



# CLAIMS MANAGEMENT

Link1500/Online Claims Entry

---



# TABLE OF CONTENTS

- PREREQUISITES ..... 2**
- INTRODUCTION TO CLAIMS MANAGEMENT ..... 2**
- HELPFUL HINTS ..... 3**
  - Entering Dates on Your Claims .....3
  - Copying Previously Transmitted Claims .....3
  - Restoring the CMS 1500 Claim Form View .....3
  - Entering NPI and Legacy ID Information .....3
- GRAPHICS ..... 4**
- MENU BAR..... 5**
- MAINTENANCE TAB ..... 6**
  - CPT® .....8
  - Physician / Organization.....10
    - Add Physician Information .....10
    - Edit Physician Information .....12
  - Referring / Other Physician .....14
  - Facility Information .....16
  - Favorite Insurance Companies .....18
    - Edit the List of Favorite Insurance Companies .....18
    - Add a New Favorite Insurance Company .....21
    - Modify a Favorite Insurance Company.....23
    - Send a Claim to a Payer not on the Master Payer List .....25
    - Send a Claim to an Insurance Company that Requires Enrollment.....27
- LINK 1500 TAB .....30**
  - Dashboard Display Entries and Search Option .....31
  - Help .....31
  - Auto Select Feature .....32
  - Add a New Claim .....34
  - Manage Pending Claims (send to Insurance Company) .....37
  - Manage Transmitted Claims.....43
  - Manage Deleted Claims .....47



## PREREQUISITES

The Claims Management Link 1500 / Online Claims Entry service is compatible with current versions of the following industry-leading browsers:

- Internet Explorer®
- Firefox®

## INTRODUCTION TO CLAIMS MANAGEMENT

Claims Management is an intuitive and easy-to-use electronic claims submission solution if you are not yet ready for practice management software.

Claims Management allows you to submit and receive compliant transactions from over 2,200 insurance companies. You enter claim data directly through an electronic version of the CMS-1500 form using the 837P format which is then submitted to payers in the ANSI ASC X12N 837P format.

The Form CMS-1500 is the standard paper claim form that health care professionals and suppliers use to bill Medicare Administrative Contractors (MACs) and all other payers when a paper claim is allowed. The 837P (Professional) is the standard format used by health care professionals and suppliers to transmit health care claims electronically.

Claims Management allows you to process that claim via the secure Inovalon site.

For more information about Medicare billing using the 837P format and Form CMS-1500, the following link provides the Medicare Billing: 837P and Form CMS-1500 fact sheet available from the Centers for Medicare & Medicaid Services (CMS):

<http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnproducts/downloads/837p-cms-1500.pdf>

## HELPFUL HINTS

### Entering Dates on Your Claims

---

Claims Management lets you enter dates through two mechanisms:

- Manually entering dates in mm/dd/yyyy format
- Selecting the date from a calendar

NOTE: In addition to the calendar option, you can also enter dates manually.

### Copying Previously Transmitted Claims

---

If you see the same patients routinely, you may want to copy a previously transmitted claim for the same patient as a template. You can then edit the necessary fields and submit the new claim.

This feature remains available in Claims Management. Go to Manage Transmitted Claims and click **Copy** for the claim you want. A copy of the claim form opens pre-filled with the information from the transmitted claim. Make any changes and click **Resubmit**.

### Restoring the CMS 1500 Claim Form View

---

If you are familiar with the CMS form 1500, then working with Claims Management extremely easy due to the similar claim entry.

If the list view looks differently to you, you may be viewing the site with a screen resolution of 800 x 600 or less. To restore the CMS 1500 view, try either of these options:

- Expand the browser window to the full width of your screen
- Increase your screen resolution

### Entering NPI and Legacy ID Information

---




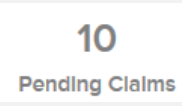



In order to prevent data entry errors, Claims Management does not allow users to enter data directly into fields that contain NPI or Legacy ID information. These are fields 17A, 17B, 24J, 25, 32A, 32B, 33A, and 33B.

Before creating a claim, enter this information by going to the Maintenance tab and selecting Physician / Organization. Click **Add New** to create a new provider record or click an existing record to edit. When creating a claim, select the magnifying glass icon in Field 25 and select the correct provider record. This action populates all the correct data in the fields listed above.

If you have already started creating a claim, you can still add a new record. To do so, select the magnifying glass icon in Field 25, and click **Add New** on the slide-out menu. This action lets you create a new record “on the fly” which can be placed on the claim you have already started.

## GRAPHICS

Use the following table to assist you with the following graphics that appear on multiple pages:

Graphic	Name	Description
	Alerts	Click this icon to see alerts for this account. Inovalon sends you alerts about important information regarding this service.
	Arrows	Sort the contents of the column headings in ascending or descending order by clicking the up and down arrows on the heading columns
	Lookup	Click this icon to open the Data Entry field on the Claim form to select from information you previously entered for this field.
	Pending Claims	Click this box to open the Manage Pending Claims page where you can view all of your claims that have not yet been transmitted.
	Printer Friendly	On the View Claim page, open the claim in a format that you can print.  NOTE: The document that you print is not an authorized CMS claim form and is not intended to be sent to the payer for billing purposes.
	Return	On the View Claim page, return to the page (Manage Pending or Manage Transmitted) from which you selected this claim.
	Processing	Please wait. This rotating circle indicates that Claims Management is processing your last request.

## MENU BAR

Use the following table to assist you with the graphic bar that appears across the top of all pages in Claims Management.

Menu Option	Description
Home	Open the Manage Pending Claims page which is also the Claims Management home page.
Link 1500	Display options that allow you to add claims as well as manage claims that are either in a pending, transmitted, or deleted state.
Maintenance	Display options that allow you to add and edit physician, insurance company, facility, and CPT (Current Procedural Terminology) code information.
About	Current version of All-Payers Claims.
Help	Opens this Claims Management <i>User Guide</i> which you can view and save to your computer for future reference.

## MAINTENANCE TAB

Before you submit your first claim, Inovalon recommends that you first enter the following basic pieces of information using the Maintenance tab.

NOTE: After you complete this section, you can populate selected fields on the claim form with one click, rather than typing in the same information each time you enter a claim.

Option Name	Field Number	Description
Physician Information	25	Add physician Federal Tax ID number and Billing Provider Information / phone number to the claim form.
Referring / Other Physician ID	17B	Add Referring, Ordering, and/or Supervising physician name and NPI number to the claim form.
Facility Information	32	Add Service facility location information.
Favorite Insurance Companies	Top of Claim	Add insurance company information to the claim form.

These Maintenance options are shown in Figure 1.

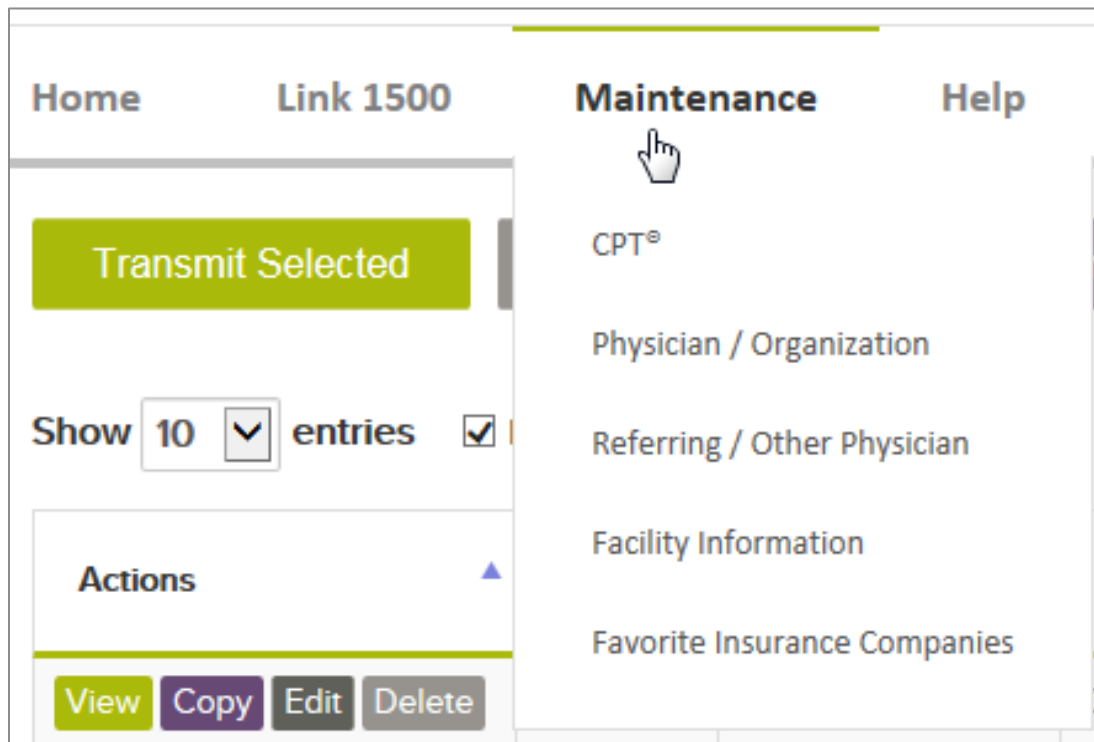

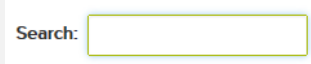


Figure 1: Maintenance tab with menu options displayed

Use the following table to assist you with searching and showing entries when managing claims:

Graphic	Name	Description
	Show entries	You can also use the Show drop-down box to change the number of claims that display on your screen. Available selections are 10 (the default), 25, 50, and 100.
	Search box	Enter full or partial codes or descriptions for any of the columns displayed to limit the number of entries that appear.

Claims Management provides on-screen help text for all the Maintenance Tab menu options. You can display this

text by clicking .

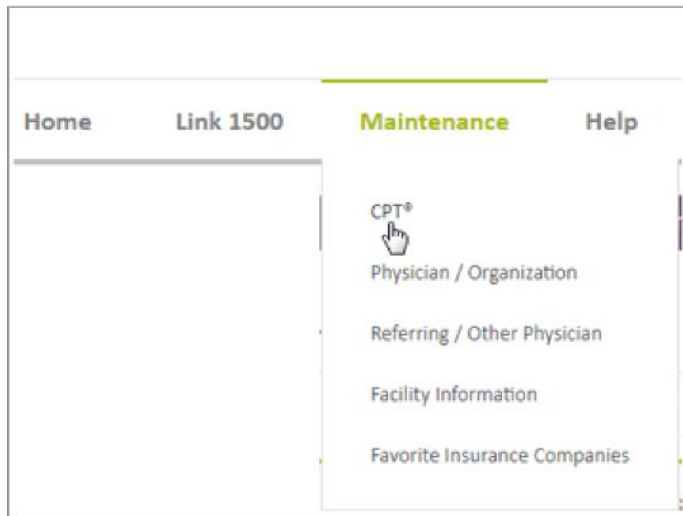


## CPT®

The following instructions describe how to maintain a CPT (Current Procedural Terminology) code. CPT codes are the most widely accepted codes set used to report medical procedures and services under public and private health insurance programs.

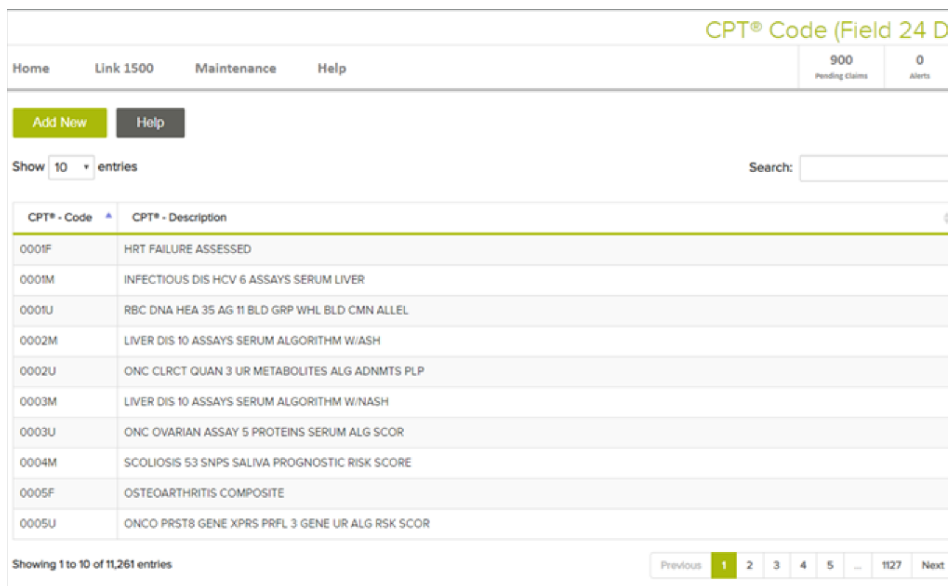
You cannot change the existing CPT codes and descriptions. This is global information available for all users. However, you can add your own CPT codes if an insurance company requires a code that is not on the list. The codes you create are only be visible to you.

1. Place your cursor over the Maintenance tab and click CPT® (Figure 2).



**Figure 2: Maintenance tab with CPT® selected**

2. The CPT® Code page displays (Figure 3) with all of the system-defined CPT codes shown in numerical order.



The screenshot shows the CPT® Code page. At the top right, it says "CPT® Code (Field 24 D)". Below the navigation tabs, there are two buttons: "Add New" and "Help". A search bar is present with the text "Search:". Below the search bar, there is a table with two columns: "CPT® - Code" and "CPT® - Description". The table contains the following data:

CPT® - Code	CPT® - Description
0001F	HRT FAILURE ASSESSED
0001M	INFECTIOUS DIS HCV 6 ASSAYS SERUM LIVER
0001U	RBC DNA HEA 35 AG 11 BLD GRP WHL BLD CMN ALLEL
0002M	LIVER DIS 10 ASSAYS SERUM ALGORITHM W/ASH
0002U	ONC CLRCT QUAN 3 UR METABOLITES ALG ADNMTS PLP
0003M	LIVER DIS 10 ASSAYS SERUM ALGORITHM W/NASH
0003U	ONC OVARIAN ASSAY 5 PROTEINS SERUM ALG SCOR
0004M	SCOLIOSIS 53 SNPS SALIVA PROGNOSTIC RISK SCORE
0005F	OSTEOARTHRITIS COMPOSITE
0005U	ONCO PRST8 GENE XPRS PRFL 3 GENE UR ALG RSK SCOR

At the bottom of the table, it says "Showing 1 to 10 of 11,261 entries". There is a pagination control with buttons for "Previous", "1", "2", "3", "4", "5", "...", "1127", and "Next".

**Figure 3: CPT® Code page**

- To create a CPT code, click **Add New**. The Add New CPT® Code page displays (Figure 4). You must enter information in both fields that appear.

Code - The code you enter must be five characters in length and cannot already exist on the global list.

Description - Enter a description that describes the code. The description can be no longer than 50 characters in length.

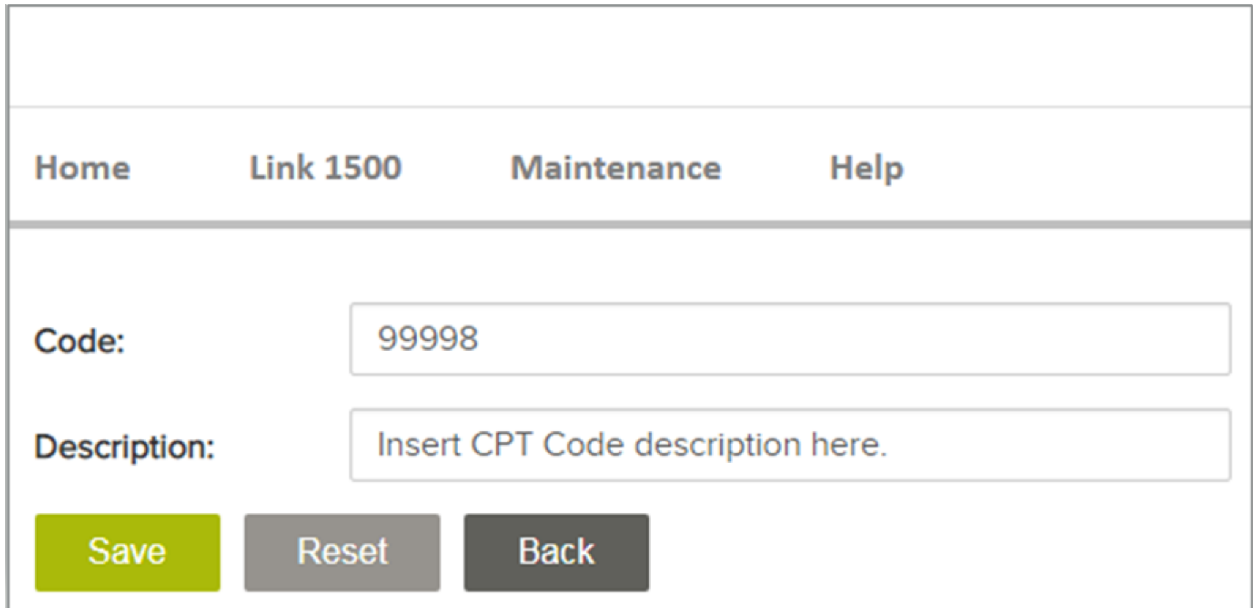


Figure 4: Add CPT® Code page

- Use the Search field to verify that the new code exists (Figure 5).

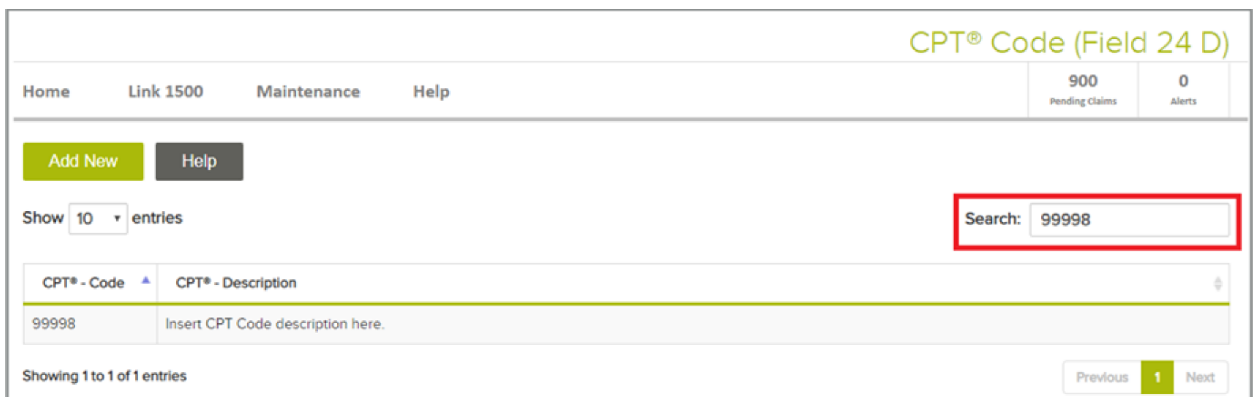


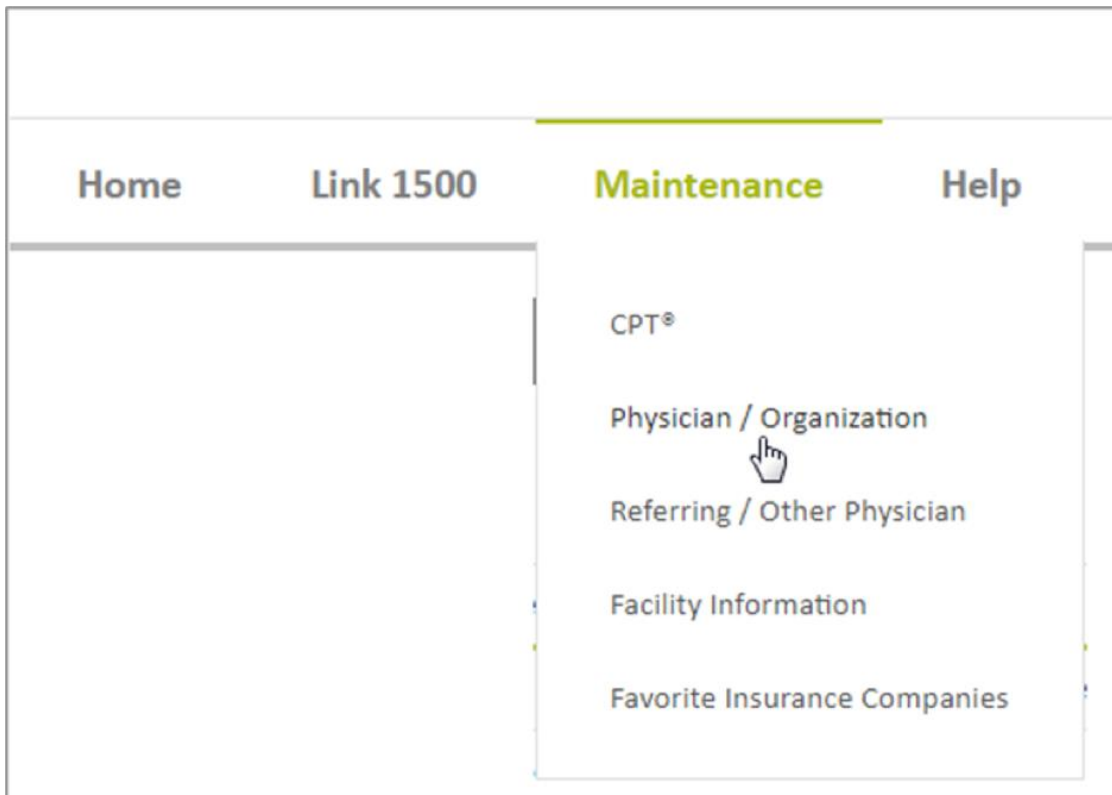
Figure 5: CPT® Code page with newly added Code displayed

## Physician / Organization

You must add physician information before you can submit your first claim. See the following section.

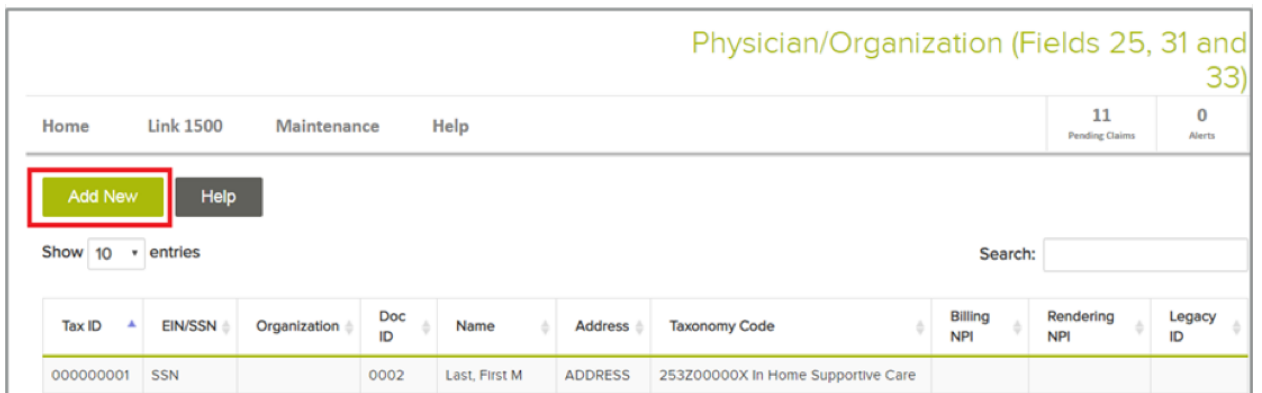
### Add Physician Information

1. Place your cursor over the Maintenance tab and click **Physician / Organization** (Figure 6).



**Figure 6: Maintenance tab with Physician / Organization menu option selected**

2. Click **Add New** on the Physician / Organization page that appears (Figure 7).



**Figure 7: Physician / Organization page with Add New indicated**

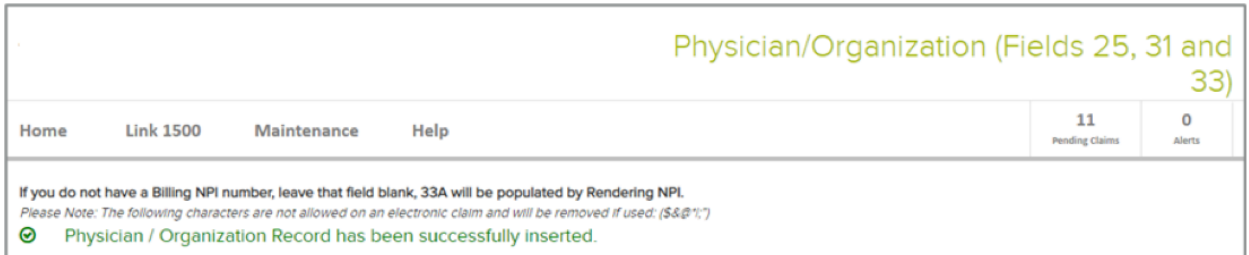
3. Enter all required information for your providers. Click **Save** to verify you have entered valid information in the all required fields.

NOTE: If you are a Medical Supply Company, select the Medical Supply Company Checkbox under Organization name. As a Medical Supply Company, the Name fields would no longer be available to you.

Claims Management places your organization name (instead of the first and last name of the physician) in boxes 31 (Signature of Physician or Supplier) and 33 (Billing Provider Info & Phone #) on the Claim form.

NOTE: If you do not have a Billing NPI number, leave that field blank, the system populates field 33A with the Rendering NPI.

4. Click **Save**. If all required information has been entered successfully, the message “Physician / Organization Record has been successfully inserted” appears (Figure 8). If not, error messages let you know those fields that need to be corrected.



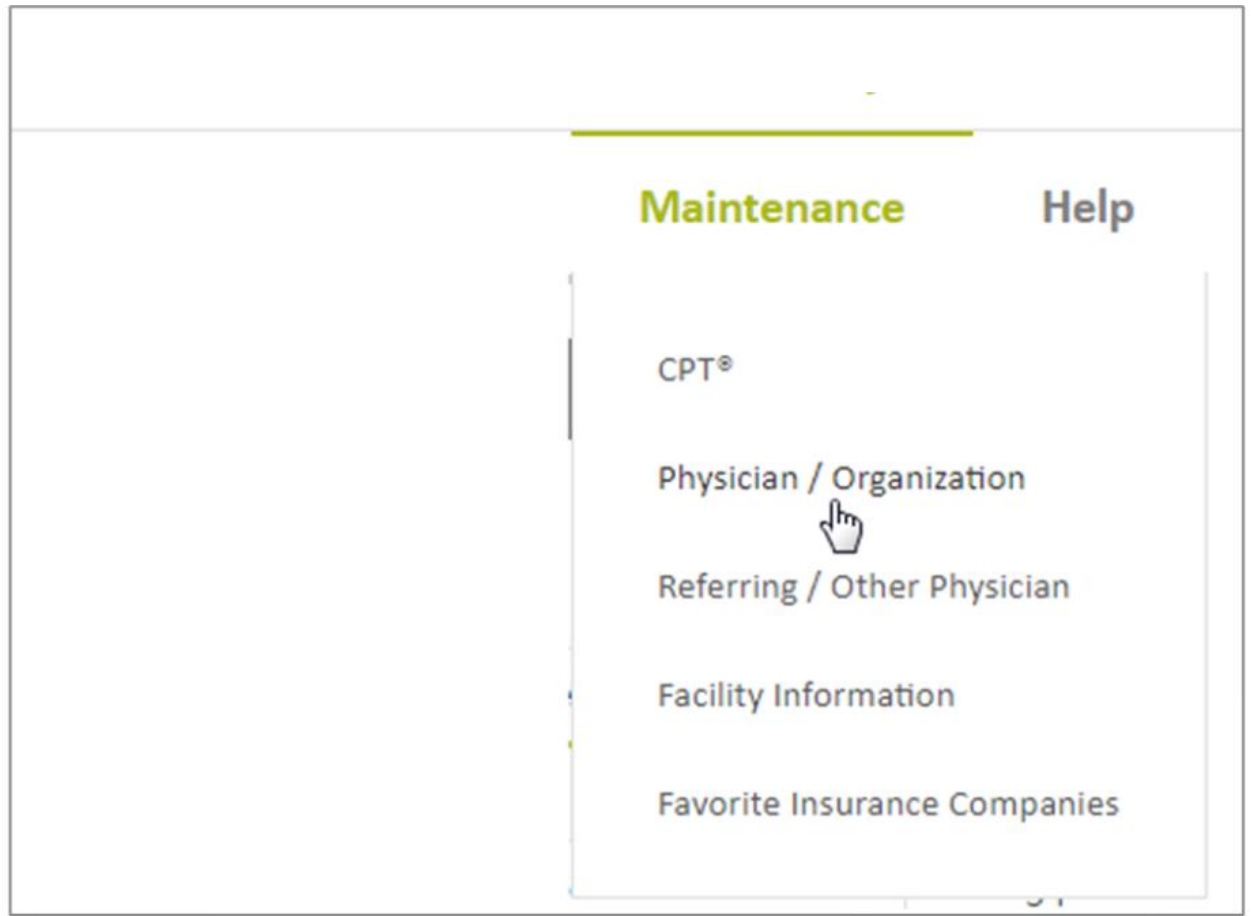
The screenshot shows a web interface for the Physician/Organization page. At the top right, the title "Physician/Organization (Fields 25, 31 and 33)" is displayed in green. Below the title is a navigation bar with links for "Home", "Link 1500", "Maintenance", and "Help". To the right of the navigation bar are two status boxes: "11 Pending Claims" and "0 Alerts". Below the navigation bar is a message area with a green checkmark icon and the text "Physician / Organization Record has been successfully inserted." Above this message is a note: "If you do not have a Billing NPI number, leave that field blank, 33A will be populated by Rendering NPI. Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@!;)"

**Figure 8: Physician / Organization page with a new successfully inserted physician record**

## Edit Physician Information

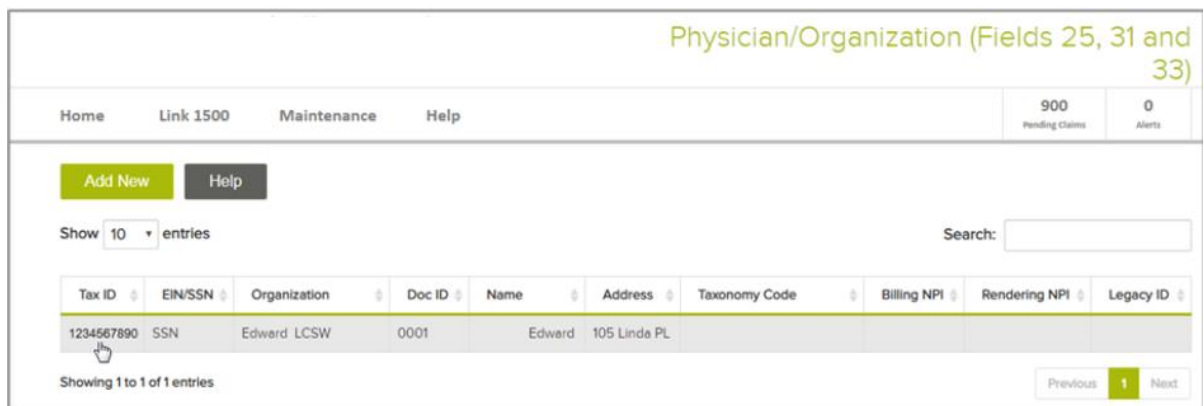
If you have already entered physician information and now need to edit it, refer to the following section.

1. Place your cursor over the Maintenance tab and click **Physician / Organization** (Figure 9).



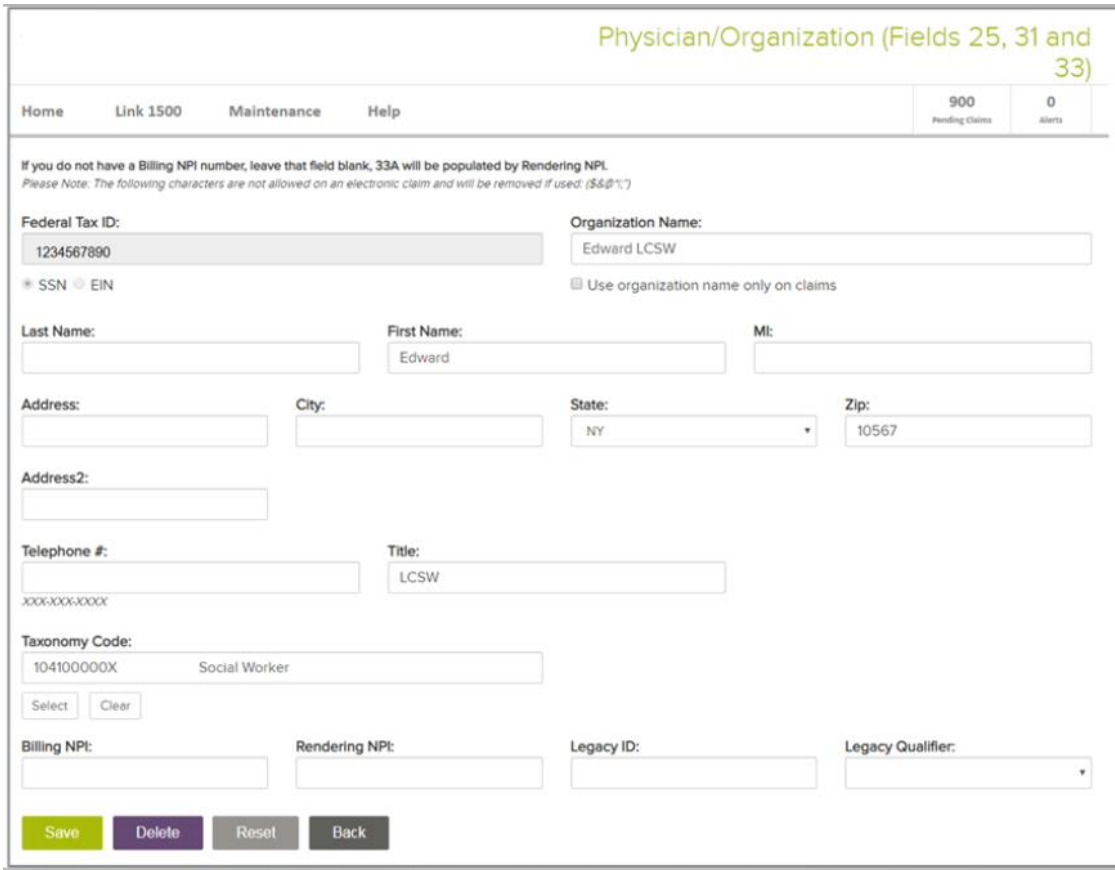
**Figure 9: Maintenance tab with Physician / Organization menu option selected**

2. Locate the entry you want to edit and click on it (Figure 10).



**Figure 10: Physician/Organization page with a single entry selected**

- You can edit all information except for Federal Tax ID on the Physician / Organization page (Figure 11). If you need to change the Federal ID, you must create a new physician/ organization record.



Physician/Organization (Fields 25, 31 and 33)

Home   Link 1500   Maintenance   Help      900 Pending Claims      0 Alerts

If you do not have a Billing NPI number, leave that field blank, 33A will be populated by Rendering NPI.  
 Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@%';)

Federal Tax ID:       Organization Name:

SSN    EIN       Use organization name only on claims

Last Name:       First Name:       MI:

Address:       City:       State:       Zip:

Address2:

Telephone #:       Title:

xxxx-xxx-xxxx

Taxonomy Code:       Social Worker

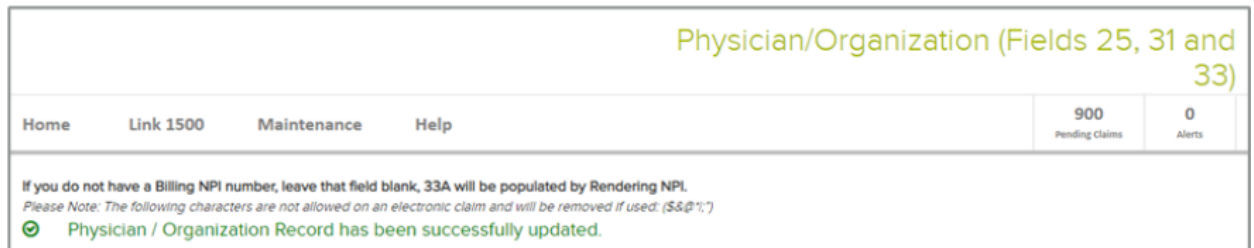
 

Billing NPI:       Rendering NPI:       Legacy ID:       Legacy Qualifier:

Figure 11: Physician / Organization page with information to be edited

- Once you have updated information, click **Save**. A message appears that the record has been successfully updated (Figure 12) or you may see a message to indicate fields you entered that need to be addressed.



Physician/Organization (Fields 25, 31 and 33)

Home   Link 1500   Maintenance   Help      900 Pending Claims      0 Alerts

If you do not have a Billing NPI number, leave that field blank, 33A will be populated by Rendering NPI.  
 Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@%';)

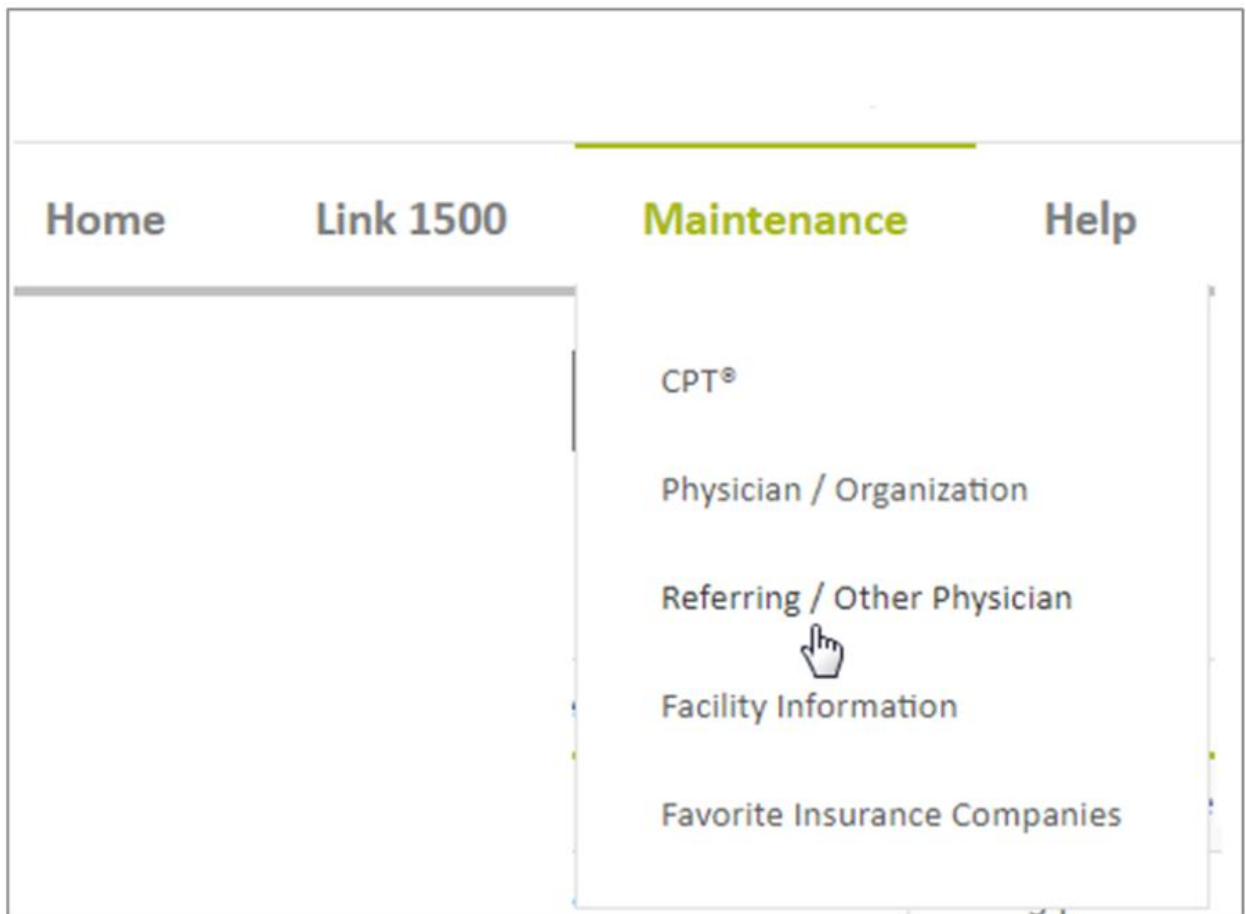
✔ Physician / Organization Record has been successfully updated.

Figure 12: Physician / Organization page with successfully updated message

## Referring / Other Physician

If you routinely add or edit Referring Physician information to your claims, complete the following section.

1. Place your cursor over the Maintenance tab and click **Referring / Other Physician** (Figure 13).



**Figure 13: Maintenance tab with Referring / Other Physician menu option selected**

2. Click **Add New** to add a new Referring Physician record. If you need to edit an existing Referring Physician that has already been entered, use the Search field to enter all or part of the physician name (Figure 14).



**Figure 14: Referring / Other Provider page with Add New and Search fields indicated**

3. The Referring / Other Provider Information page appears (Figure 15). Enter all required information and click **Save**. If all required information has been entered successfully, the message “Referring / Other Provider has been successfully inserted” appears. If not, error messages let you know those fields you need to address.

Referring / Other Provider (Field 17)			
Home	Link 1500	Maintenance	Help
		11 Pending Claims	0 Alerts
<i>Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&amp;@%';)</i>			
✔ Referring / Other Provider has been successfully inserted.			

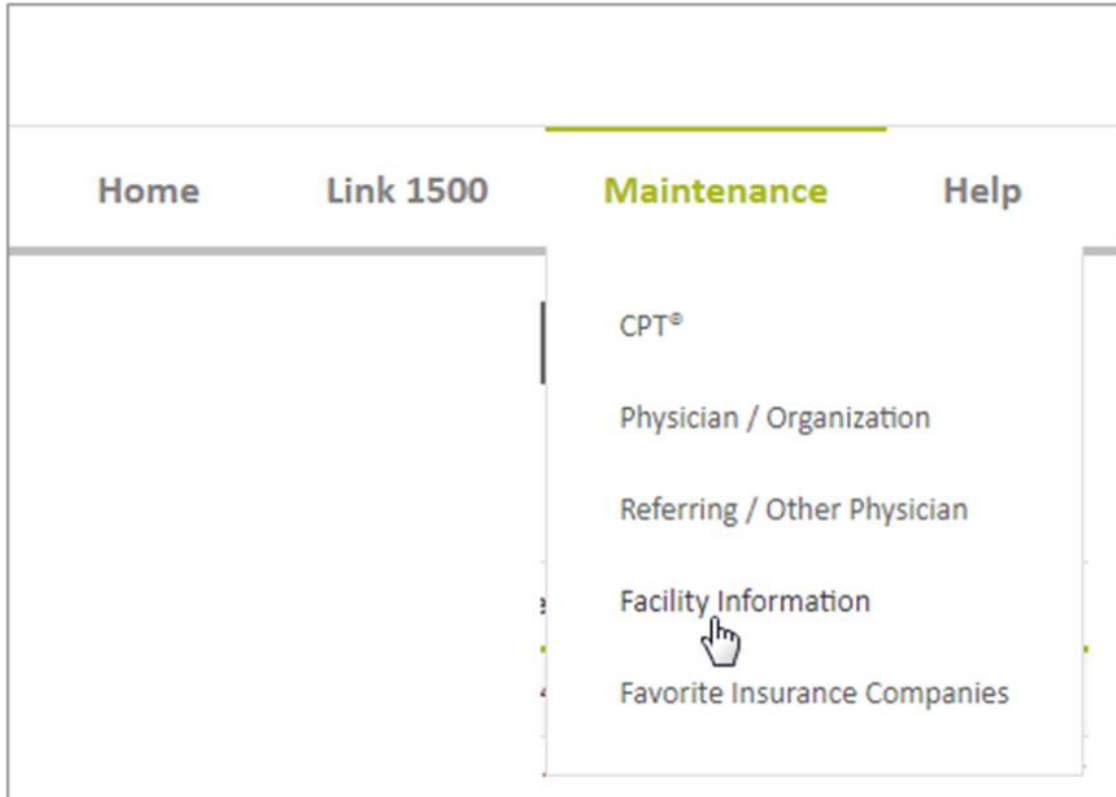
**Figure 15: Physician / Organization page with successfully inserted message indicated**



## Facility Information

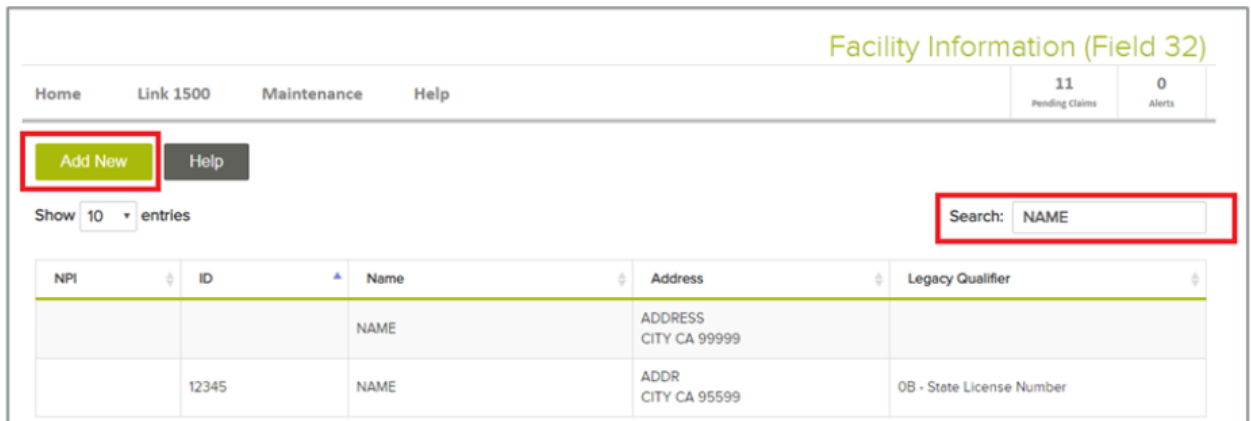
If you routinely add or edit Facility information to your claims, complete the following section.

1. Place your cursor over the Maintenance tab and click **Facility Information** (Figure 16).



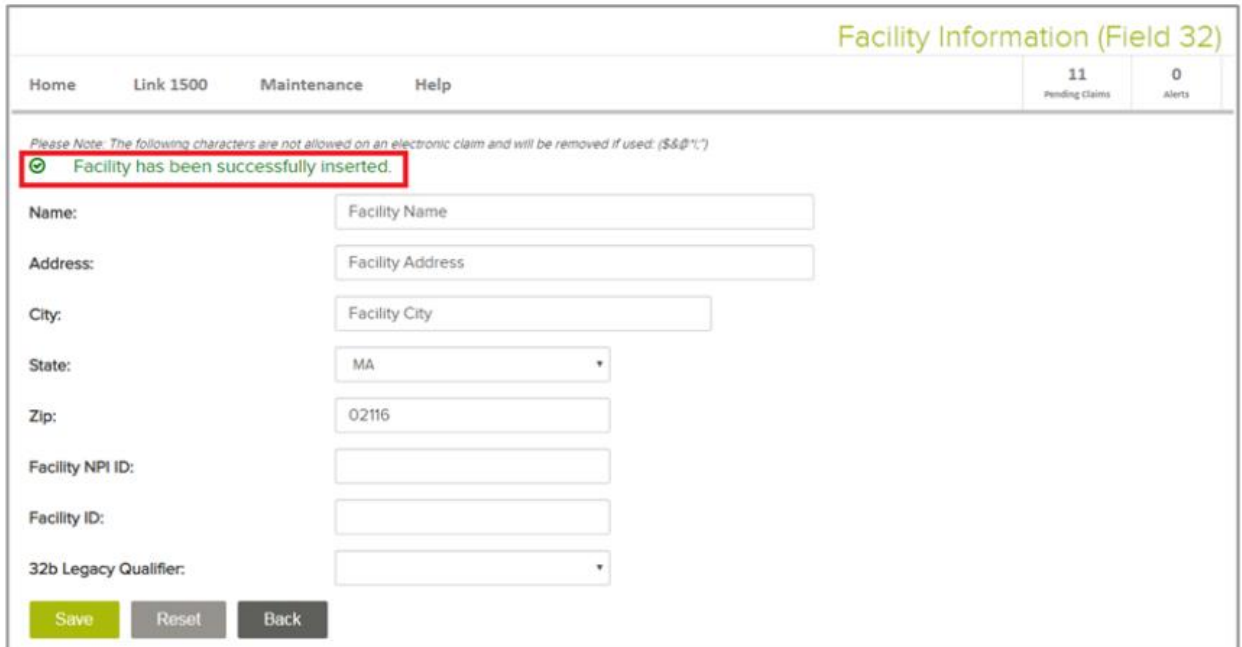
**Figure 16: Maintenance tab with Facility Information selected**

2. Click **Add New** to add Facility Information. If you need to edit existing Facility Information, use the Search field to enter all or part of the physician name (Figure 17). To save a facility record, you must enter information in all of the required fields.



**Figure 17: Facility Information page with Add New and Search fields indicated**

3. Click **Save**. Either a message displays that the facility has been successfully inserted (Figure 18) or error messages let you know those fields that need to be addressed.



The screenshot shows the 'Facility Information (Field 32)' page. At the top right, there are statistics: 11 Pending claims and 0 Alerts. Below the navigation bar, a note states: 'Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@!;)'. A green success message with a checkmark icon is displayed: 'Facility has been successfully inserted.' Below this message are input fields for Name, Address, City, State (set to MA), Zip (02116), Facility NPI ID, Facility ID, and 32b Legacy Qualifier. At the bottom are 'Save', 'Reset', and 'Back' buttons.

**Figure 18: Facility page with Facility successfully inserted message indicated**

## Favorite Insurance Companies

Submitting your first claim is easier if you have already entered your insurance company information into Claims Management. Refer to the following instructions.

This section contains the following topics:

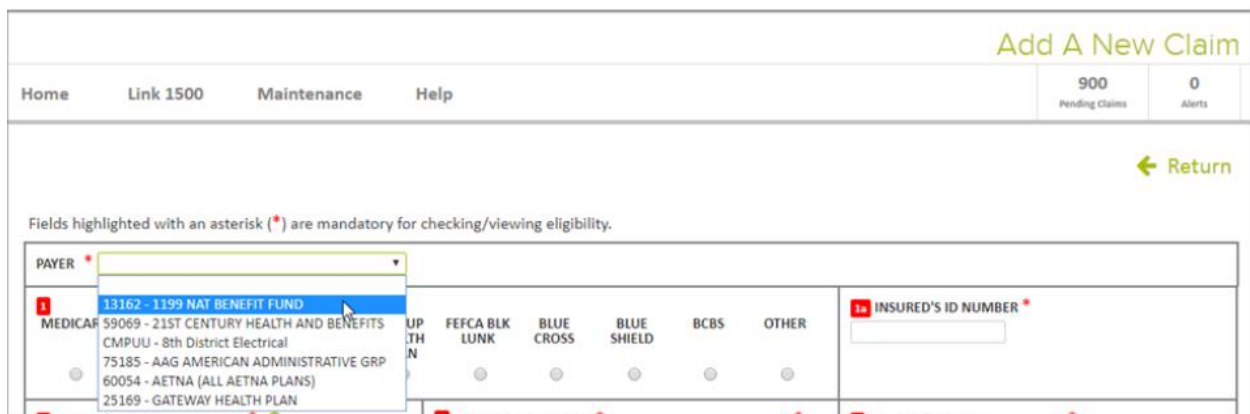
- Edit the List of Favorite Insurance Companies
- Add a New Favorite Insurance Company
- Modify an existing Favorite Insurance Company

To remove any information you have entered without saving it, click **Reset** or **Clear**.

To return to the previously displayed page, click **Back**.

## Edit the List of Favorite Insurance Companies

Use the Favorite Insurance Companies option to display your favorites in a drop-down box on your claim form (Figure 19).

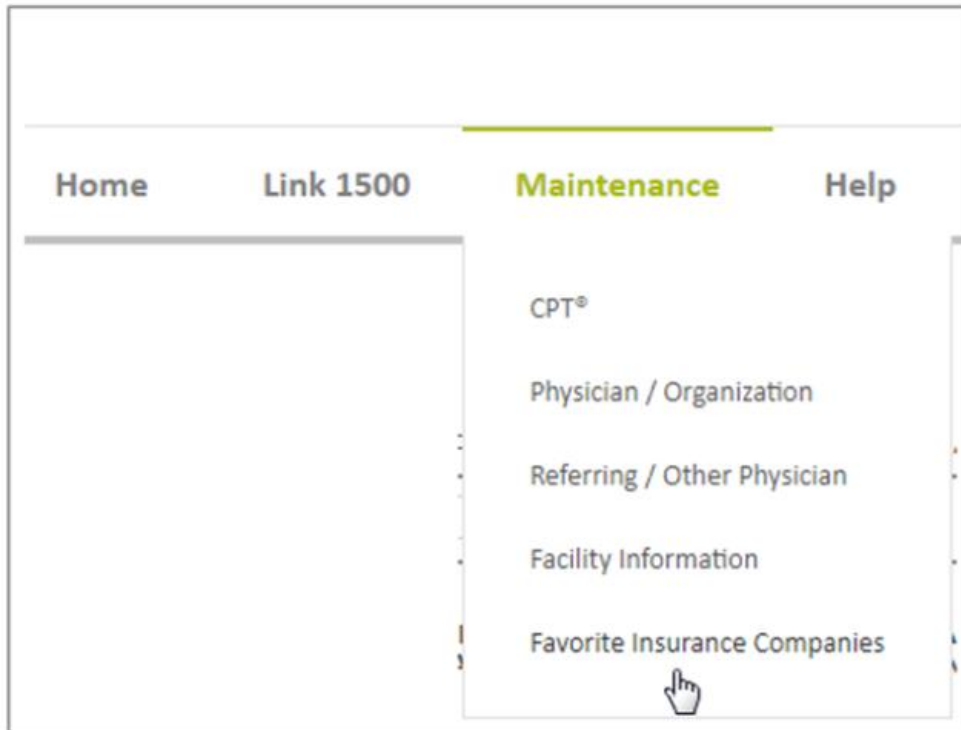


The screenshot shows a web interface for 'Add A New Claim'. At the top, there are navigation links: Home, Link 1500, Maintenance, and Help. On the right, there are statistics: 900 Pending Claims and 0 Alerts. A 'Return' button is also present. Below this, a note states: 'Fields highlighted with an asterisk (\*) are mandatory for checking/viewing eligibility.' The main form area contains a 'PAYER' dropdown menu with a red asterisk. The dropdown is open, showing a list of insurance companies: '13162 - 1199 NAT BENEFIT FUND' (highlighted), '59069 - 21ST CENTURY HEALTH AND BENEFITS', 'CMPUU - 8th District Electrical', '75185 - AAG AMERICAN ADMINISTRATIVE GRP', '60054 - AETNA (ALL AETNA PLANS)', and '25169 - GATEWAY HEALTH PLAN'. To the right of the dropdown are radio buttons for 'MEDICARE', 'UP WITH IN', 'FECA BLK LUNK', 'BLUE CROSS', 'BLUE SHIELD', 'BCBS', and 'OTHER'. Further right is a field for 'INSURED'S ID NUMBER' with a red asterisk.

Figure 19: Payer dropdown box with Favorite Insurance Companies displayed

The dropdown menu allows you to access your most frequently used insurance carriers with one click.

1. Place your cursor over the Maintenance tab and click **Favorite Insurance Companies** (Figure 20).



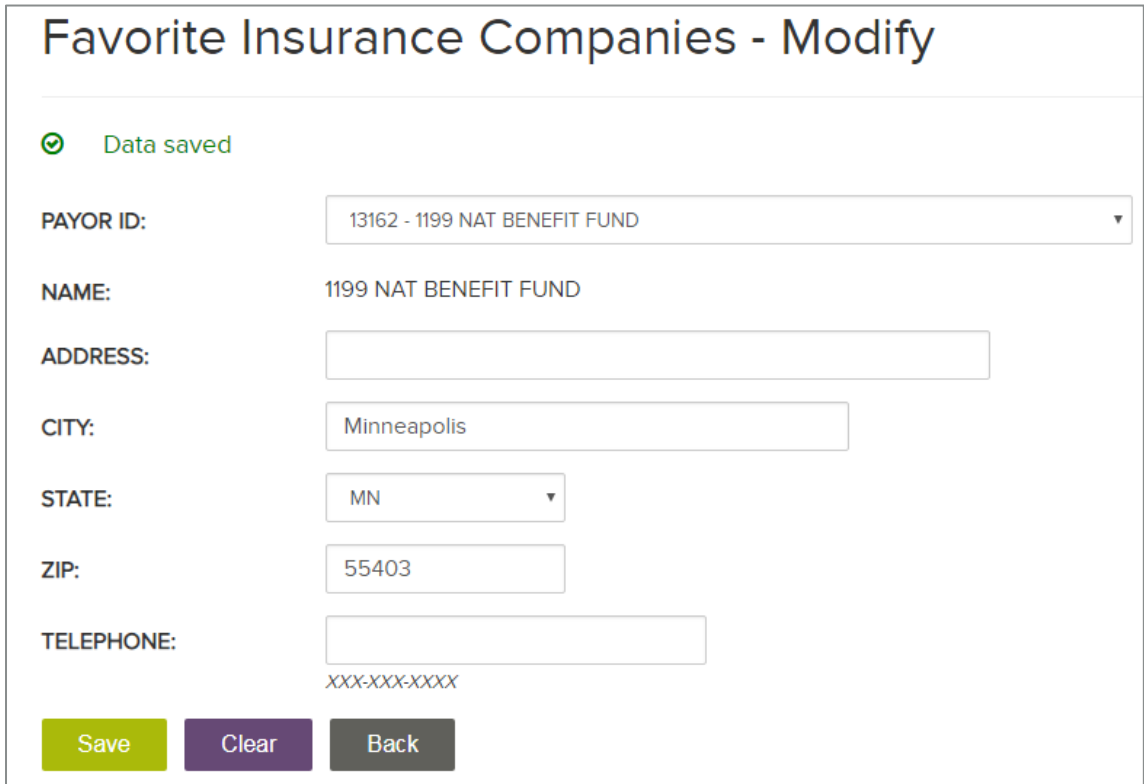
**Figure 20: Maintenance tab with Favorite Insurance Companies indicated**

2. Use the Search feature to enter partial names or numbers that can help you limit the companies that display on the Master Payer List. Use the arrow buttons to move insurance companies between the two Master Payer and Favorites lists (Figure 21).



**Figure 21: Favorite Insurance Companies page with Search field and arrows indicated**

3. Enter all required information and click **Save**. If all the information has been entered successfully, the message “Data Saved” appears (Figure 22). If not, error messages let you know those fields that need to be addressed.



**Favorite Insurance Companies - Modify**

✔ Data saved

**PAYOR ID:** 13162 - 1199 NAT BENEFIT FUND

**NAME:** 1199 NAT BENEFIT FUND

**ADDRESS:**

**CITY:** Minneapolis

**STATE:** MN

**ZIP:** 55403

**TELEPHONE:**

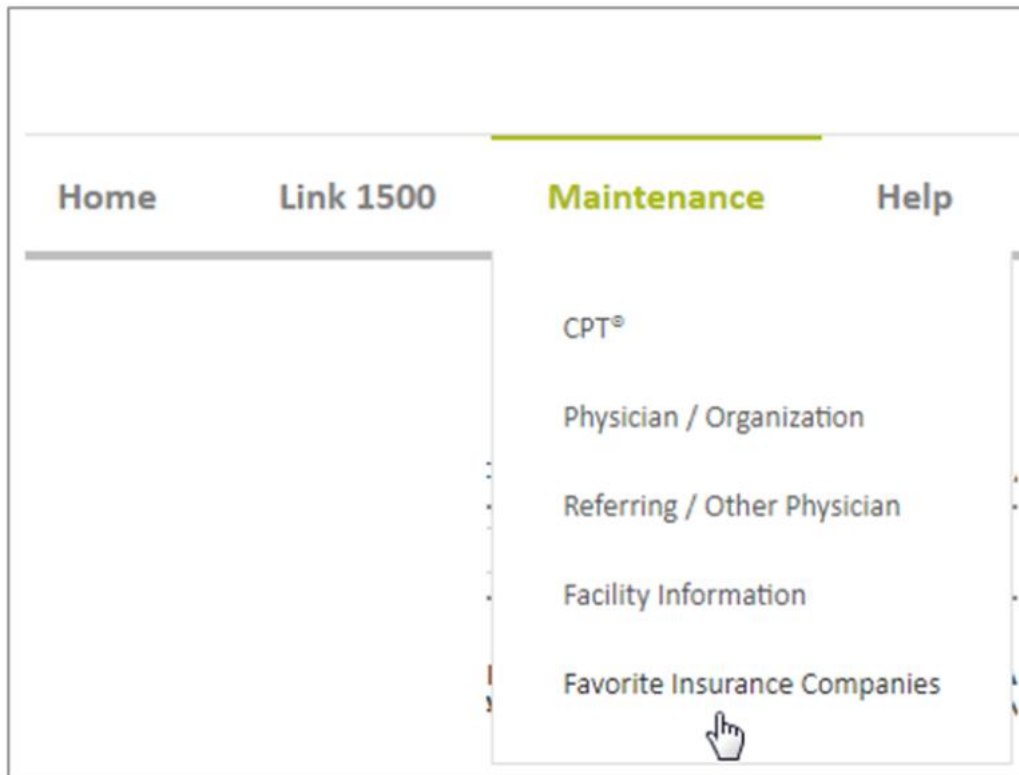
XXX-XXX-XXXX

**Save** **Clear** **Back**

**Figure 22: Favorite Insurance Companies - Modify page with Data Saved message displayed**

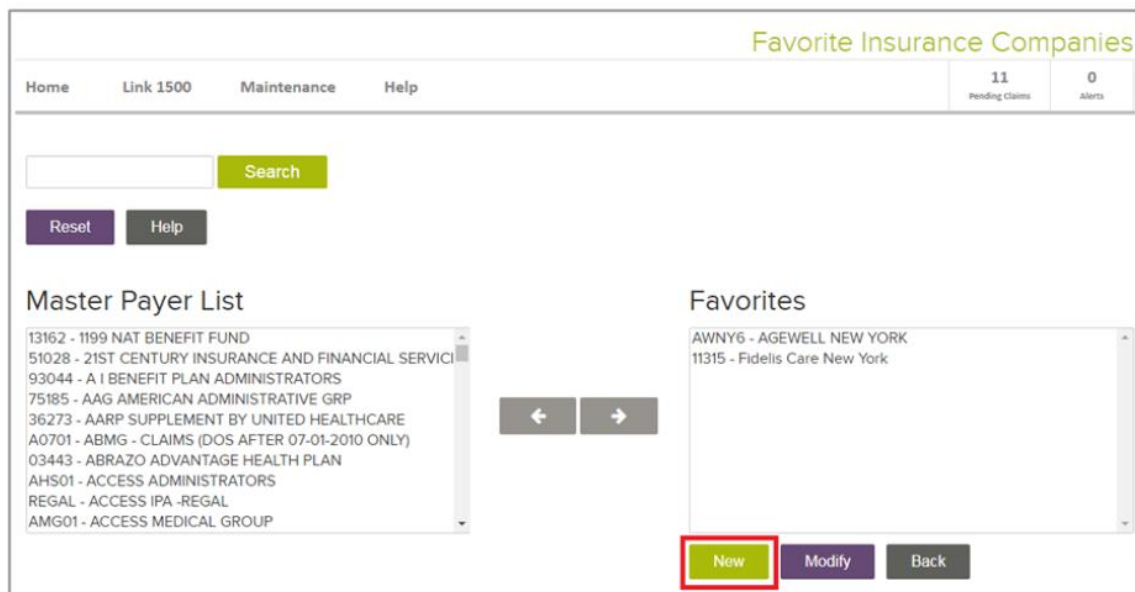
## Add a New Favorite Insurance Company

1. Place your cursor over the Maintenance tab and click **Favorite Insurance Companies** (Figure 23).



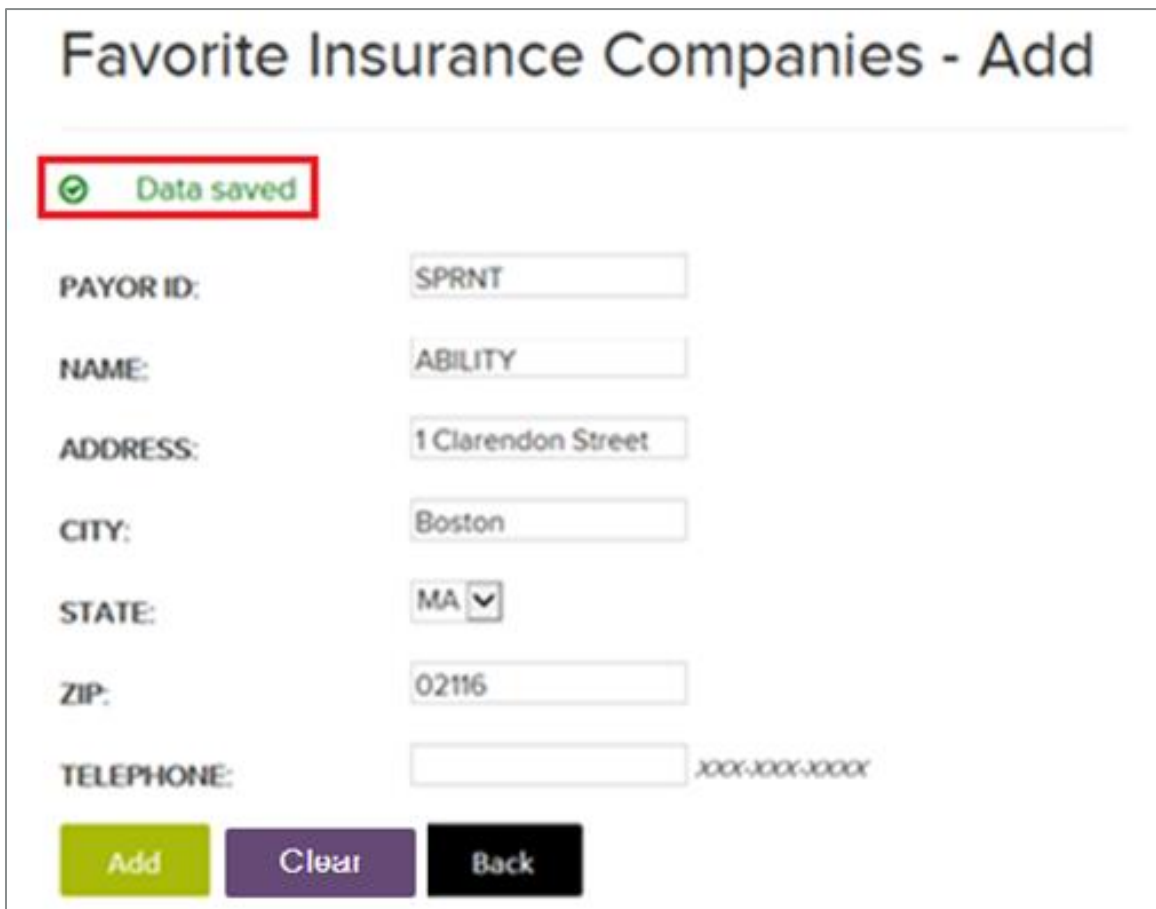
**Figure 23: Maintenance tab with Favorite Insurance Companies indicated**

2. On the Favorite Insurance Companies page, click **New** (Figure 24).



**Figure 24: Favorite Insurance Companies page with New selected**

3. All fields except Telephone are required. Enter all required information and click **Add**. The message Data saved appears (Figure 25) or the system directs you to any fields you need to correct.



**Favorite Insurance Companies - Add**

**Data saved**

PAYOR ID:

NAME:

ADDRESS:

CITY:

STATE:

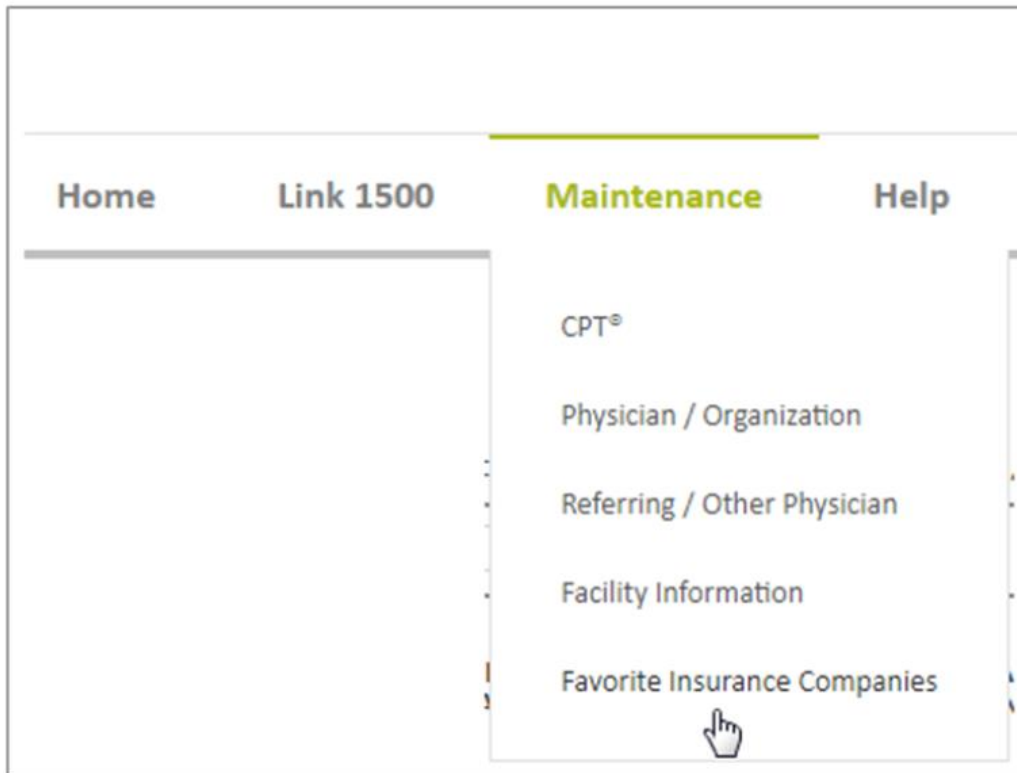
ZIP:

TELEPHONE:  xxx-xxx-xxxx

Figure 25: Favorite Insurance Companies - Add page with Data Saved message indicated

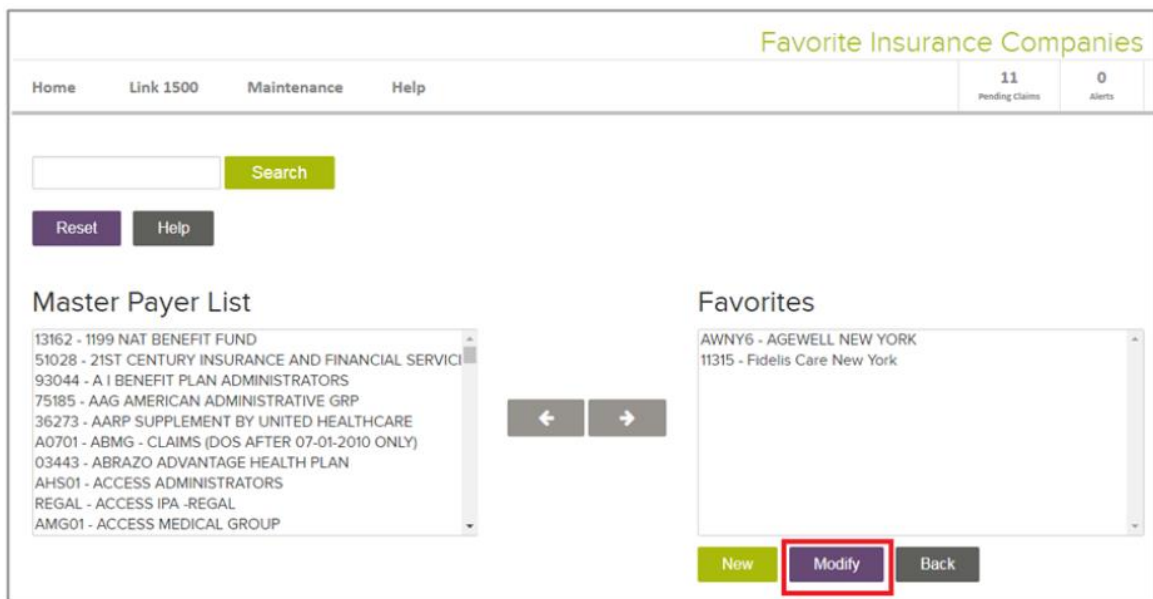
## Modify a Favorite Insurance Company

1. Place your cursor over the Maintenance tab and click **Favorite Insurance Companies** (Figure 26).



**Figure 26: Maintenance tab with Favorite Insurance Companies indicated**

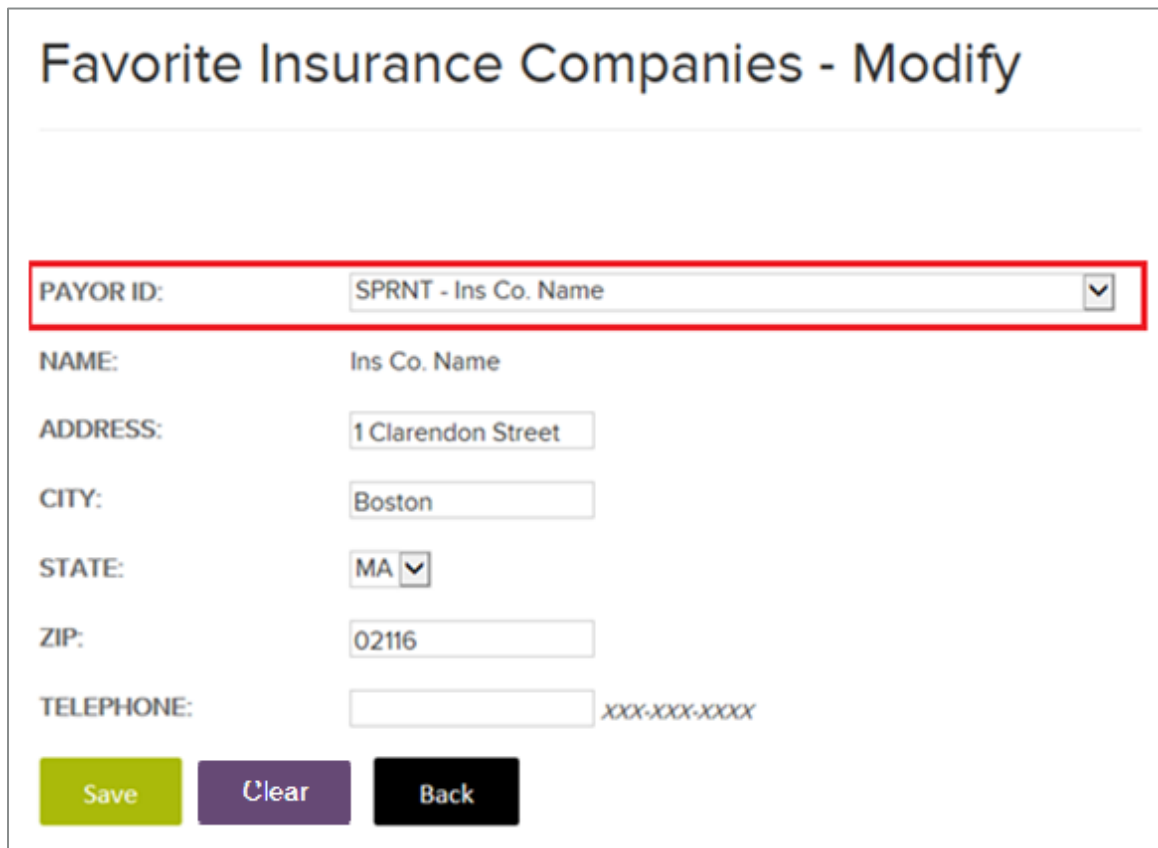
2. On the Favorite Insurance Companies page, click **Modify** (Figure 27).



**Figure 27: Favorite Insurance Companies page with Modify selected**



3. All fields except Telephone are required. You can change multiple Payer IDs by selecting them individually through the dropdown box in this field (Figure 28). Enter all required information and click **Save**. The message Data Saved appears or the system directs you to fields you need to correct.



**Favorite Insurance Companies - Modify**

**PAYOR ID:**

**NAME:**

**ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TELEPHONE:**  xxx-xxx-xxxx

Figure 28: Favorite Insurance Companies - Modify page with Payer ID field indicated

## Send a Claim to a Payer not on the Master Payer List

Federal regulations prevent Inovalon from printing and mailing some claim types. These include all Medicare carriers and a very small number of Medicaid payers. If you are unsure of your options, contact Inovalon Technical Support for assistance at 612.460.4310 or 888.460.4310 from 7 AM to 6 PM (CT) Monday through Friday.

To send a paper claim to a payer that is NOT on our Master Payer list:

1. On the Favorite Insurance Companies screen, click **New** (Figure 29).

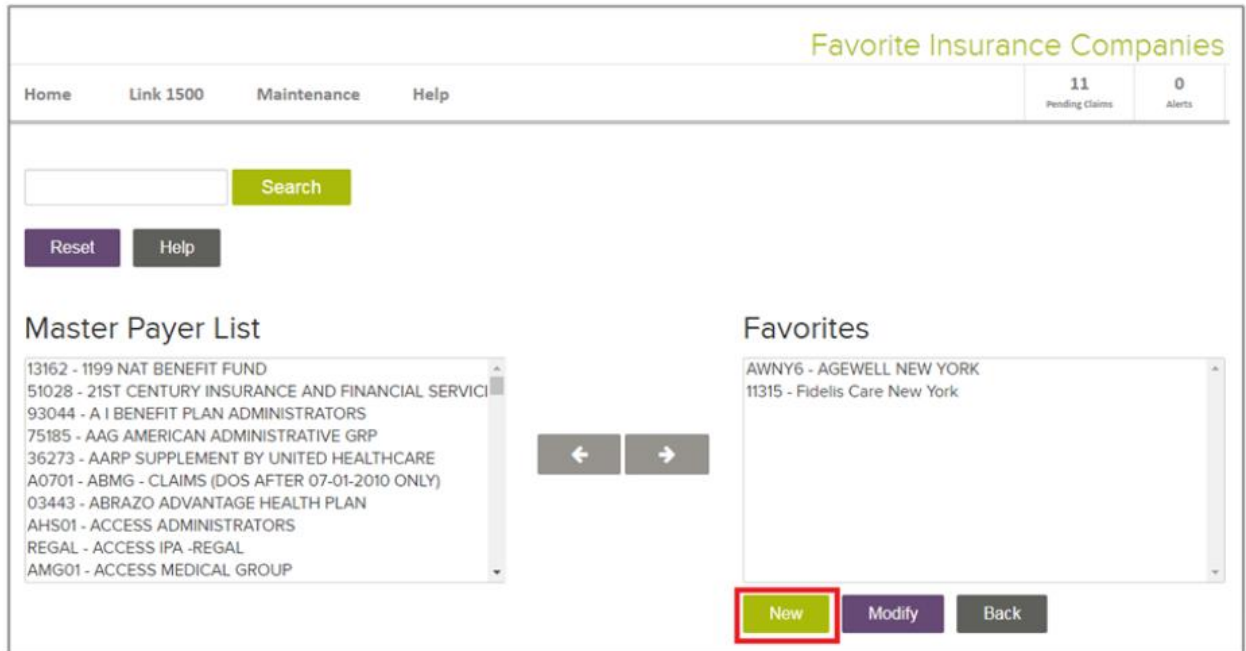
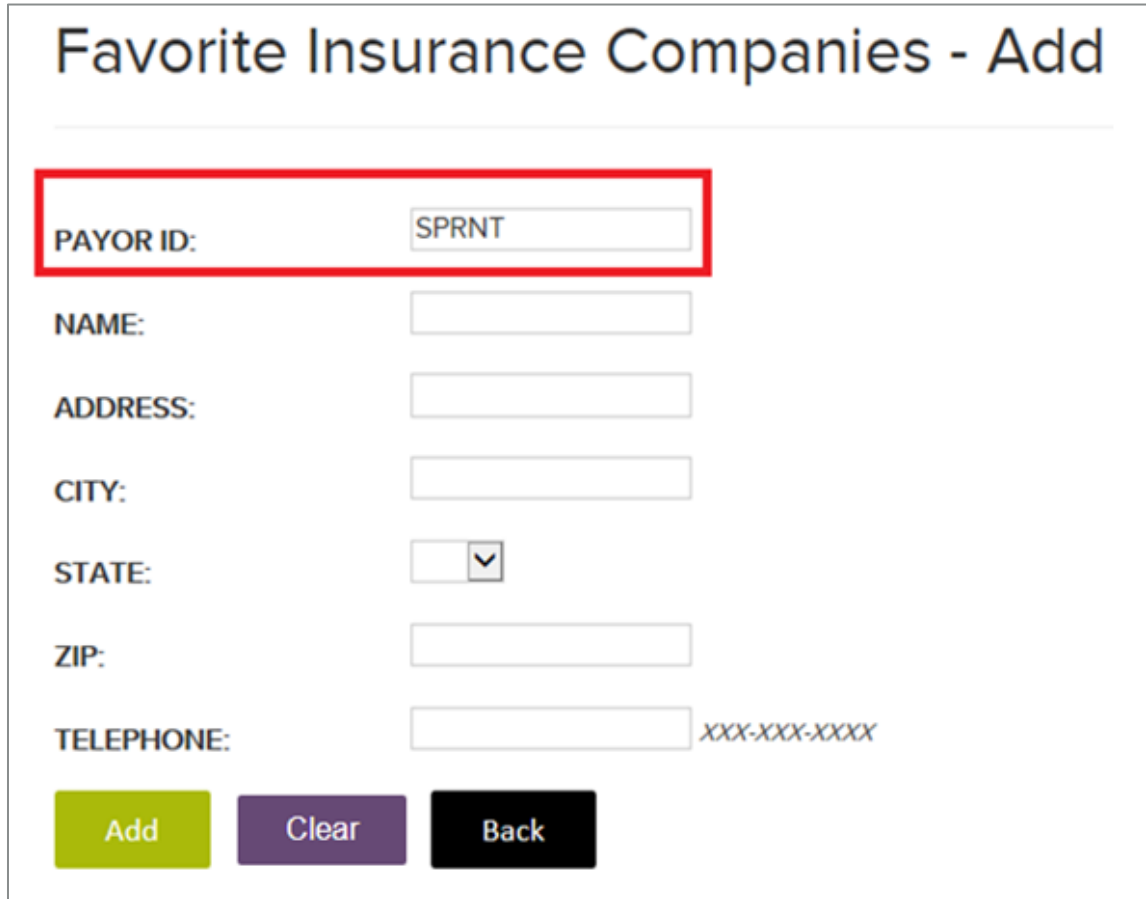


Figure 29: Favorite Insurance Companies page with New selected

2. Enter the insurance company information (Figure 30).

**IMPORTANT: You must enter SPRNT in the Payer ID field when entering payers not on the Master Payer List.**



**Favorite Insurance Companies - Add**

**PAYOR ID:**

**NAME:**

**ADDRESS:**

**CITY:**

**STATE:**

**ZIP:**

**TELEPHONE:**  XXX-XXX-XXXX

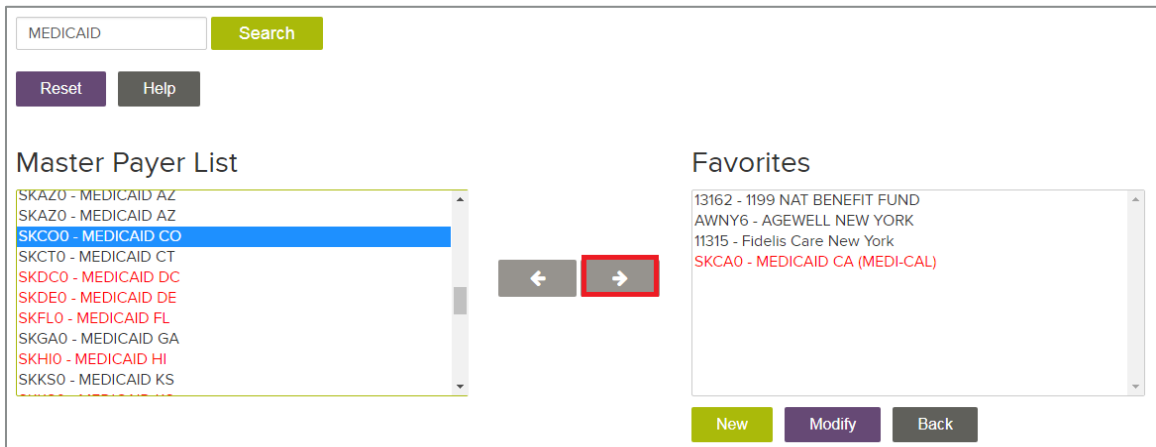
**Figure 30: Favorite Insurance Companies page with Payer ID (SPRNT indicated)**

3. Click **Add** to add the insurance company information as one of your Payer IDs.

## Send a Claim to an Insurance Company that Requires Enrollment

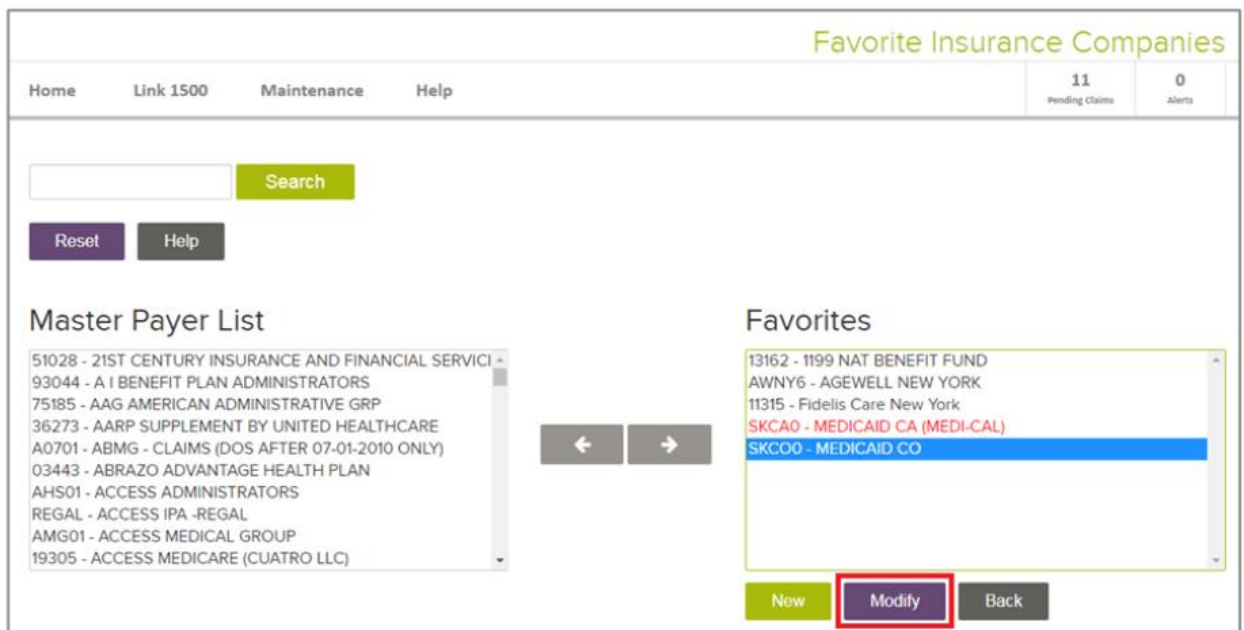
Insurance companies listed in **RED** require registration before you can send claims to them electronically. Until you have successfully completed the registration process with them, your claims must be sent on paper. To temporarily send by paper:

1. Highlight the carrier name in the Master Payer List and click the arrow to add it to your Favorites list (Figure 31).



**Figure 31: Favorite Insurance Companies page with Payer ID selected and arrow indicated**


2. Select the carrier name from your Favorites list. Click **Modify** (Figure 32).



**Figure 32: Favorite Insurance Companies page with Medicare MA Payer selected**

3. Enter information as to where the claim should be mailed (Figure 33). Click **Save**.

## Favorite Insurance Companies - Modify

 Data saved

**PAYOR ID:** SKCO0 - MEDICAID CO

**NAME:** MEDICAID CO

**ADDRESS:** 1 Main Street

**CITY:** Denver

**STATE:** CO

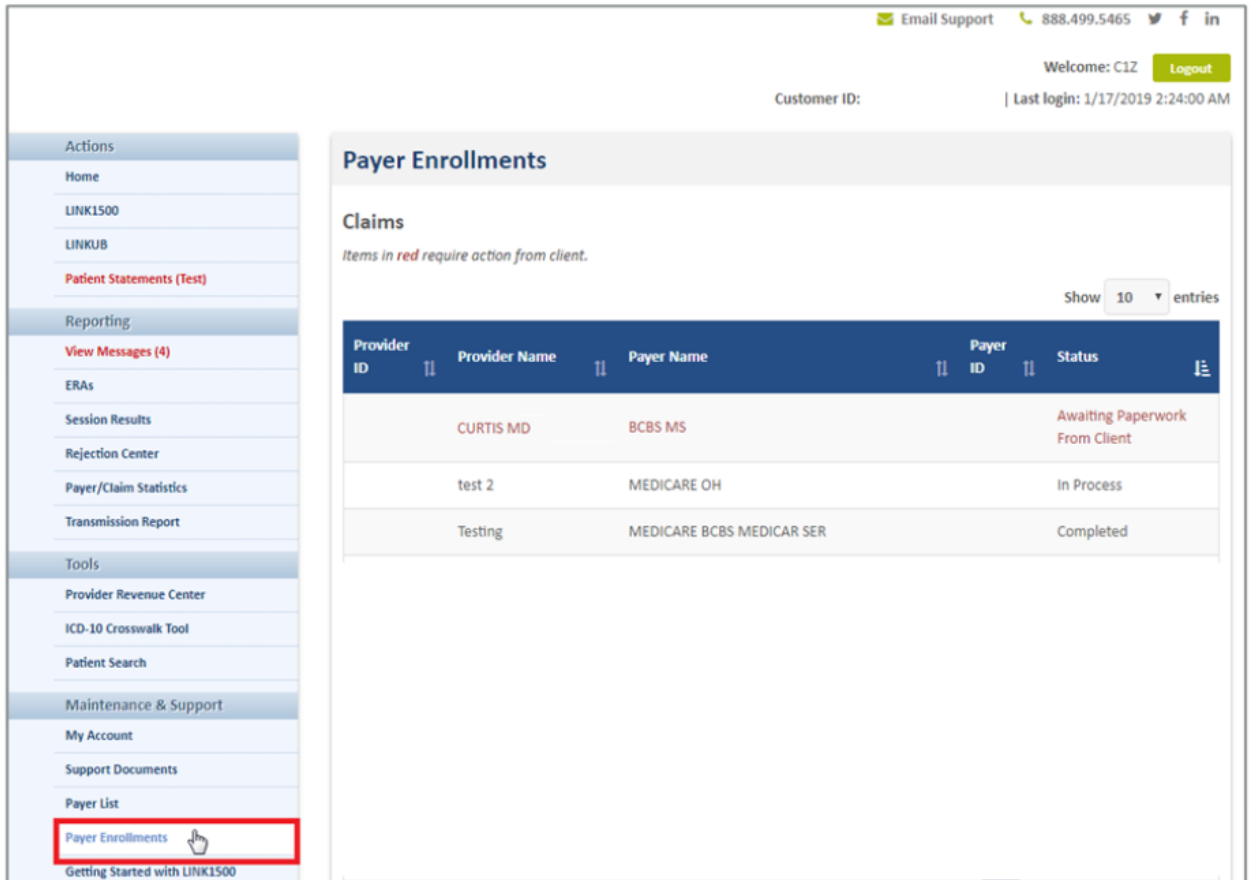
**ZIP:** 80012

**TELEPHONE:**   
XXX-XXX-XXXX

**Save** **Clear** **Back**

**Figure 33: Favorite Insurance Companies - Modify page with address information**

- When completing a claim, select the payer from the drop-down list on the claim form. After you are approved for e-submission to a payer, claims are sent electronically. This information is available to you through the Payer Enrollments link on your Portal Dashboard (Figure 34).



The screenshot shows the Inovalon Portal Dashboard. At the top right, there are links for Email Support, a phone number (888.499.5465), and social media icons. Below this, it says "Welcome: C12" and "Logout". The "Customer ID:" field is empty, and the "Last login:" is "1/17/2019 2:24:00 AM".

The left sidebar contains a menu with the following items:

- Actions
  - Home
  - LINK1500
  - LINKUB
  - Patient Statements (Test)
- Reporting
  - View Messages (4)
  - ERAs
  - Session Results
  - Rejection Center
  - Payer/Claim Statistics
  - Transmission Report
- Tools
  - Provider Revenue Center
  - ICD-10 Crosswalk Tool
  - Patient Search
- Maintenance & Support
  - My Account
  - Support Documents
  - Payer List
  - Payer Enrollments** (highlighted with a red box)
  - Getting Started with LINK1500

The main content area is titled "Payer Enrollments" and "Claims". Below the title, it says "Items in red require action from client." There is a "Show 10 entries" dropdown menu. The table below has the following data:

Provider ID	Provider Name	Payer Name	Payer ID	Status
	CURTIS MD	BCBS MS		Awaiting Paperwork From Client
	test 2	MEDICARE OH		In Process
	Testing	MEDICARE BCBS MEDICAR SER		Completed

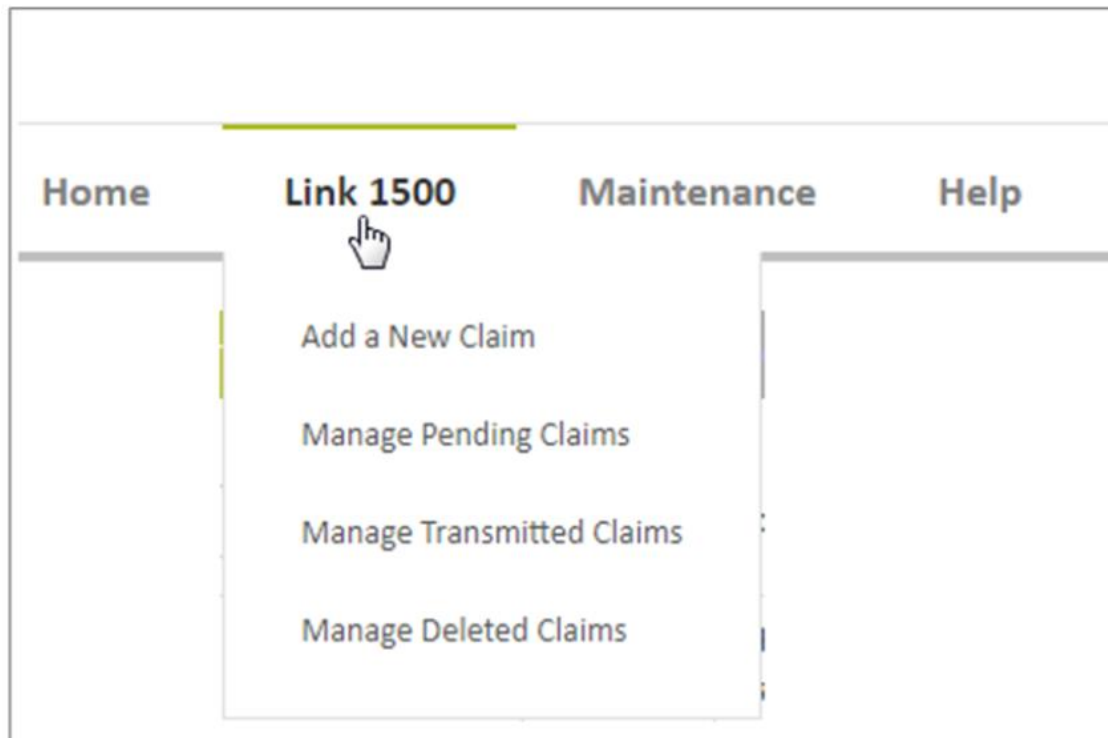
Figure 34: Portal Dashboard page with Payer Enrollments indicated

## LINK 1500 TAB

The Link 1500 menu option provides you with the following options:

Option Name	Description
<b>Add a New Claim</b>	Complete a new claim form. After you successfully complete and save the form, the new claim appears on the Manage Pending Claims page
<b>Manage Pending Claims</b>	Send a claim to an insurance company. You can also view, copy, edit, and delete claims that appear on this page. After you send a claim, the claim appears on the Manage Transmitted Claim page.
<b>Manage Transmitted Claim</b>	View, copy, or delete claims that you have previously submitted (transmitted) to an insurance company.
<b>Manage Deleted Claims</b>	View and recover (restore) previously deleted claims



Figure 35 shows the Link 1500 options available to you.



**Figure 35: Link 1500 tab with menu options displayed**

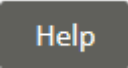
## Dashboard Display Entries and Search Option

Use the following table to help you with searching and showing entries when managing claims:

Graphic	Name	Description
	Show entries	You can also use the Show drop-down box to change the number of claims that display on your screen. Available selections are 10 (the default), 25, 50, and 100.
	Search box with text box	Select a search category, enter full or partial information. Click <b>Search</b> to search the text entry. Click <b>Clear</b> to erase the text entry.  NOTE: Search categories vary depending upon whether you are managing Pending, Transmitted, or Delete claims. Claim ID is default.

## Help

Claims Management provides on-screen help text for all the Link 1500 Tab menu options. You can display this text

by clicking . When you create a New Claim or edit an Existing Claim, help is available through a Form Validation panel. Select the error and address the issue (Figure 36).

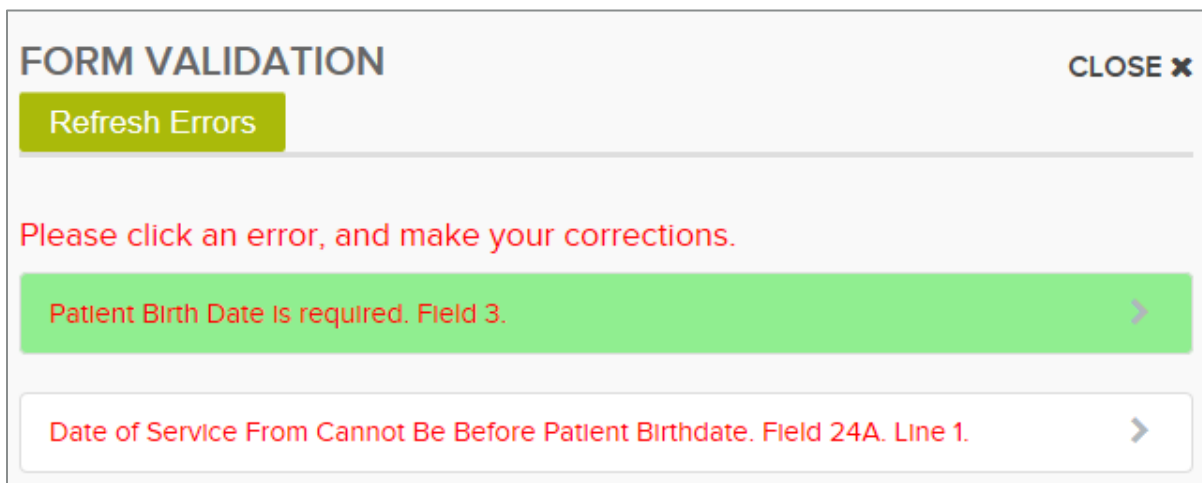



Figure 36: Form Validation panel with first item selected



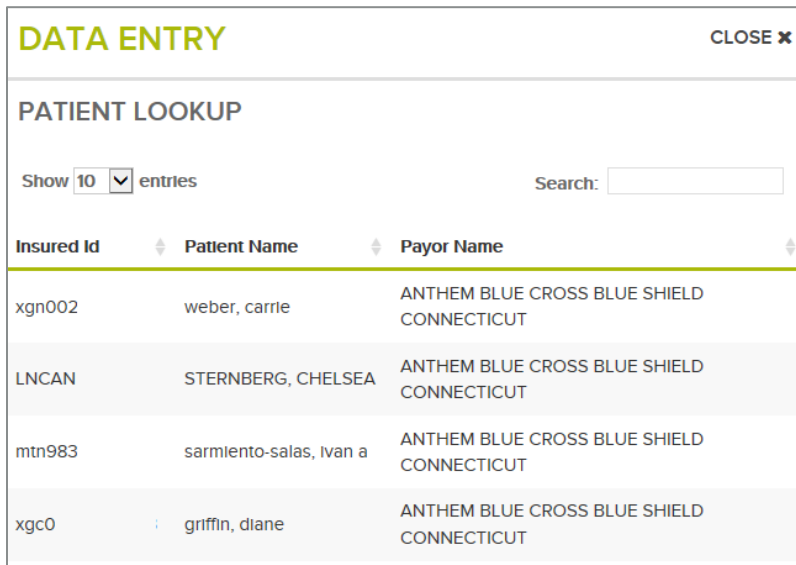
## Auto Select Feature

To help you manage your claims, Claims Management has an auto-fill feature for selected fields. If you see a magnifying glass icon (  ), click it to open a data entry panel with information for that field (Figure 37).



**Figure 37: Patient's Name field on Claim form with magnifying glass icon indicated**

For example, if you click this icon on the Patient's Name field, the Data Entry page for Patient Lookup displays (Figure 38). Click any patient row to automatically add that information to your claim. Use the Search box to look up information for any of the columns listed.



Insured Id	Patient Name	Payor Name
xgn002	weber, carrie	ANTHEM BLUE CROSS BLUE SHIELD CONNECTICUT
LNCAN	STERNBERG, CHELSEA	ANTHEM BLUE CROSS BLUE SHIELD CONNECTICUT
mtn983	sarmiento-salas, Ivan a	ANTHEM BLUE CROSS BLUE SHIELD CONNECTICUT
xgc0	griffin, dlane	ANTHEM BLUE CROSS BLUE SHIELD CONNECTICUT

**Figure 38: Data Entry panel for Patient Lookup field**



You can use the Auto Select feature for the following fields:

Field Name	Field Number
<b>Patient's Name</b>	Field 2
<b>Name of Referring Physician or Other Source</b>	Field 17
<b>Diagnosis or Nature of Illness or Injury</b>	Field 21
<b>Service Line (Place of Service)</b>	Field 24 B
<b>Service Line (Procedure, Services, or Supplies)</b>	Field 24 D
<b>Federal Tax ID Number</b>	Field 25
<b>Service Facility Location Info</b>	Field 32

## Add a New Claim

---

The following instructions describe how to add a new claim.

NOTE: You have approximately 20 minutes to create and save a claim before your session automatically ends. After 20 minutes, the Session Expired page appears (Figure 39).

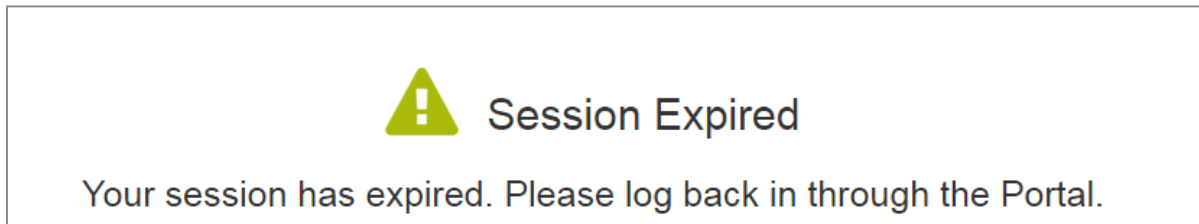


Figure 39: Session Expired page

1. Place your cursor over the Link 1500 tab and click **Add a New Claim** (Figure 40).

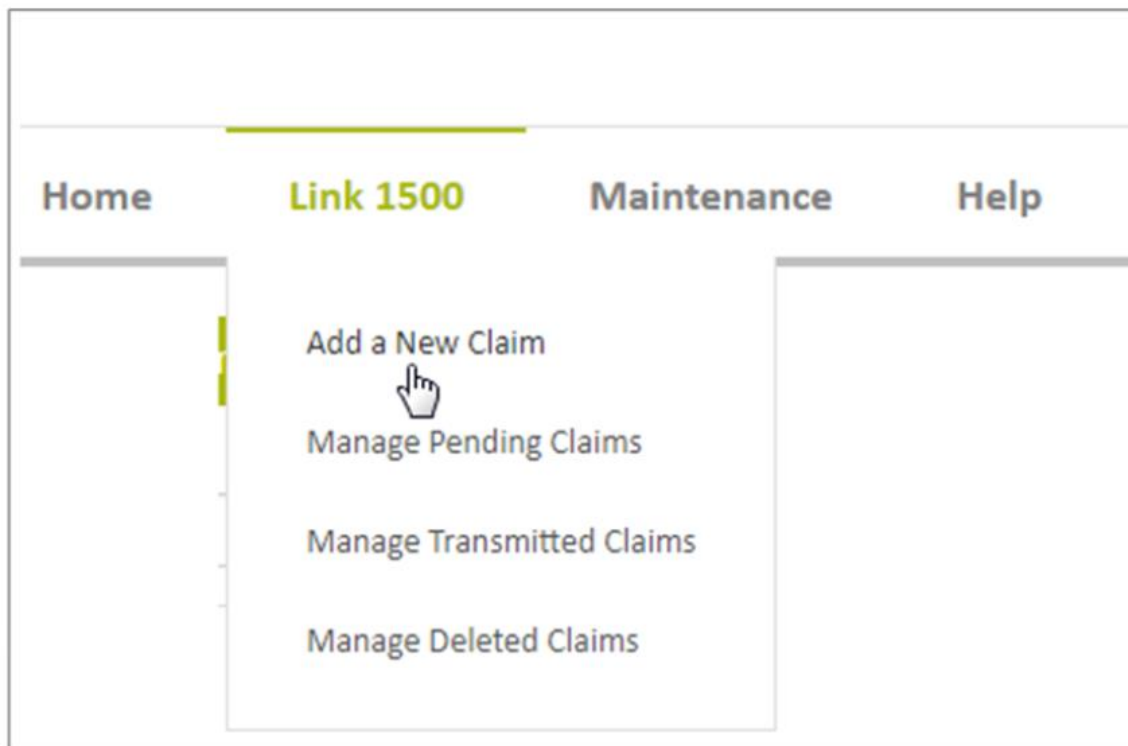


Figure 40: Link 1500 tab with Add a New Claim option selected

- On the Payer page, click the drop-down arrow in the Payer field and select an insurance company from those that appear (Figure 41).



**Figure 41: Add a New Claim Page with Payer drop-down box displayed**

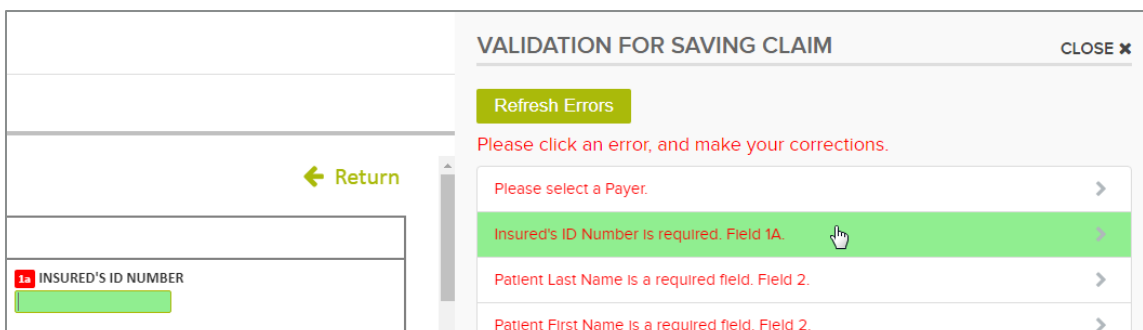
If the insurance company name does not appear, go to the Maintenance tab and add it to the list of your favorite insurance companies.

- Complete all required fields. To verify that you have entered information for all required fields, click **Save** at the bottom of the page. All required fields are highlighted in **yellow**. Also, a Form Validation panel appears on the right to assist you (Figure 42).



**Figure 42: Payer Page with required fields highlighted and Form Validation panel**

Click a line in the Form Validation panel to go directly to the corresponding required field on this page (Figure 43). The field you select appears highlighted in **green** with your cursor.



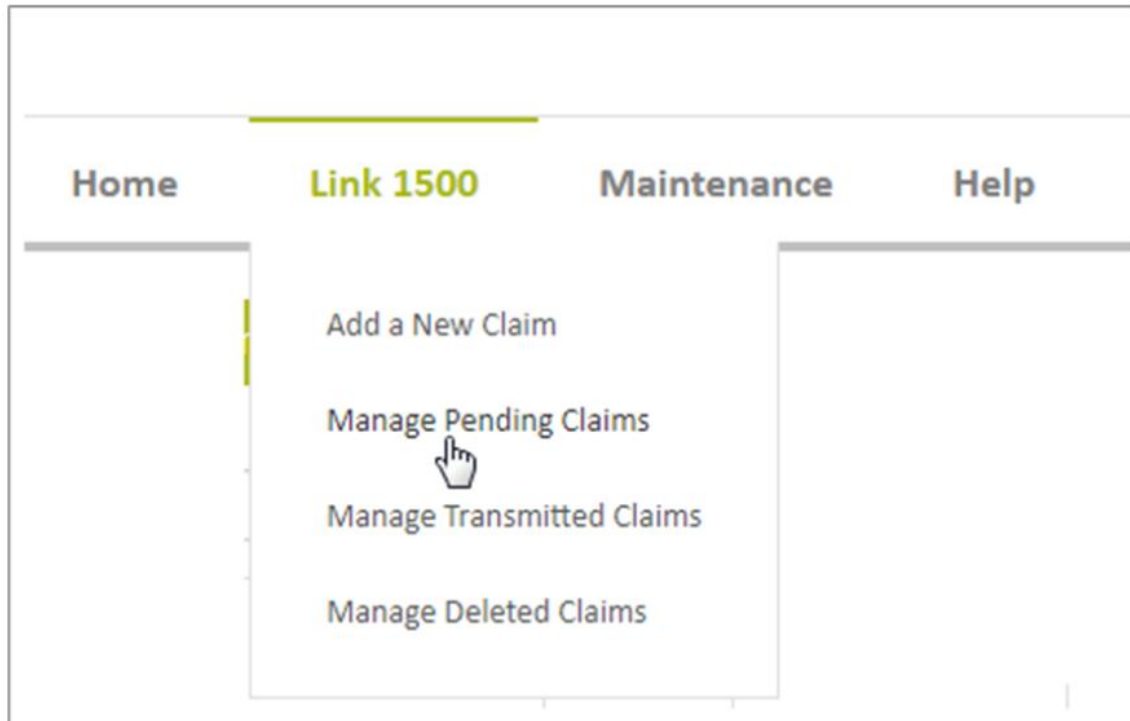
**Figure 43: Form Validation panel with Insured's ID Number selected**

4. As long as you continue to display the Form Validation panel, the information you enter is validated automatically. Once you have validated information, that information cannot be changed unless you close the Form Validation panel.
5. The following actions are available to you on this page:
  - Save - If you have successfully entered all required information, a message box indicates that the claim has been create. The Manage Pending Claims page reappears with the new claim displayed at the top.
  - View / Check Eligibility - Open Eligibility Workflow to view or check eligibility for this patient.
  - Cancel - Return to a Manage Claims page. Any claims information you enter is lost.
  - Reset - Redisplay a blank claim form. Any claims information you entered is lost.

## Manage Pending Claims (send to Insurance Company)

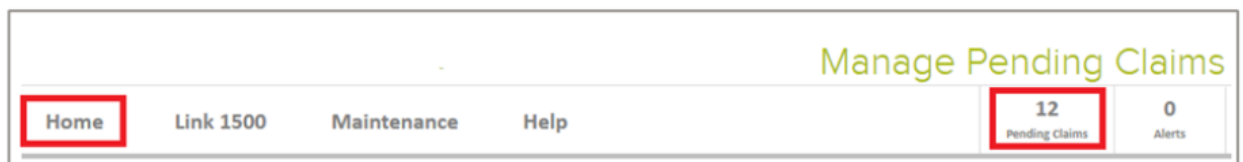
The following instructions describe how to manage a pending claim. Use this option to send one or more of your claims to the insurance company as well as take additional actions on previously completed and saved claims.

1. Place your cursor over the Link 1500 tab and click **Manage Pending Claims** (Figure 44).



**Figure 44: Link 1500 tab with Manage Pending Claims option selected**



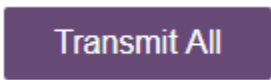
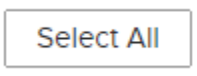


2. The Manage Pending Claims page appears. This page is always available as your default Home page and as a quick link on the Menu bar (Figure 45).



**Figure 45: Direct Links to Manage Pending Claims page (Home tab and Pending Claims block)**



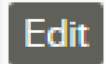
The following actions are available to you at the top of the page.

NOTE: Use these selections when you want to act on multiple rows.

Action for multiple rows	Description
	Transmit (send) selected claim rows to the insurance company. Click <b>OK</b> when the confirmation dialog box appears to submit.
	Delete selected claims. Click <b>OK</b> when the confirmation dialog box appears to delete these rows.
	Transmit all claims on all pages to the insurance companies indicated. Click <b>OK</b> when the confirmation dialog box appears to submit. After you select this item, no pending claims appear.
	Select all claims on the page displayed, only. Claims on additional pages are not selected.
	Clear all claims you have previously selected on all displayed pages.
	Open the Add a New Claim page where you can create a new claim.

The following actions are available to you in the Actions column.

NOTE: Use these selections when you want to act on an individual row.

Action for an individual row	Description
	View detail information for the selected claim. You cannot change any information on the claim through this action. You can also use this action to check eligibility through Eligibility Workflow. NOTE: Click <b>Printer Friendly</b> at the top of the claim to display a version you can print. The document that you print is not an authorized CMS claim form and is not intended to be sent to the payer for billing purposes.
	Copy the selected claim. Click <b>OK</b> when the confirmation dialog box appears. Claims Management assigns the claim to the next available number in the claim number sequence.
	Edit the information of an existing claim. You can also use this action to check eligibility through Eligibility Workflow. Click <b>OK</b> when the confirmation dialog box appears.

Action for an individual row	Description
	Delete an existing claim. Click <b>OK</b> when the confirmation dialog box appears.

The following Search options are available to you on the Manage Pending Claims page (Figure 46):

- Patient Name (the default)
- Claim ID
- Patient Acct #
- Date of Service - Search occurs on the earliest “from” date of all service lines within a claim and the latest “to” date of all service lines in the claim and returns ALL results that include either of those dates of service.
- Date of Birth
- Insurance Company

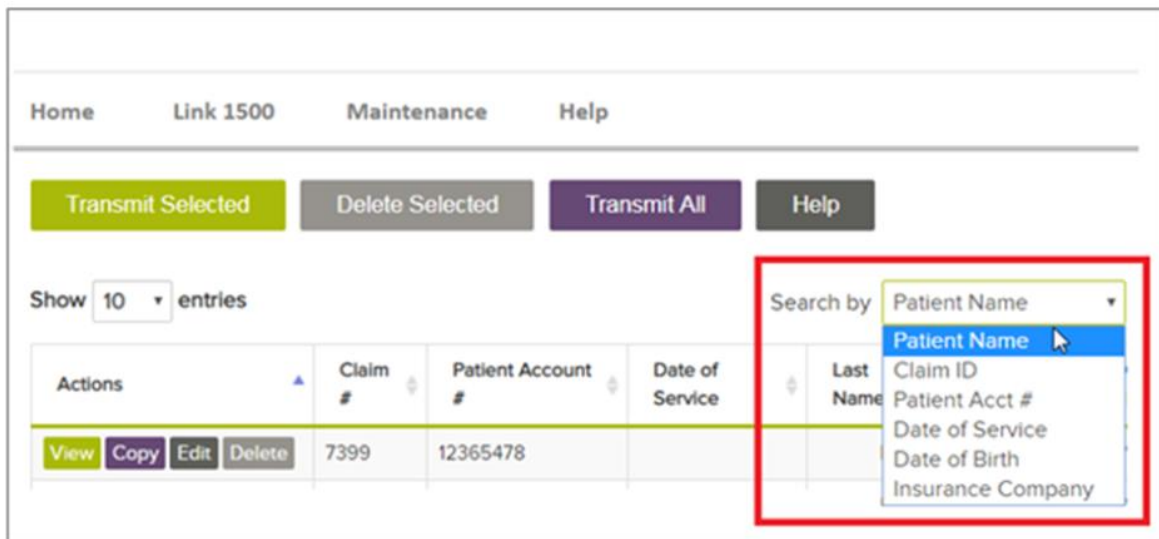
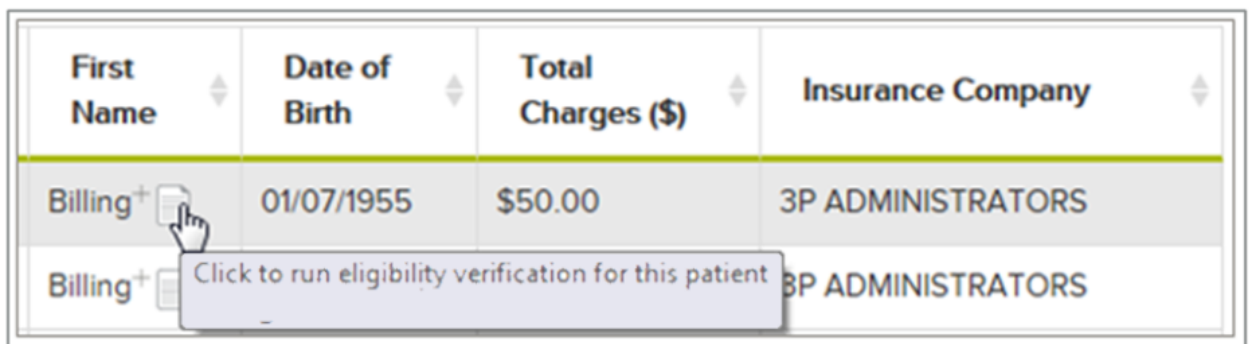


Figure 46: Manage Pending Claims page with Search options indicated

If you want to run eligibility verification for a patient through Eligibility Workflow, look for the icon the icon next to the patient’s first name (Figure 47).





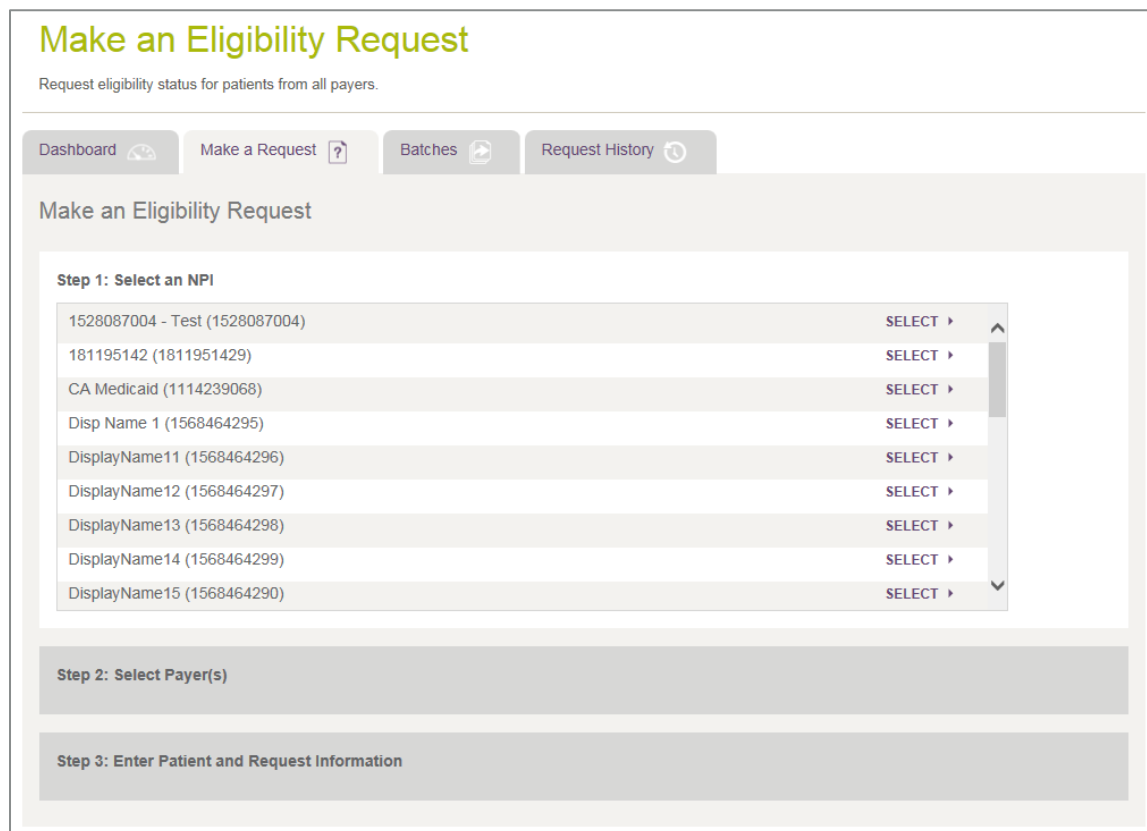
**Figure 47: Eligibility Verification icon in First Name column**

A warning message alerts you that any changes you made in Eligibility Workflow may result in discrepancies between the information that appears there and what you see in Claims Management (Figure 48).



Figure 48: Warning Message

The Make an Eligibility Request page appears in Eligibility Workflow where you can request eligibility on the patient you selected (Figure 49).

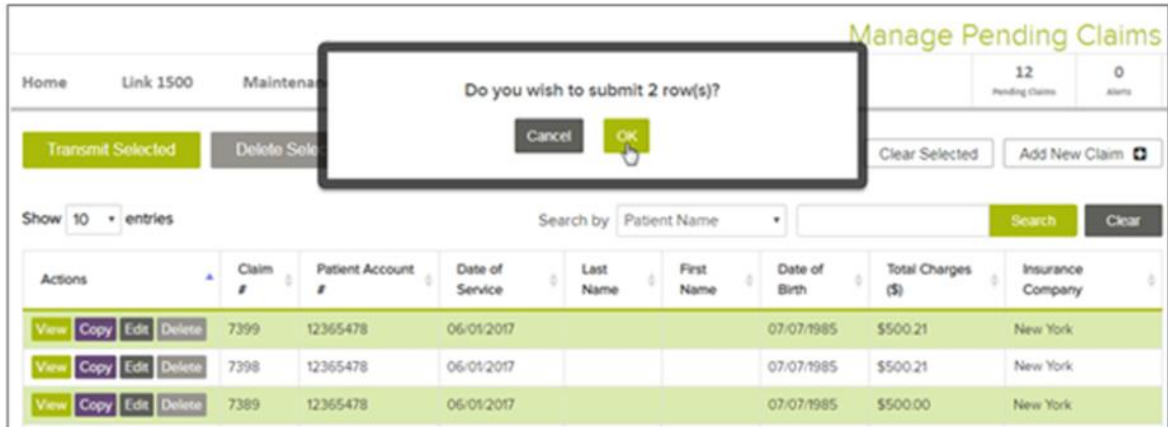


The image shows the "Make an Eligibility Request" page in the Eligibility Workflow. The page title is "Make an Eligibility Request" in green. Below the title is the subtitle "Request eligibility status for patients from all payers." The page has a navigation bar with four tabs: "Dashboard", "Make a Request" (active), "Batches", and "Request History". The main content area is titled "Make an Eligibility Request" and contains three steps:

- Step 1: Select an NPI**: A list of NPIs with a "SELECT" button next to each. The first item is "1528087004 - Test (1528087004)". Other items include "181195142 (1811951429)", "CA Medicaid (1114239068)", "Disp Name 1 (1568464295)", "DisplayName11 (1568464296)", "DisplayName12 (1568464297)", "DisplayName13 (1568464298)", "DisplayName14 (1568464299)", and "DisplayName15 (1568464290)".
- Step 2: Select Payer(s)**: A greyed-out section.
- Step 3: Enter Patient and Request Information**: A greyed-out section.

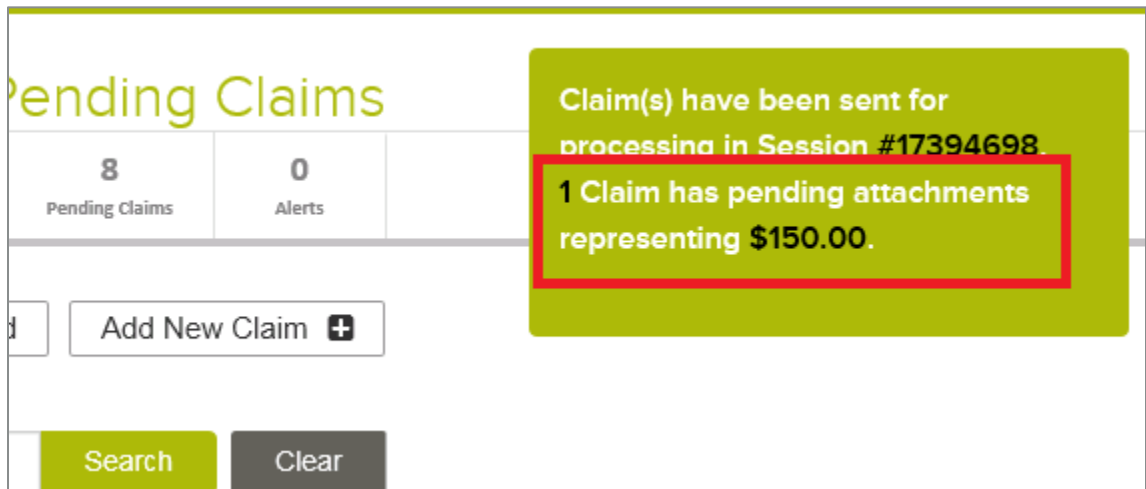
Figure 49: Make an Eligibility Request Page in Eligibility Workflow

- Click a row to select it, then click **Transmit Selected**. A message box prompts you to confirm your selection. In Figure 50, the first and third rows are selected.



**Figure 50: Manage Pending Claims page with Submit dialog box**

NOTE: If you contracted with Inovalon to transmit electronic attachments, a message box appears confirming the claim has pending attachment(s) with the claim dollar amount (Figure 51).



**Figure 51: Claim Attachment Message**

Click **OK** to transmit the claims.

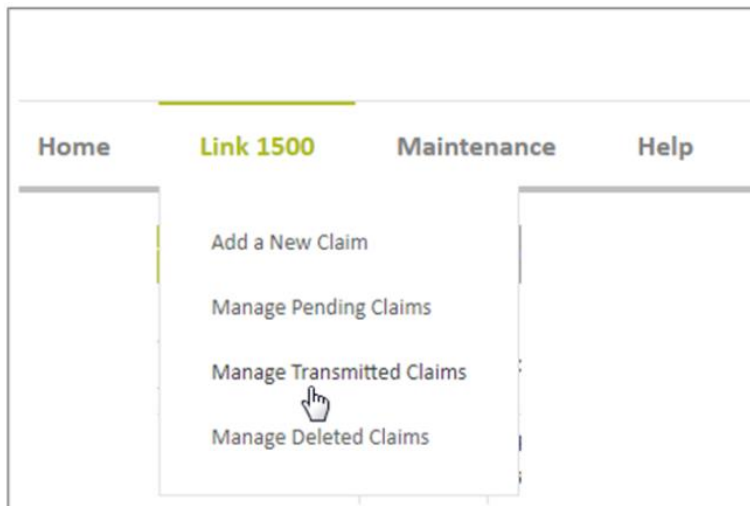
After you transmit a claim, it appears on the Manage Transmitted Claims page. The following section describes this option.

## Manage Transmitted Claims

Use this option to view, copy, or delete claims that you have previously submitted (transmitted) to an insurance company.

The following instructions describe how to manage a transmitted claim.

1. Place your cursor over the Link 1500 tab and click **Manage Transmitted Claims** (Figure 52).



**Figure 52: Link 1500 tab with Manage Transmitted Claims selected**




2. The Manage Pending Claims page appears. The following actions are available to you at the top of the page.

NOTE: Use these selections when you want to act on multiple rows.

Action for multiple rows	Description
<b>Copy Selected</b>	Copy selected rows to the Manage Pending Claims page and assign them the next available claims numbers in sequence.
<b>Delete Selected</b>	Delete selected claims. Click <b>OK</b> when the confirmation dialog box appears to delete these rows.
<b>Select All</b>	Select all claims on the page displayed, only. Claims on additional pages are not selected.
<b>Clear Selected</b>	Clear all claims you have previously selected on all displayed pages.
<b>Add New Claim +</b>	Open the Add a New Claim page where you can create a new claim.

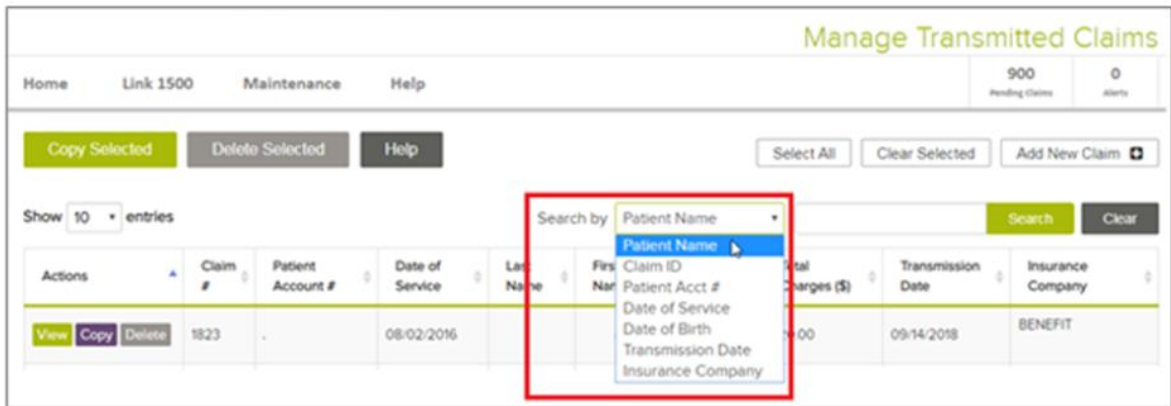
The following actions are available to you in the Action column.

NOTE: Use these selections when you want to act on an individual row.

Action for an individual row	Description
	<p>View detail information for the selected claim. You cannot change any information on the claim through this action. You can also use this action to check eligibility through Eligibility Workflow.</p> <p>NOTE: Click <b>Printer Friendly</b> at the top of the claim to display a version you can print. The document that you print is not an authorized CMS claim form and is not intended to be sent to the payer for billing purposes.</p>
	<p>Copy the selected claim. Click <b>OK</b> when the confirmation dialog box appears. You can also use this action to check eligibility through Eligibility Workflow.</p> <p>Claims Management assigns the claim to the next available number in the claim number sequence.</p>
	<p>Delete an existing claim. Click <b>OK</b> when the confirmation dialog box appears.</p>

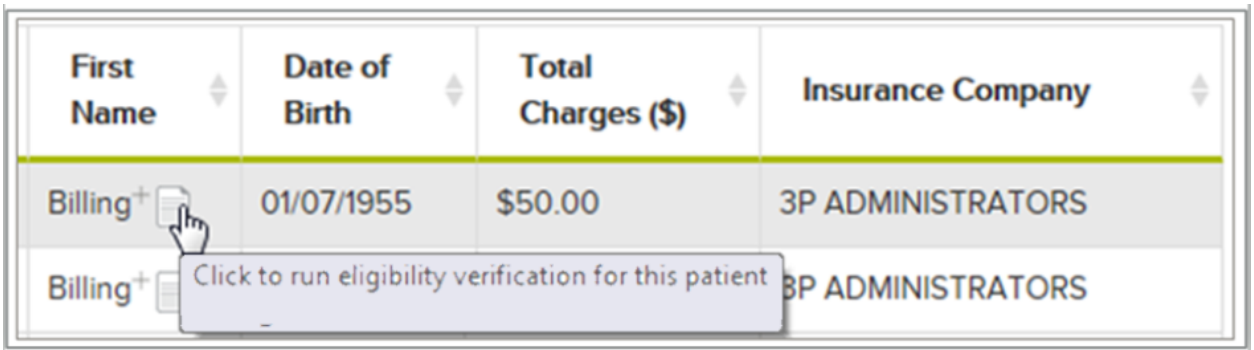
The following Search options are available to you on the Manage Transmitted Claims page (Figure 53):

- Patient Name (the default)
- Claim ID
- Patient Acct #
- Date of Service - Search occurs on the earliest “from” date of all service lines within a claim and the latest “to” date of all service lines in the claim and returns ALL results that include either of those dates of service.
- Date of Birth
- Insurance Company



**Figure 53: Manage Transmitted Claims page (searched by Patient Name)**

If you want to run eligibility verification for this patient through Eligibility Workflow, click the icon next to the patient’s first name (Figure 54).



**Figure 54: Eligibility Verification icon in First Name column**

3. Click a row to select it. In Figure 55, the first and third rows are selected.

**Manage Transmitted Claims**

Home   Link 1500   Maintenance   Help   12 Pending Claims   0 Alerts

Copy Selected
Delete Selected
Help
Select All
Clear Selected
Add New Claim

Show 10 entries   Search by Patient Name  Search Clear

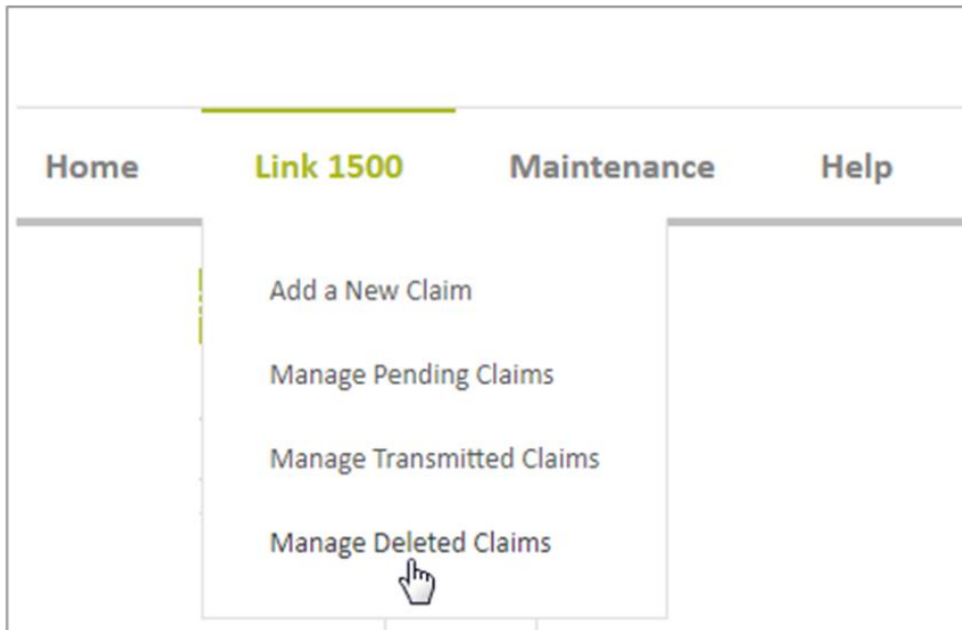
Actions	Claim #	Patient Account #	Date of Service	Last Name	First Name	Date of Birth	Total Charges (\$)	Transmission Date	Insurance Company
<span style="background-color: #92d050; padding: 2px 5px;">View</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Copy</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Delete</span>	7397	12365478	06/01/2017			07/07/1985	\$500.00	12/06/2018	NEW YORK
<span style="background-color: #92d050; padding: 2px 5px;">View</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Copy</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Delete</span>	7396	12365478	06/01/2017			07/07/1985	\$500.00	12/06/2018	NEW YORK
<span style="background-color: #92d050; padding: 2px 5px;">View</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Copy</span> <span style="background-color: #808080; color: white; padding: 2px 5px;">Delete</span>	7395	12365478	06/01/2017			07/07/1985	\$500.00	12/06/2018	NEW YORK

**Figure 55: Manage Transmitted Claims page (searched by Patient Name)**

## Manage Deleted Claims


Use the Manage Deleted Claims option to view and recover previously deleted claims.

1. Place your cursor over the Link 1500 tab and click **Manage Deleted Claims** (Figure 56).



**Figure 56: Link 1500 tab with Manage Deleted Claims option selected**

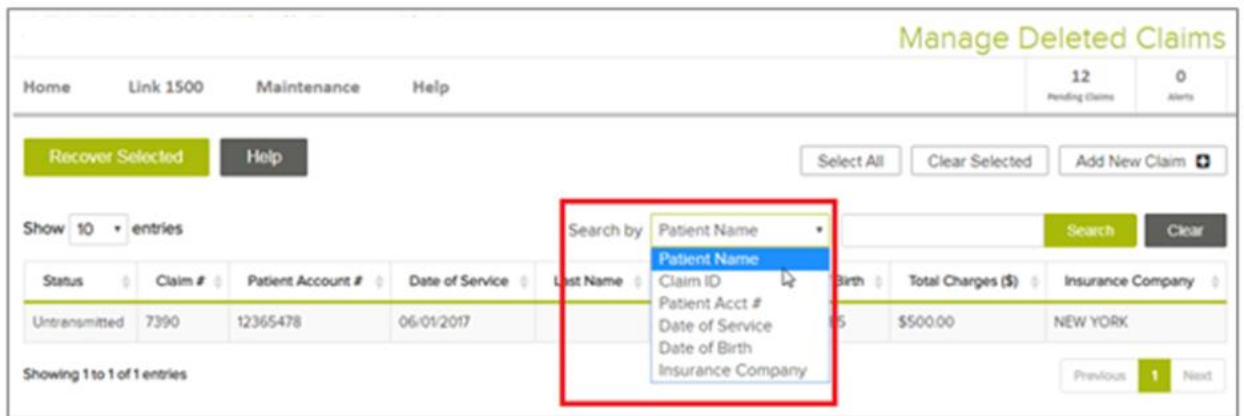
2. The Manage Deleted Claims page appears. The following actions are available to you at the top of the page.  
NOTE: Use these selections when you want to act on multiple rows.

Action	Description
<b>Recover Selected</b>	Recover previously deleted rows. Click <b>OK</b> when the confirmation dialog box appears to recover.
Select All	Select all claims on the page displayed.
Clear Selected	Clear all claims you have previously selected on all displayed pages.
Add New Claim 	Open the Add a New Claim page where you can create a new claim.

The following Search options are available to you on the Manage Deleted Claims page (Figure 57):

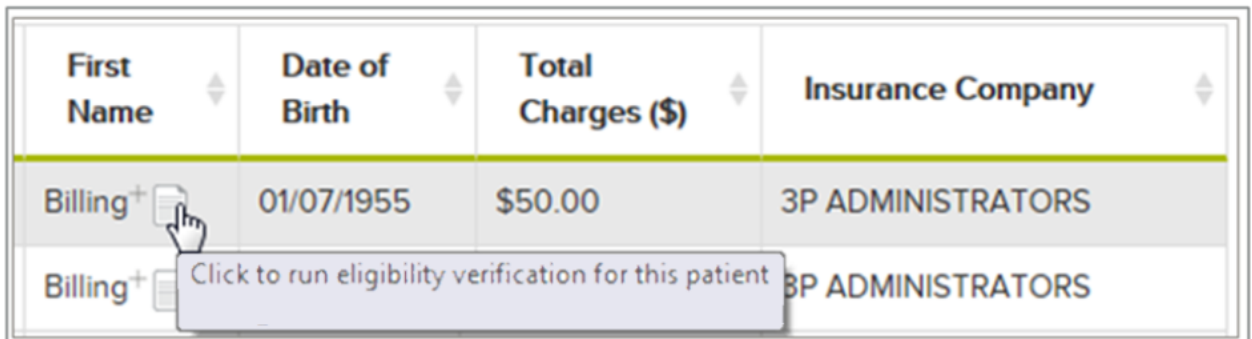


- Patient Name (the default)
- Claim ID
- Patient Acct #
- Date of Service - Search occurs on the earliest “from” date of all service lines within a claim and the latest “to” date of all service lines in the claim and returns ALL results that include either of those dates of service.
- Date of Birth
- Insurance Company



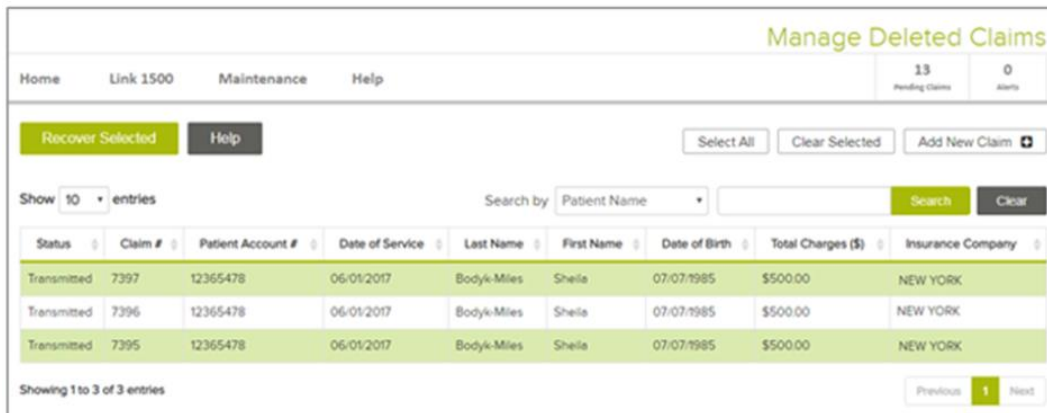
**Figure 57: Manage Deleted Claims page (searched by Patient Name)**

If you want to run eligibility verification for this patient through Eligibility Workflow, click the icon next to the patient’s first name (Figure 58).



**Figure 58: Eligibility Verification icon in First Name column**

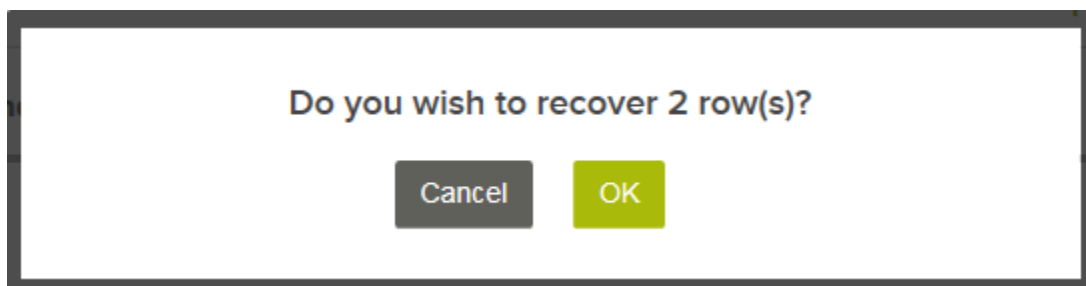
- Click a row to select it. In Figure 59, the first and third rows are selected.



Status	Claim #	Patient Account #	Date of Service	Last Name	First Name	Date of Birth	Total Charges (\$)	Insurance Company
Transmitted	7397	12365478	06/01/2017	Bodyk-Miles	Sheila	07/07/1985	\$500.00	NEW YORK
Transmitted	7396	12365478	06/01/2017	Bodyk-Miles	Sheila	07/07/1985	\$500.00	NEW YORK
Transmitted	7395	12365478	06/01/2017	Bodyk-Miles	Sheila	07/07/1985	\$500.00	NEW YORK

**Figure 59: Manage Deleted Claims page (searched by Patient Name)**

- After selecting rows, click **Recover Selected**. When the message box appears, click **OK** to recover the selected rows (Figure 60).



**Figure 60: Recover Confirmation dialog box**

If you select a claim in Untransmitted status, that claim re-appears on the Manage Pending Claims page.

If you select a claim in Transmitted status, that claim re-appears on the Manage Transmitted Claims page.