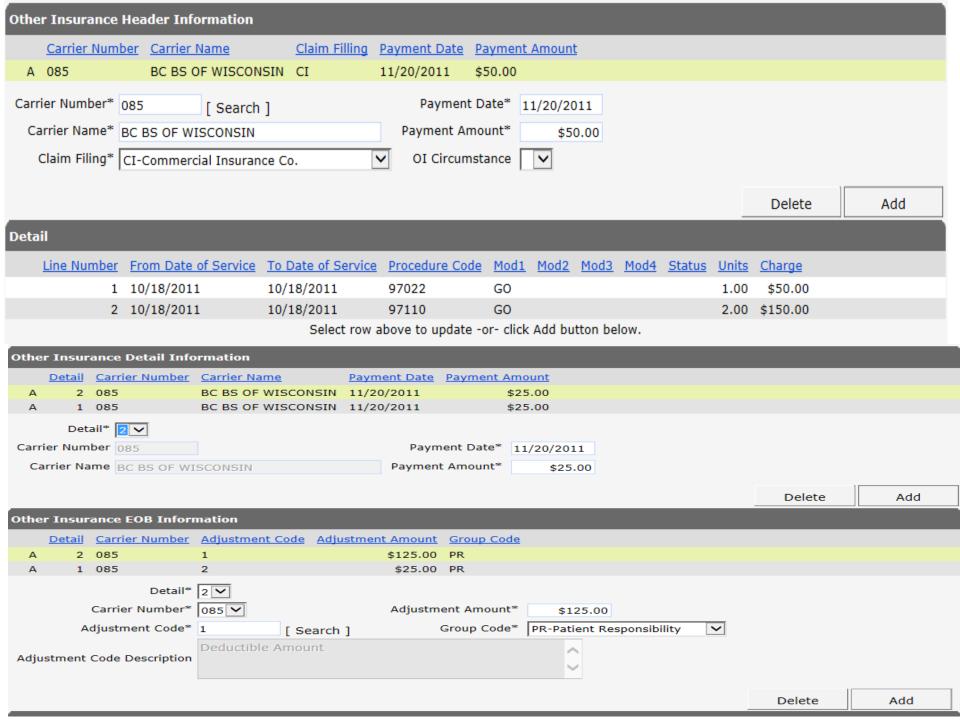








Other Insurance Header Information			
*** No rows found ***			
Carrier Number [ Search ]  Carrier Name  Claim Filing	Payment Date Payment Amount OI Circumstance		
		Delete	Add
Other Insurance Detail Information			
*** No rows found ***			
Detail 1 🗸			
Carrier Number	Payment Date		
Carrier Name	Payment Amount		
		Delete	Add
Other Insurance EOB Information			
*** No rows found ***			
Detail 0 V	A dissabase and A massing to		
Carrier Number	Adjustment Amount		
Adjustment Code [ Search	h ] Group Code		
Adjustment Code [ Search Adjustment Code Description	h ] Group Code		
	ch ] Group Code	Delete	Add





#### **Claim Status Information**



Detail Number Code Description

#### **EOB Information**

Detail Halliber	COUC	Description
0	0	This claim/service is pending for program review.
0	9817	Billing provider number was used to adjudicate the service(s)
1	9817	Billing provider number was used to adjudicate the service(s)
2	9817	Billing provider number was used to adjudicate the service(s)

## Accessing Claims Information

- All submitted claims will appear in the secure Claims area of the Portal.
- Providers have the ability to view and search for claims.
- o Paid claims may be adjusted, copied, or voided.
- Denied claims may be corrected and resubmitted.
- Refer to the Provider page and the Claims page of the Portal for information about the PA process.



## Accessing Claims Information (Cont.)

#### Claims via the Provider Area of the Portal

- Providers may customize their home page to display the most recent five to 20 claims.
- Providers may also customize claims so that only claims of a particular type and/or status display on the home page.
- Any claims older than 30 days will appear under the Provider tab.
- Providers can click any claim to select it; the claim detail will then be displayed.
- o Providers will need to select the Provider tab to return to the home page.



## Accessing Claims Information (Cont.)

#### Claims via the Claims Page

- A claim search can display current claims as well as those dating back three years.
- Search for claims by entering data into at least one of the parameter fields.
- The more parameters completed, the narrower the search.
- Navigate through multiple pages of results by:
  - Using the page numbers.
  - Modifying the sort by selecting any of the column headers.
- Providers can click any claim to select it; the claim detail will then be displayed.



## Search Claims Tool

- Providers may perform a search by entering the internal control number (ICN)
  in the claims search function.
- o Providers may also search by ICN in the submit a claim function.
- If the provider enters an ICN incorrectly in the claim search field, click Clear and re-enter the ICN.



## Search Claims Tool (Cont.)

- Click New Search and to return to the Claims Search screen.
- Enter data into at least one of the parameter fields:
  - The more parameters completed, the narrower the search.
  - The search results will also include the member's first and last name.
- If multiple claim results appear, click one claim result to view.



## Accessing Claims Information (Cont.)

Claim Search					8	
Required fields are indicated with a	n asterisk (*).					
Provider ID :	V					
Internal Control Number(ICN)		Rendering Provider ID				
Member ID		Claim Type		~		
Old Internal Control Number(ICN)		Status		<b>~</b>		
From Date of Service		Date Paid				
To Date of Service		Amount Billed				Search
						Clear



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MEDICAID

Professional

SUSPEND

\$100.00

43

2219162001001 1110560117 MARY

## Adjusting, Copying, and Voiding Paid Claims

#### **Adjusting Paid Claims**

- Some reasons for adjusting a claim:
  - To correct billing or processing errors
  - To correct inappropriate payments overpayments/underpayments
  - To add or delete services



## Adjusting, Copying, and Voiding Paid Claims (Cont.)

#### **Copying Paid Claims**

- Select the claim and click Copy at the bottom of the page.
- Once all the necessary changes are made, click Submit. (Note: Change both header and detail information, as necessary.)
- Attachment information will not be retained on a copied claim.
- o To indicate an attachment, users must add a row in the attachment panel.
- Follow the instructions to electronically upload an attachment.



## Adjusting, Copying, and Voiding Paid Claims (Cont.)

#### **Voiding Paid Claims**

- Select a claim and click Void at the bottom of the page.
- The status of a claim will change to Denied once voided.
- The EOB reflecting the void will be displayed on the original claim.
- The Void function can be performed on any paid claim that has not previously been adjusted or voided.



## Adjusting, Copying, and Voiding Paid Claims (Cont.)

#### Claim Status Information Claim Status PAY Claim ICN 2211319001011 Paid Date 11/15/2011 Paid Amount \$79.56 **EOB Information Detail Number Code Description** Billing provider number was used to adjudicate the service(s) 0 Billing provider number was used to adjudicate the service(s) 1 9817 Pricing Adjustment - Maximum allowable fee pricing applied. Pricing Adjustment - Reimbursement reduced by the member's copayment amount. 9001 Billing provider number was used to adjudicate the service(s) 9817 Pricing Adjustment - Maximum allowable fee pricing applied. 2 9918 2 Pricing Adjustment - Reimbursement reduced by the member's copayment amount. 9001

Cancel

Adjust

Void

Copy claim

## Resubmitting Denied Claims

- Providers may resubmit denied claims via the Portal.
- EOB codes are listed at the bottom of the page.
- o Providers can change information at the header and detail levels.
- Once resubmitted, the claim is reprocessed and the new status will be displayed with a new ICN.
- Each time a denied claim is resubmitted, it will result in a new claim record on the RA.
- interChange continuously processes claims; however, there is only one financial cycle per week, per financial payer.



## Resubmitting Denied Claims

# Claim Status Information Claim Status DENY Claim ICN 2211361001002 Denied Date 12/27/2011 Paid Amount \$0.00

EU				
	Detail Number	Code	Description	
	0	9817	Billing provider number was used to adjudicate the service(s)	
	1	9918	Pricing Adjustment - Maximum allowable fee pricing applied.	
	1	9817	Billing provider number was used to adjudicate the service(s)	
	1	1690	Quantity indicated for this service exceeds the maximum quantity limit establis	



re-submit

Cancel

### Provider Resources

- ForwardHealth Portal: <u>www.forwardhealth.wi.gov/</u>
- Provider Services: 800-947-9627
- o WiCall: 800-947-3544 (ForwardHealth's Automated Voice Response system)
- o ForwardHealth Portal Helpdesk: 866-908-1363
- o EDI: 866-416-4979



## Provider Resources (Cont.)

- Provider Relations Representatives
- o ForwardHealth Managed Care Ombudsmen: 800-760-0001
- Member Enrollment: <u>www.access.wi.gov/</u>



#### Communications

- User Guides:
  - Public home page: Policy and Communication > Communication > User
     Guides
  - Secure Portal: Providers > Users Guide
- E-mail Subscription Sign-up on the public home page: Policy and Communication > Communication > E-mail Subscription Sign-up
- Updates on the public home page: Policy and Communication > Policy > ForwardHealth Updates



## Communications (Cont.)

- Trainings on the public home page: Policy and Communication > Communication > Trainings
- Contact link at the bottom of Portal pages
- Secure Messaging on the secure Portal
- RA Banner Messages on the secure Portal



### Questions?

Now is your chance to ask questions!



## Thank You