

Availity[®] Claim Research ToolSM

The Claim Research Tool (CRT) can save you money, improve your accounts receivable and allow you to work more efficiently while reducing your time and expense. Using this tool will help you improve your financials, often without picking up the phone. The CRT will help you manage account receivables by viewing the status of multiple claims in one view. It will allow you to view claims for a particular date or date range and, if desired, with a selected status that indicates paid, pending, or denied claims.

Please note this document is intended to provide general guidance for using the CRT to access enhanced claim status information. Blue Cross and Blue Shield of Oklahoma (BCBSOK) has made this supplemental information available through the CRT, in addition to the standard HIPAA data, to assist you in resolving your BCBSOK claims.

Sign On

To get started, access Availity at the following URL: www.Availity.com

Next, key your **user ID** and **password**. Click **Login***.

*To access CRT, you must be a registered Availity user.

To get started, enter your user ID and password.

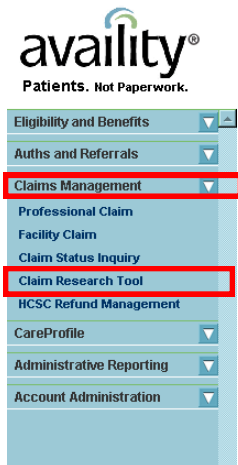


User ID:

Password:

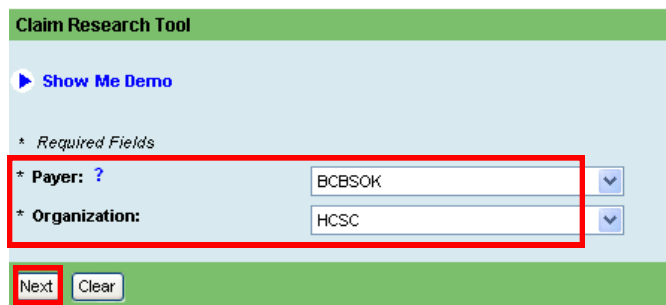
Accessing the Tool

Once you log into Availity, click **Claims Management**, then **Claim Research Tool**.



Selecting a Payer

Next, you need to select a payer. Select **BCBSOK** from the Payer drop-down menu. Click the Organization you are associated to (if applicable) from the Organization drop-down menu and click **Next**.



Claim Research Tool

[▶ Show Me Demo](#)

* Required Fields

* **Payer:** ?

* **Organization:**



The information in this tip sheet provides direction for several topics. Please review this information thoroughly prior to contacting Blue Cross and Blue Shield Provider Customer Service.

Member-ID Search

From this page, you can conduct a search by either the Member ID or Claim # (DCN). To conduct a claim search by Member ID, key the *Billing Provider NPI*, *Member ID*, *Group Number* and the *Service Period* and click **Search**.

The screenshot shows the 'Claim Research Tool' interface. Under the 'Member ID Search' section, there is a form with the following fields: 'Express Entry Provider' (Optional) with a dropdown menu and an 'Add Provider' button; 'Billing Provider NPI' (Optional) with a text input field; 'Member ID' with 'Alpha Prefix (optional)' and 'Member ID' sub-fields, each with a text input field; 'Group Number' with a text input field; and 'Service Period' with 'From' and 'To' date pickers. A red box highlights the 'Billing Provider NPI', 'Member ID' sub-fields, 'Group Number', and 'Service Period' fields. At the bottom, the 'Search' button is also highlighted with a red box.

Claim Number Search

To conduct a Claim Number search, key the 13 digit alpha-numeric Claim # (DCN) into the *Claim # (DCN)* field and click **Search**. This will take you directly to the Claim Details page.

To search for an adjusted claim, key the corresponding 2-digit suffix after the claim number (i.e. the 1st adjustment = 01, 2nd adjustment = 02).

The screenshot shows the 'Claim Number Search' section of the tool. It features a single text input field labeled 'Claim # (DCN):' with a red box around it. Below the field are 'Search' and 'Clear' buttons, with the 'Search' button also highlighted by a red box.



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Search Results Page

All claims matching the search criteria keyed will return on the Search Results page. Click the appropriate *Claim Number* to access the Claim Details page.

Claim Research Tool > Search Results

[Return To Search](#) [Print](#)

Payer: BCBSOK **Provider NPI:**
Group Number: **Service Period:**
Member ID:



From Service Date	Processed Date	Claim Number	Billed Amount	Status
04/22/2009	07/01/2009	912420442050C00	\$185.00	Paid
02/25/2009	04/24/2009	912420442050X00	\$185.00	Paid
01/28/2009	03/19/2009	915245874520X00	\$185.00	Paid
01/14/2009	01/30/2009	924242424420C00	\$240.00	Issued - No payment
01/07/2009	01/30/2009	915478522420X00	\$185.00	Issued - No payment
12/15/2008	01/30/2009	932512495211X00	\$370.00	Issued - No payment

Export options: [CSV](#) | [Excel](#) | [XML](#)

[Return To Search](#) [Print](#)



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Claim Details Page

Here you can view the overall claim status as well as the details for each line of service.

Claim Research Tool > Claim Details



[-] Claim Detail

Patient Name: Member ID: Alpha Prefix: Gender: Date of Birth:	Subscriber Name: Relationship to Subscriber: Patient Account #: Group Number:
Claim Number: Received Date: Processed Date: Claim Status: Status Details: DRG Code: DRG Weight:	Billed Amount: Co-Pay/Deductible Amount: Coinsurance: Ineligible Amount: Hospital Payment Indicator: DRG Version: Approved Length of Stay:
Paid Amount: Check/EFT/Voucher: Check Date: Payee Name: Prior Paid AMT: Prior Notification Deductible: ? Health Care Account Amount: Other Carrier Paid: Medicare Paid Amount:	From Service Date: To Service Date: Provider ID: Provider Name: Additional Pay: Prior Notification Coinsurance: ? Out of Network Deductible: Out of Network Coinsurance: Patient Share Amount:

From Service Date	To Service Date	Revenue /Procedure Code	Billed Amount	Paid Amount	Ineligible Amount	Ineligible Reason Code	Interim Discount	HCPCS Code	Modifier
Export options: CSV Excel XML									

Ineligible Reason Codes

Reason Code	Description

Return To Search



Online Transaction Tips

The information in this tip sheet provides direction for several topics. Please review this information thoroughly prior to contacting Blue Cross and Blue Shield Provider Customer Service.

Claim Not Found

If you receive the *Claim Not Found* response, verify the following has been entered correctly:

- Billing NPI (10 digits) matches NPI submitted on claim,
- The 3 letter alpha prefix is included in the Alpha Prefix field,
- Member ID excludes the 3 character Alpha Prefix (Exception: For Federal Plan members, continue using the preceding 'R' as the beginning of the ID#),
- Group number is keyed as an alpha-numeric entity that matches the member's ID card, and
- *Service Period From and To* includes the date(s) of service.



Institutional Claims

- Monies paid are applied according to the provider contract (*i.e.* Per Diem, DRG, etc.).
- This detailed line level information is offered exclusively through the Claim Research Tool. The total monies equal those listed on your Provider Claim Summary (PCS)/ Electronic Remittance Advice (ERA)/ Electronic Payment Summary (EPS).

Adjusted Claims

- The *Paid Amount* field will display the total claim payment amount.
- The *Prior Paid Amt* field will display the total of all payments made on prior adjustments.
- The *Additional Pay* field will display the payment amount for the adjustment being viewed.

If . . .

- you know your claim number, you may perform a search using that Document Control Number (DCN).
- all claim service lines are not displaying, click *More Results*.
- you are receiving a *Claim Not Found* message, please reference the *Claim Not Found* topic above.
- information was missing when the Claim Details were printed, change the Page Orientation to landscape.
- the check number is not present on a finalized claim, please allow additional time as the system issues check information based on the payment schedule of the provider..

Paid Amount:	\$273.00
Check/EFT/Voucher:	
Check Date:	
Payee Name:	JOHN DOE MDPA

For assistance, to gain access to the Claim Research tool or find out about more free services available on Availity, call Availity Client Services at (800) 282-4548, or visit the [Availity](#) website.

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