



ABILITY | **CHOICE**[®]
All-Payer Claims

Link 1500 / Online Claims Entry User Guide

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Prerequisites

The ABILITY | CHOICE® ALL-PAYER CLAIMS-Link 1500 / Online Claims Entry service (hereafter referred to as simply **ABILITY | CHOICE All-Payer Claims**) is compatible with current versions of the following industry-leading browsers:

- Internet Explorer®
- Firefox®

Introduction to ABILITY | CHOICE® All-Payer Claims

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

ABILITY | CHOICE All-Payer Claims 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.

ABILITY | CHOICE All-Payer Claims allows you to process that claim via the secure ABILITY Network 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

ABILITY | CHOICE All-Payer Claims 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 **ABILITY | CHOICE All-Payer Claims**. 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, you will probably find working with **ABILITY | CHOICE All-Payer Claims** 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




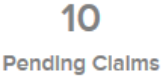



In order to prevent data entry errors, **ABILITY | CHOICE All-Payer Claims** does not allow users to enter data directly into fields that contain NPI or Legacy ID information. These are fields 17A, 17B, 24J, 25, 32A, 32B, 33A, and 33B.

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	Alerts	Click this icon to see alerts for this account. ABILITY will send 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 ABILITY CHOICE All-Payer Claims 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 **ABILITY | CHOICE All-Payer Claims**.

Menu Option	Description
Home	Open the Manage Pending Claims page which is also the ABILITY CHOICE All-Payer Claims 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 ABILITY CHOICE All-Payer Claims .
Help	Opens this ABILITY CHOICE All-Payer Claims User Guide which you can view and save to your computer for future reference.

Maintenance Tab

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

NOTE: After you complete this section, you will be able to 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.

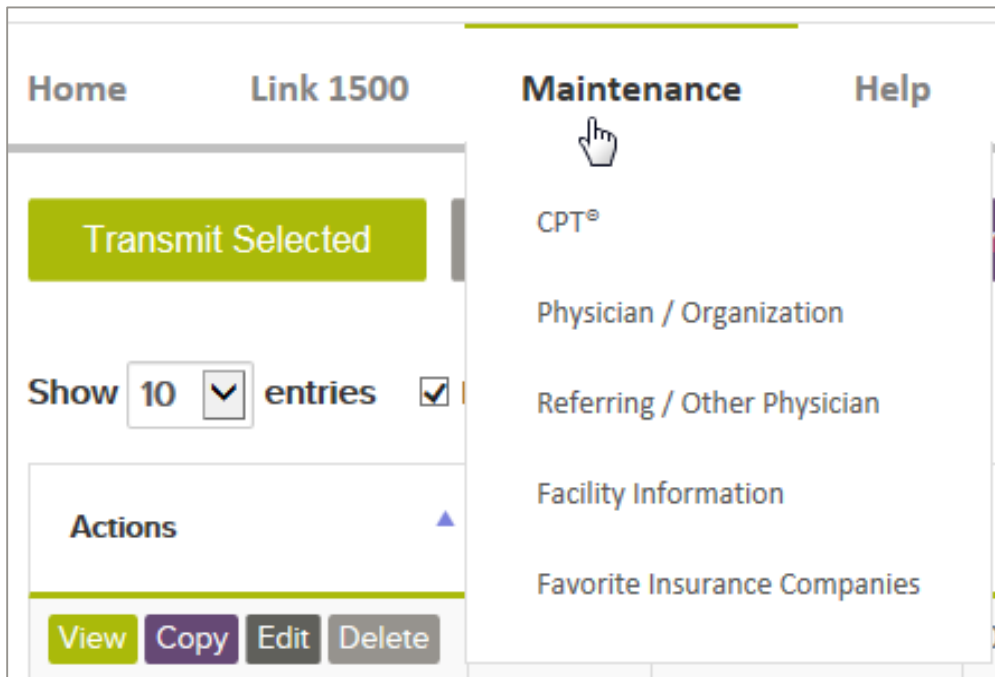
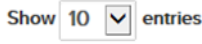




Figure 1: Maintenance tab with menu options displayed

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.

ABILITY | CHOICE All-Payer Claims 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 will only be visible to you.

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

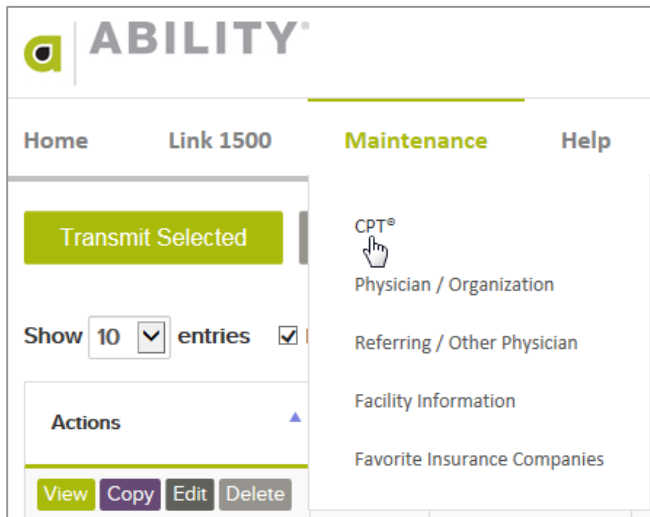


Figure 2: Maintenance tab with CPT® selected

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

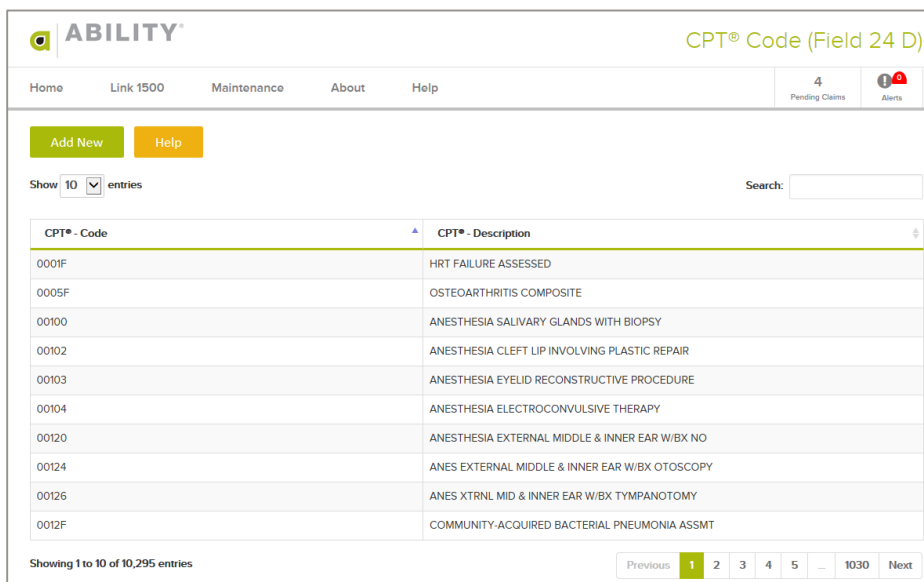


Figure 3: CPT® Code page

- 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.

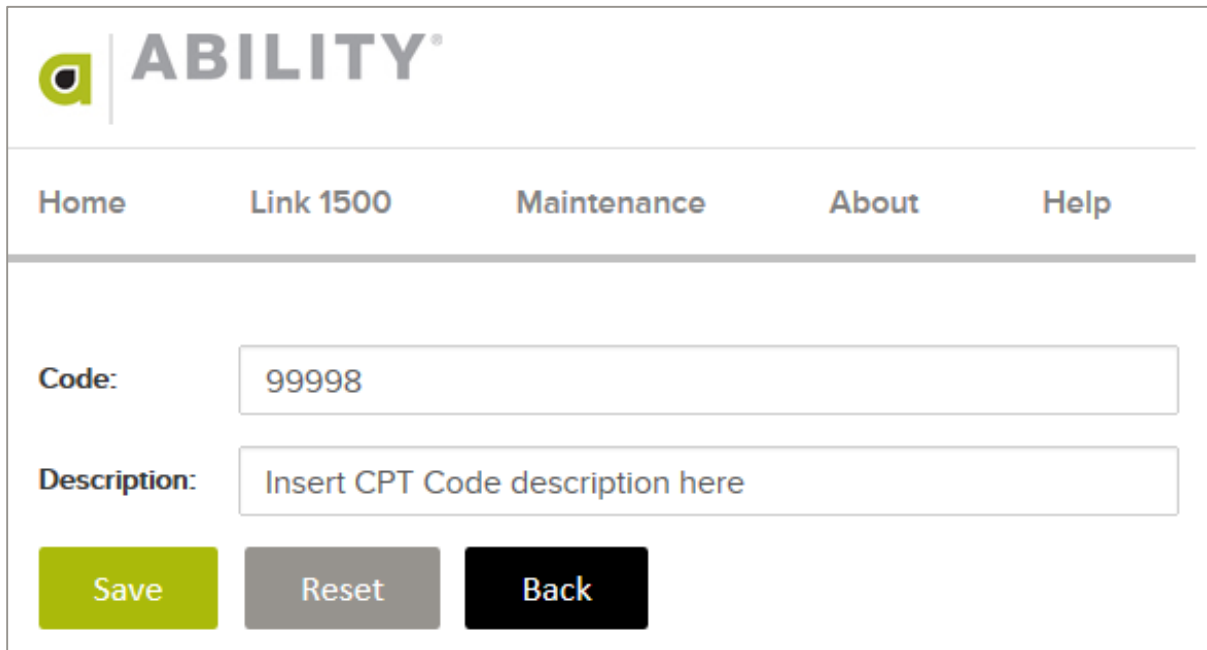


Figure 4: Add CPT® Code page

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

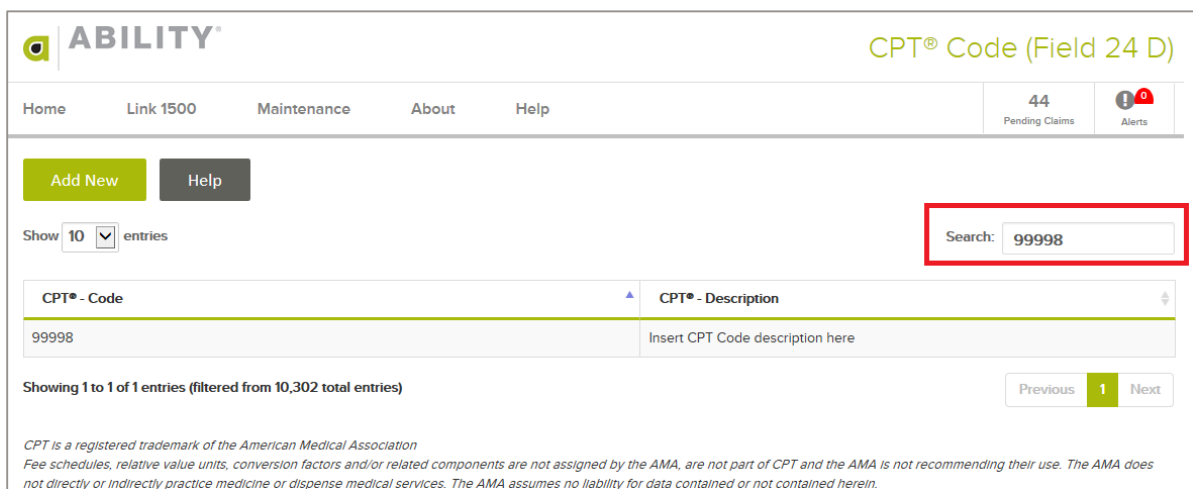


Figure 5: CPT® Code page with newly added Code displayed

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).

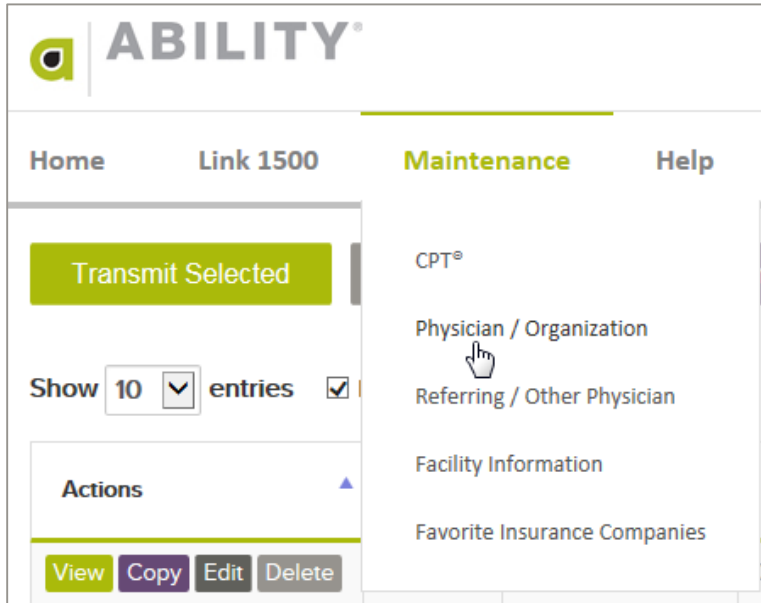


Figure 6: Maintenance tab with Physician / Organization menu option selected

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

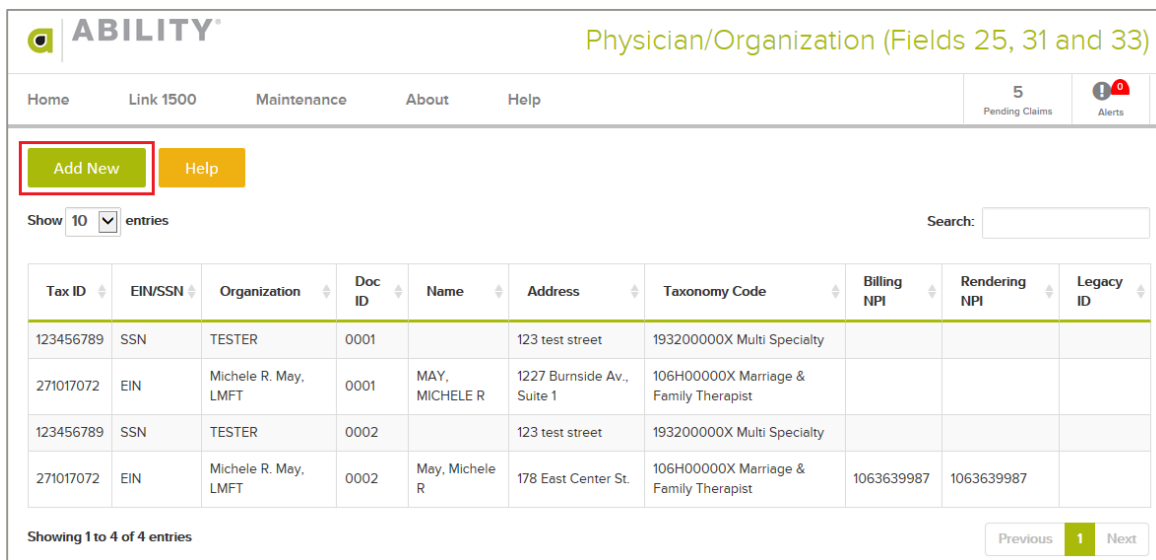


Figure 7: Physician / Organization page with Add New indicated

3. Enter the following 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.

ABILITY | CHOICE All-Payer Claims will place only 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, field 33A will be populated by the Rendering NPI.

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

The screenshot shows the ABILITY web interface for adding a new physician or organization record. The page title is "Physician/Organization (Fields 25, 31 and 33)". The navigation bar includes "Home", "Link 1500", "Maintenance", "About", and "Help". On the right, there are indicators for "7 Pending Claims" and "Alerts".

A green message box at the top of the form area states: "Physician / Organization Record has been successfully inserted." Below 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: (\$&@!;?)".

The form contains the following fields:

- Federal Tax ID:** 123456789
- Organization Name:** Enter Organization Name
- SSN / EIN:** Radio buttons for SSN (selected) and EIN.
- Medical Supply Company:** Unchecked checkbox.
- Personal Information:** Last Name (Smith), First Name (John), MI (empty).
- Address:** 100 Clarendon Street, Boston, MA, 02116.
- Telephone #:** 617-217-0001 (format: xxx-xxx-xxxx).
- Title:** (empty)
- Taxonomy Code:** 193200000X Multi Specialty (with a "Select Clear" link).
- Professional IDs:** Billing NPI, Rendering NPI, Legacy ID, and 33b Legacy Qualifier (dropdown menu).

At the bottom of the form are three buttons: "Save" (highlighted in green), "Reset", and "Back".

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).

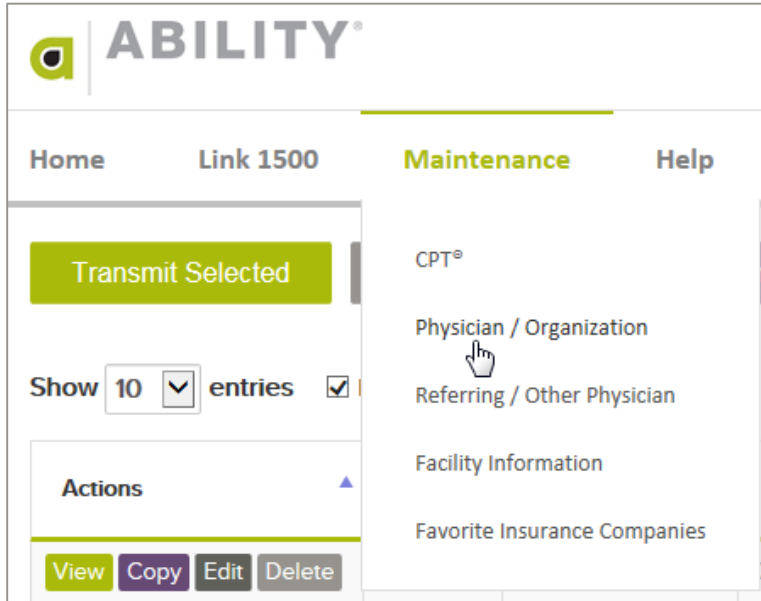


Figure 9: Maintenance tab with Physician / Organization menu option selected

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

The screenshot shows the ABILITY web application interface for the 'Physician/Organization' page. The page title is 'Physician/Organization (Fields 25, 31 and 33)'. The navigation bar includes Home, Link 1500, Maintenance (selected), About, and Help. There are 5 Pending Claims and Alerts. The page features an 'Add New' button and a 'Help' button. Below these is a 'Show 10 entries' dropdown menu and a search box. A table displays a list of entries with columns: Tax ID, EIN/SSN, Organization, Doc ID, Name, Address, Taxonomy Code, Billing NPI, Rendering NPI, and Legacy ID. The first entry is selected, and a mouse cursor is hovering over the first row. The table shows 5 entries, and the page indicates 'Showing 1 to 5 of 5 entries' with 'Previous', '1', and 'Next' navigation buttons.

Tax ID	EIN/SSN	Organization	Doc ID	Name	Address	Taxonomy Code	Billing NPI	Rendering NPI	Legacy ID
123456789	SSN	TESTER	0001		123 test street	193200000X Multi Specialty			
271017072	EIN	Michele R. May, LMFT	0001	MAY, MICHELE R	1227 Burnside Av., Suite 1	106H00000X Marriage & Family Therapist			
123456789	SSN	TESTER	0002		123 test street	193200000X Multi Specialty			
271017072	EIN	Michele R. May, LMFT	0002	May, Michele R	178 East Center St.	106H00000X Marriage & Family Therapist	1063639987	1063639987	
123456789	SSN	Enter Organization Name	0003	Smith, John	100 Clarendon Street	208D00000X General Practice			

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.

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

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

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).

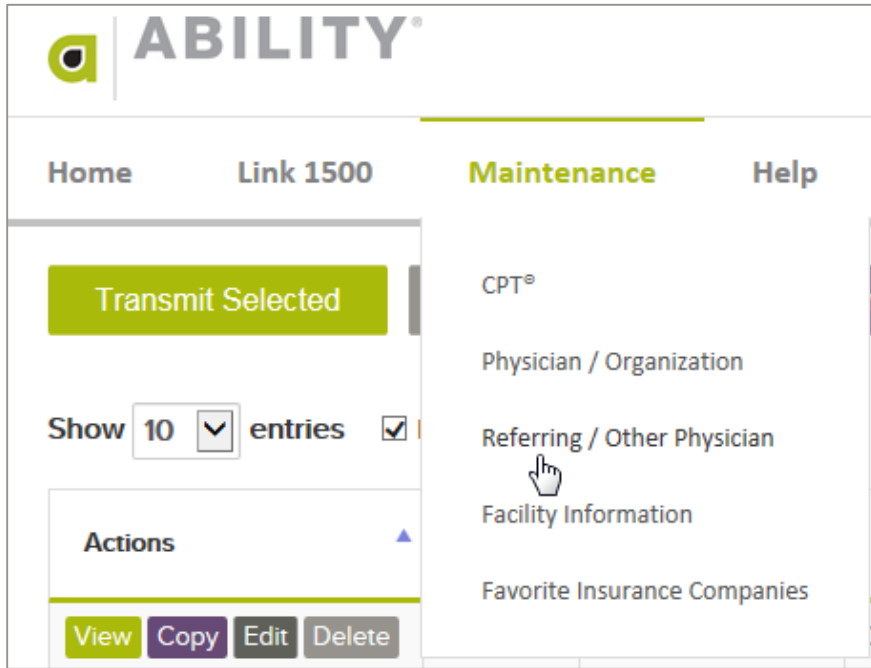


Figure 13: Maintenance tab with Referring / Other Physician menu option selected

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).

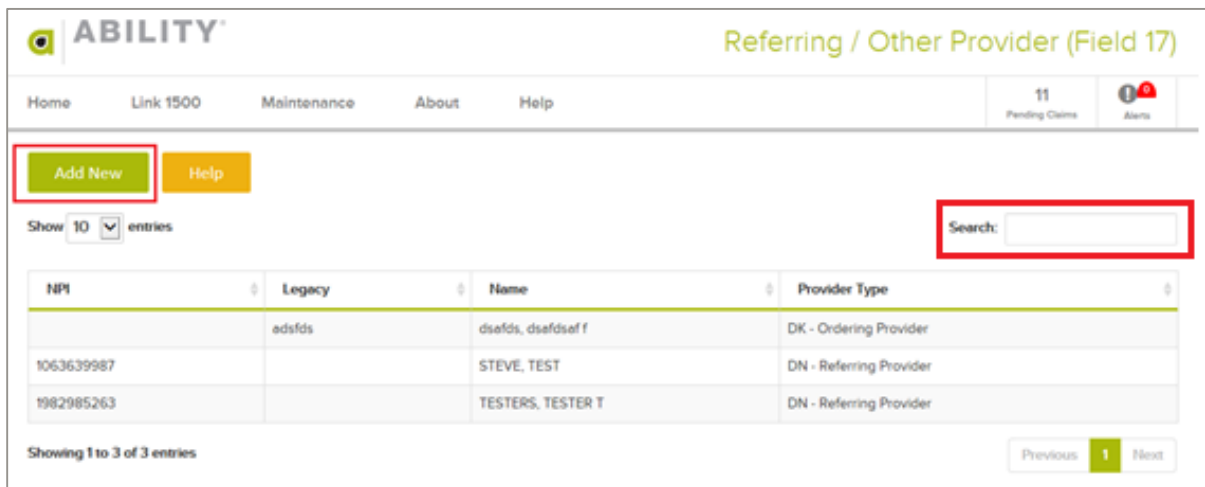


Figure 14: Referring / Other Provider page with Add New and Search fields indicated

- 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” will appear. If not, error messages will let you know those fields that need to be addressed.

The screenshot shows the ABILITY web interface for the 'Referring / Other Provider (Field 17)' page. At the top left is the ABILITY logo. The page title is 'Referring / Other Provider (Field 17)'. A navigation bar includes links for Home, Link 1500, Maintenance, About, and Help. On the right, there are indicators for '7 Pending Claims' and 'Alerts'. A note states: 'Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@%';)'. A green message box with a checkmark icon contains the text: 'Referring / Other Provider has been successfully inserted.' Below this, the 'Provider Type' dropdown menu is set to 'DN - Referring Provider'. The 'Provider Information' section contains several input fields: 'First' (Mary), 'Last/Org' (Smith), 'MI' (empty), 'Address' (100 Clarendon Street), 'City' (Boston), 'State' (MA), 'Zip' (02116), 'NPI' (999999999), 'Legacy ID' (empty), and 'Legacy Qual' (empty). At the bottom are three buttons: 'Save' (green), 'Reset' (grey), and 'Back' (black).

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).

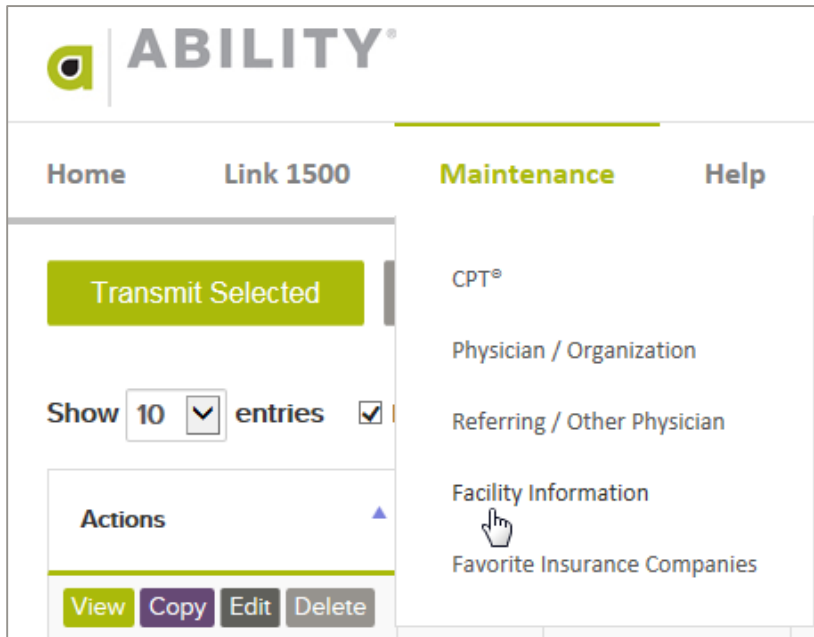


Figure 16: Maintenance tab with Facility Information selected

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.

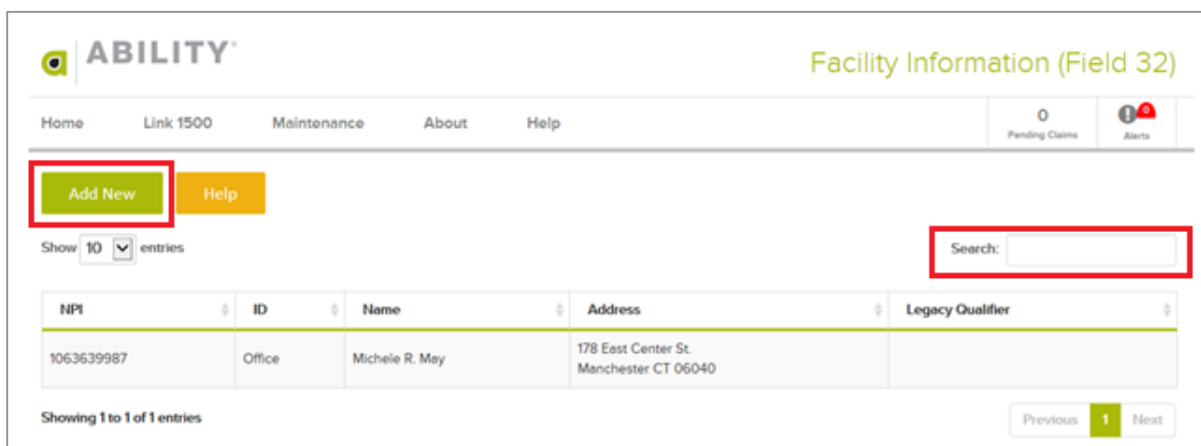


Figure 17: Facility Information page with Add New and Search fields indicated

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

The screenshot displays the ABILITY web application interface. At the top left is the ABILITY logo. A navigation bar contains links for Home, Link 1500, Maintenance, About, and Help. Below the navigation bar is a note: "Please Note: The following characters are not allowed on an electronic claim and will be removed if used: (\$&@'";)". A green message box with a checkmark icon and the text "Facility has been successfully inserted." is highlighted with a red border. Below the message is a form with the following fields: Name (Medical Office building), Address (1 Clarendon Street), City (Boston), State (MA), Zip (02116), Facility NPI ID, Facility ID, and 32b Legacy Qualifier. At the bottom of the form are three buttons: Save (green), Reset (grey), and Back (black).

Figure 18: Facility page with Facility successfully inserted message indicated

Favorite Insurance Companies

Submitting your first claim will be much easier if you have already entered your insurance company information into **ABILITY | CHOICE All-Payer Claims**. 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).

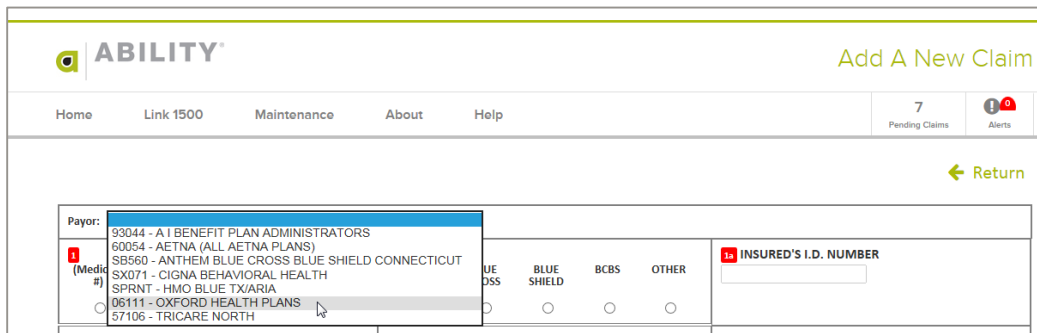


Figure 19: Payor dropdown box with Favorite Insurance Companies displayed

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).

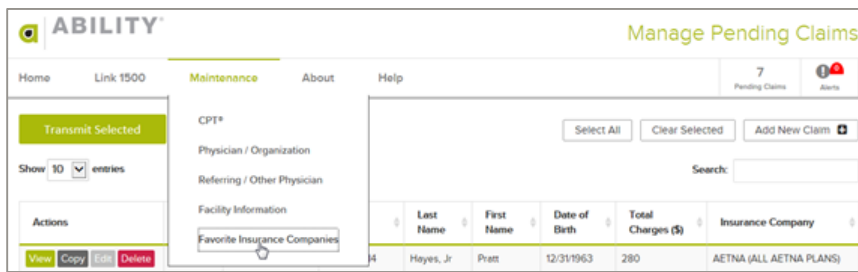


Figure 20: Maintenance tab with Favorite Insurance Companies indicated

- 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).

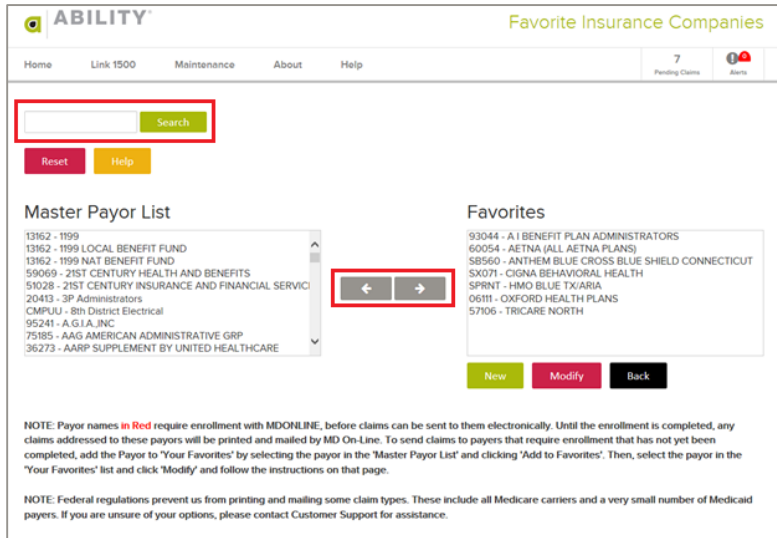


Figure 21: Favorite Insurance Companies page with Search field and arrows indicated

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

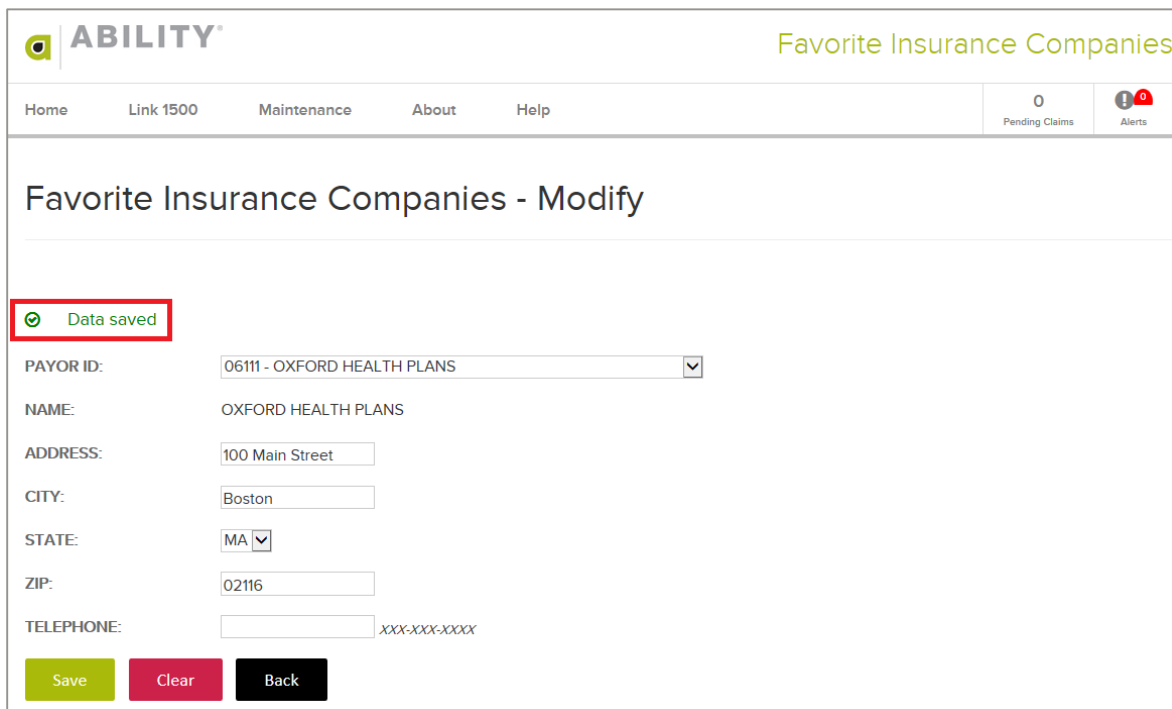


Figure 22: Favorite Insurance Companies - Modify page with Data Saved message displayed

Add a New Favorite Insurance Company

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

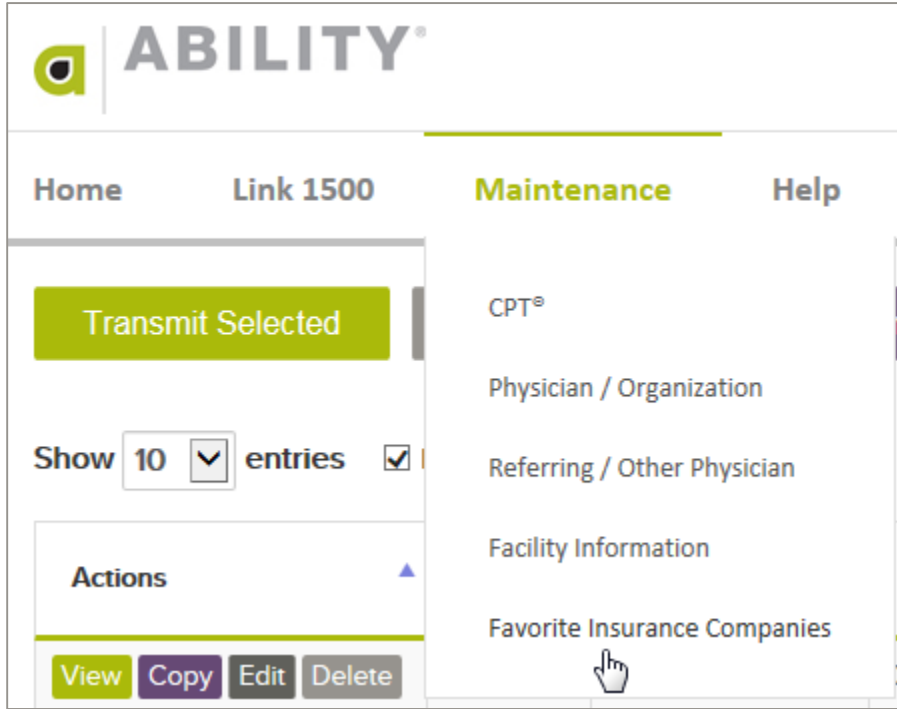


Figure 23: Maintenance tab with Favorite Insurance Companies indicated

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

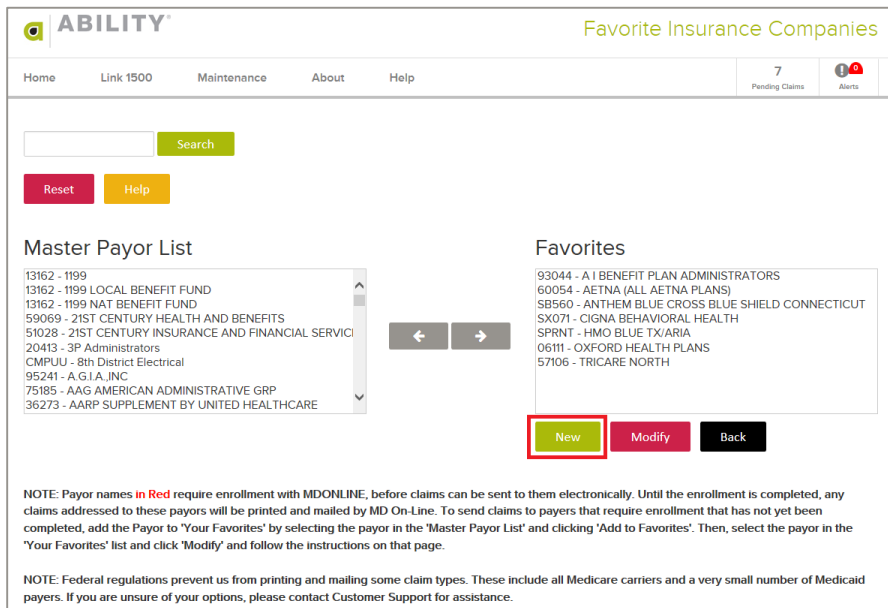


Figure 24: Favorite Insurance Companies page with New selected

3. All fields except Telephone are required. Enter all required information and click **Add**. The message Data saved will appear (Figure 25) or you will be directed to any fields that need to be corrected.

The screenshot shows a web form titled "Favorite Insurance Companies - Add". At the top left, a green checkmark icon is next to the text "Data saved", which is enclosed in a red rectangular box. Below this message is a form with the following fields and values:

PAYOR ID:	<input type="text" value="SPRNT"/>
NAME:	<input type="text" value="ABILITY"/>
ADDRESS:	<input type="text" value="1 Clarendon Street"/>
CITY:	<input type="text" value="Boston"/>
STATE:	<input type="text" value="MA"/> ▼
ZIP:	<input type="text" value="02116"/>
TELEPHONE:	<input type="text"/> xxx-xxx-xxxx

At the bottom of the form are three buttons: "Add" (green), "Clear" (red), and "Back" (black).

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).

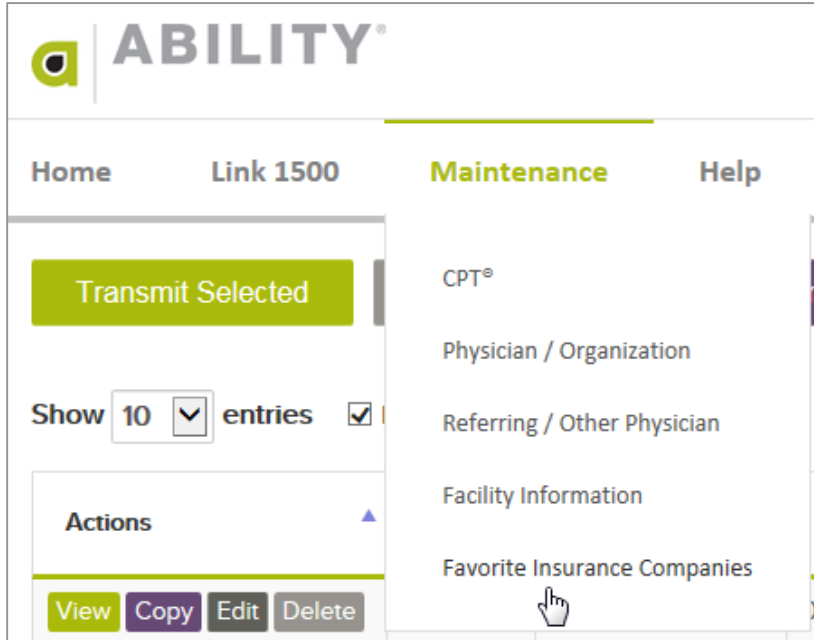


Figure 26: Maintenance tab with Favorite Insurance Companies indicated

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

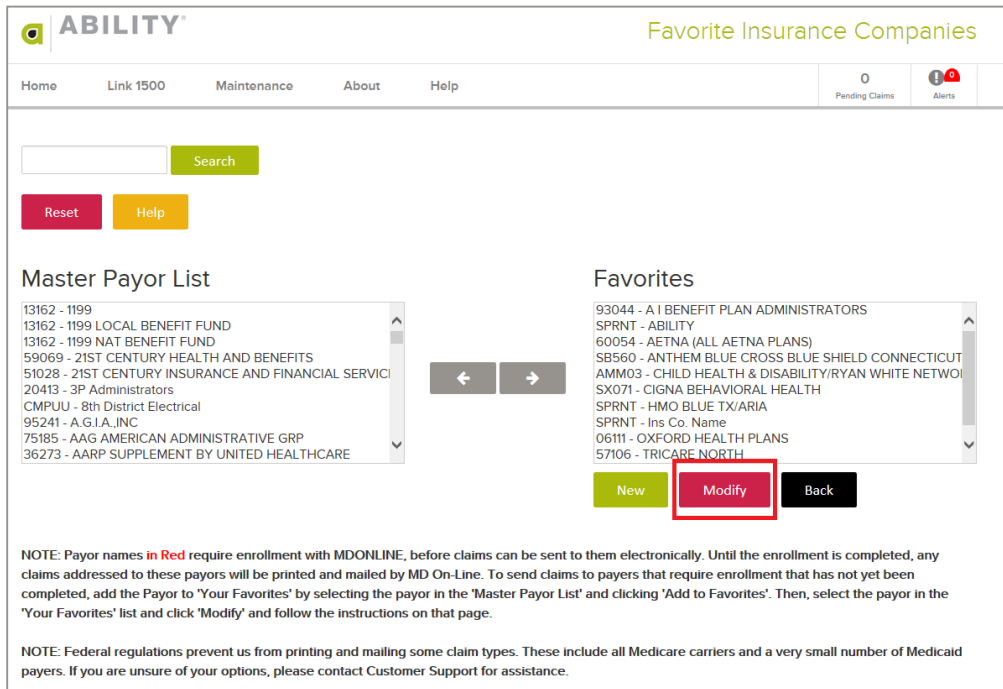


Figure 27: Favorite Insurance Companies page with Modify selected

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 will appear or you will be directed to any fields that need to be corrected.

Favorite Insurance Companies - Modify

PAYOR ID: ▼

NAME:

ADDRESS:

CITY:

STATE: ▼

ZIP:

TELEPHONE: xxx-xxx-xxxx

Save
Clear
Back

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 ABILITY Network 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 ABILITY Technical Support for assistance at 612.460.4310 or 888.460.4310 from 7AM to 6PM (Central time) 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).

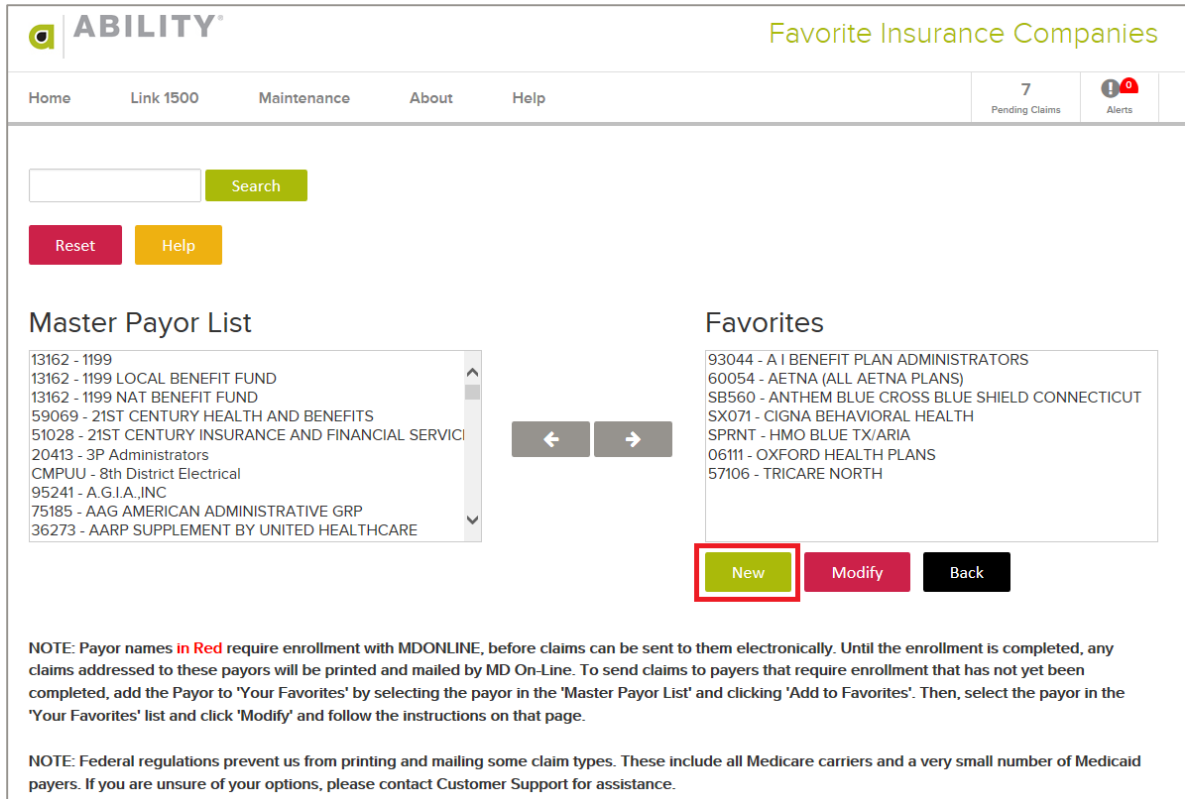
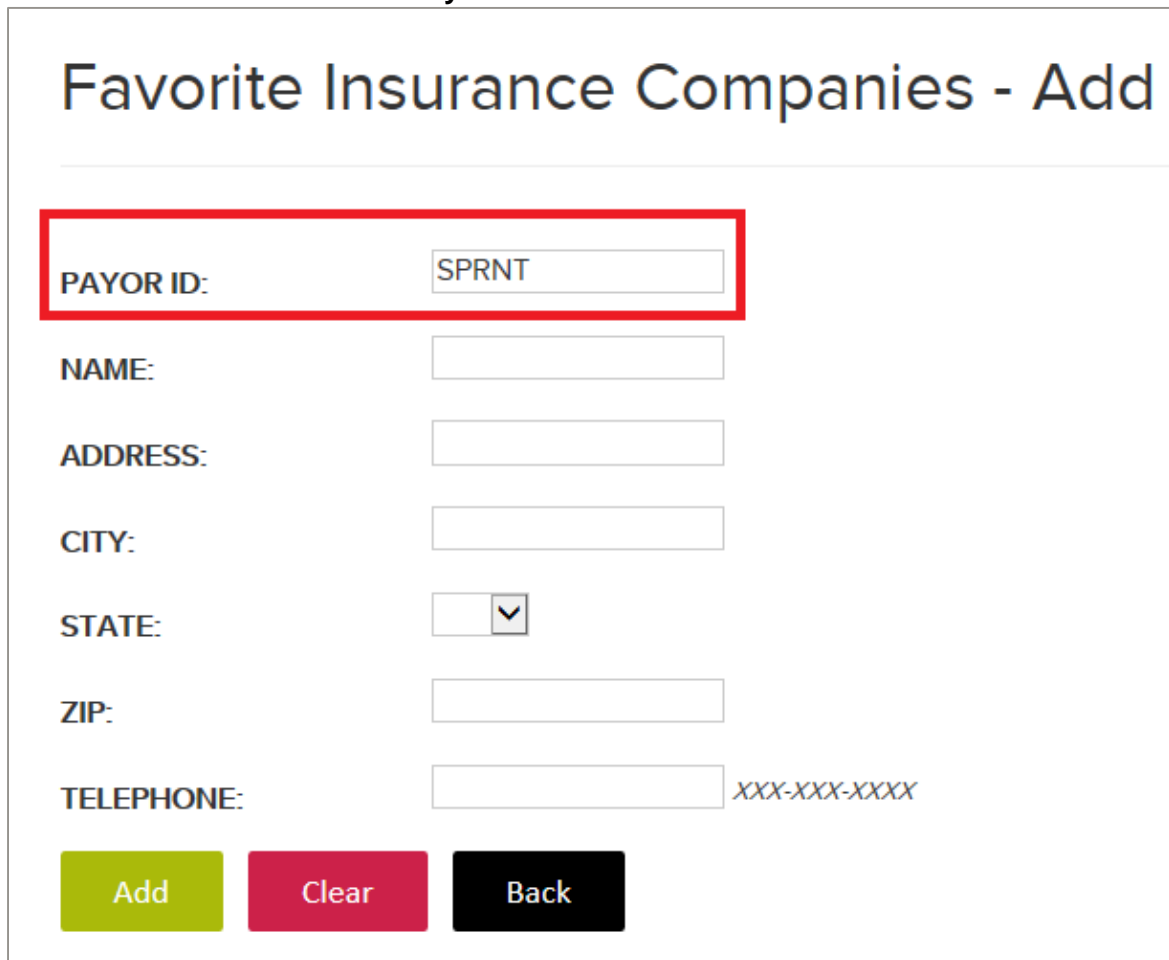


Figure 29: Favorite Insurance Companies page with New selected

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:

Add **Clear** **Back**

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

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

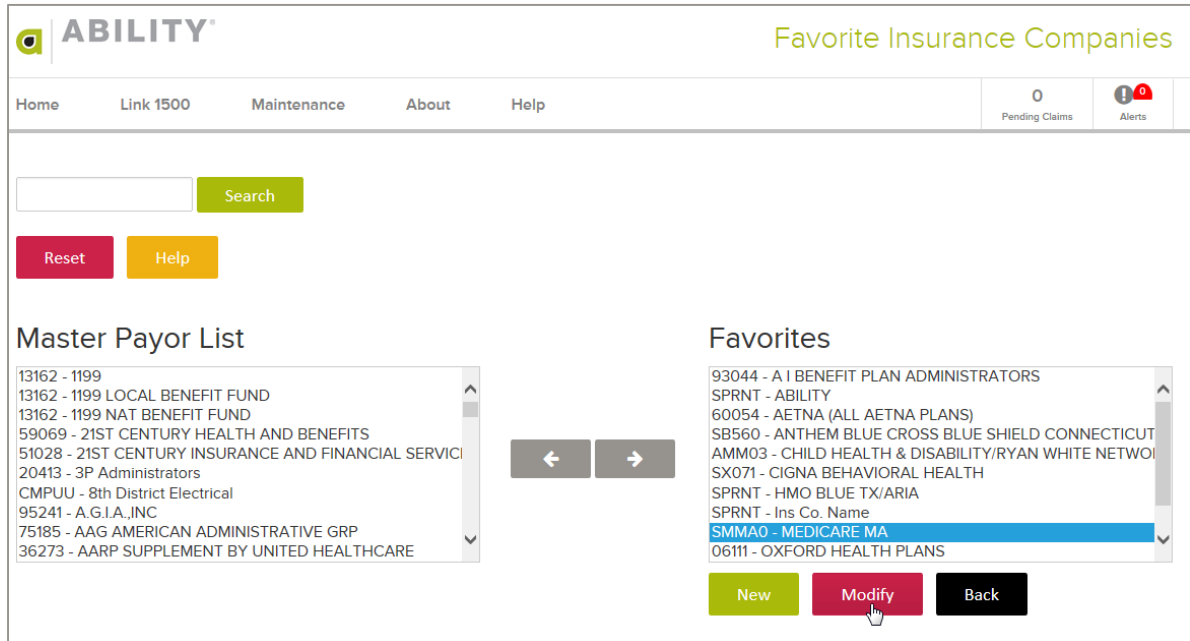


Figure 32: Favorite Insurance Companies page with Medicare MA Payer selected

- Enter information as to where the claim should be mailed (Figure 33).

Favorite Insurance Companies - Modify

PAYOR ID:

NAME:

ADDRESS:

CITY:

STATE:

ZIP:

TELEPHONE: XXX-XXX-XXXX

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, the claims will be sent electronically. This information is available to you through the Payer Enrollments link on your Portal Dashboard (Figure 34).

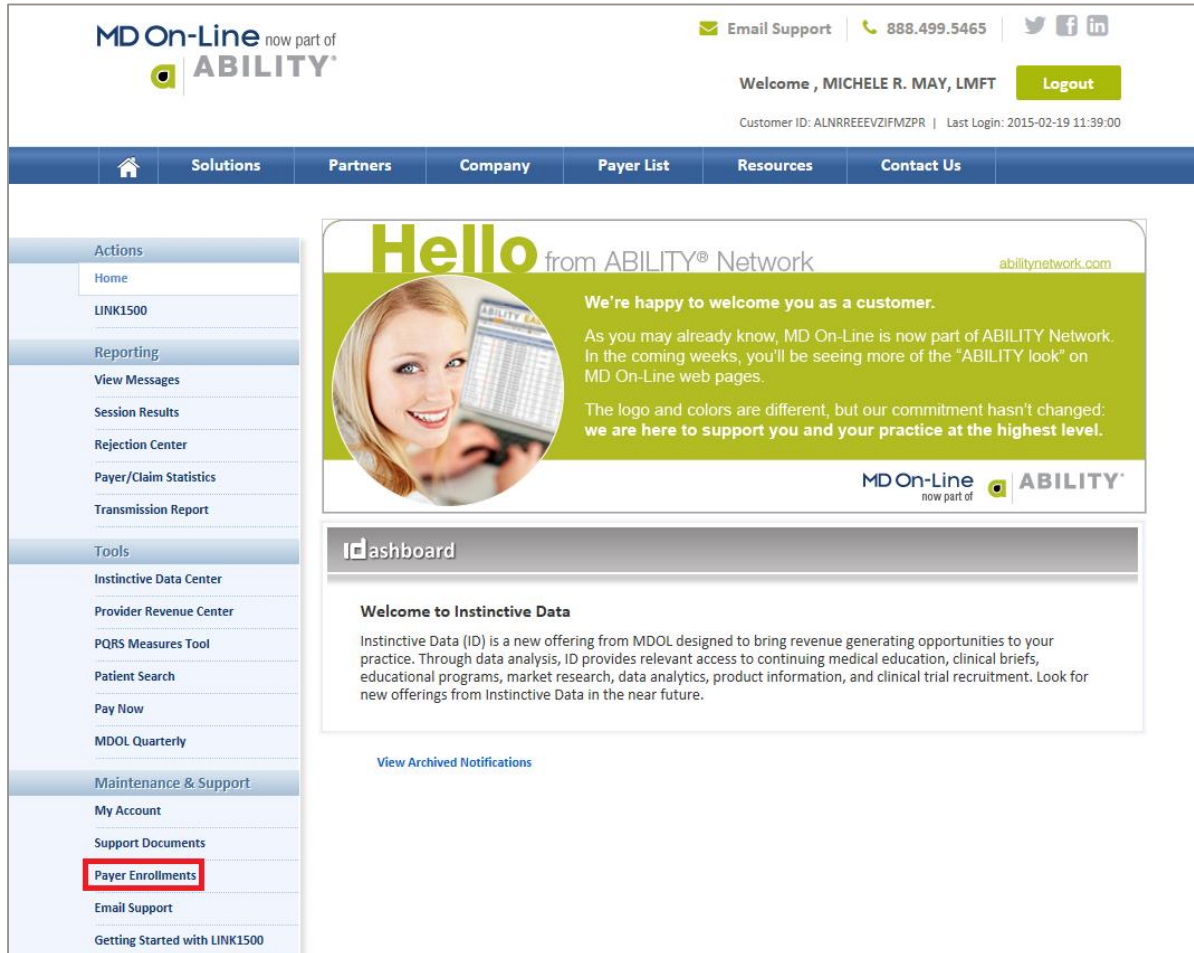


Figure 34: Portal Dashboard page with Payer Enrollments link indicated

Link 1500 Tab

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

Option Name	Description
Add a New Claim	Complete a new claim form. After you successfully complete and save the form, the new claim appears on the Manage Pending Claims page
Manage Pending Claims	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 will appear on the Manage Transmitted Claim page.
Manage Transmitted Claim	View, copy, or delete claims that you have previously submitted (transmitted) to an insurance company.
Manage Deleted Claims	View and recover (restore) previously deleted claims

Figure 35 shows the Link 1500 options available to you.

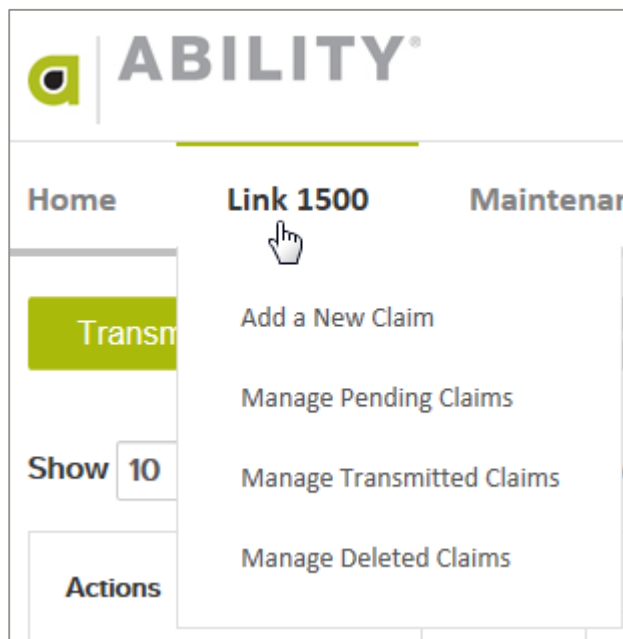


Figure 35: Link 1500 tab with menu options displayed

Dashboard Display Entries and Search Option

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

Graphic	Name	Description
<input checked="" type="checkbox"/> Limit to Last 18 Months	Limit to Last 18 Months	Check this box to limit the displayed claims to only those that were processed by ABILITY CHOICE All-Payer Claims in the past 18 months.
Show <input type="text" value="10"/> entries	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 by <input type="text" value="Patient Name"/> <input type="text" value="Smith"/>	Search box with text box	Select a search category, enter full or partial information. Click Search to search the text entry. Click Clear 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

ABILITY | CHOICE All-Payer Claims provides on-screen help text for all the Link 1500 Tab

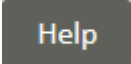
menu options. You can display this text by clicking . When you create a New Claim or edit an Existing Claim, help is available through a Form Validation panel. Select the error and address the issue (Figure 36).

Figure 36: Form Validation panel with first item selected.

Auto Select Feature

To help you manage your claims, **ABILITY | CHOICE All-Payer Claims** 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
Patient's Name	Field 2
Name of Referring Physician or Other Source	Field 17
Diagnosis or Nature of Illness or Injury	Field 21
Service Line (Place of Service)	Field 24 B
Service Line (Procedure, Services, or Supplies)	Field 24 D
Federal Tax ID Number	Field 25
Service Facility Location Info	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).

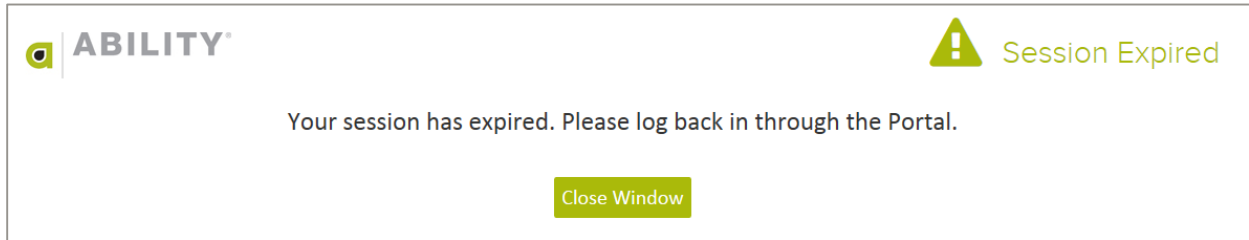


Figure 39: Session Expired page

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

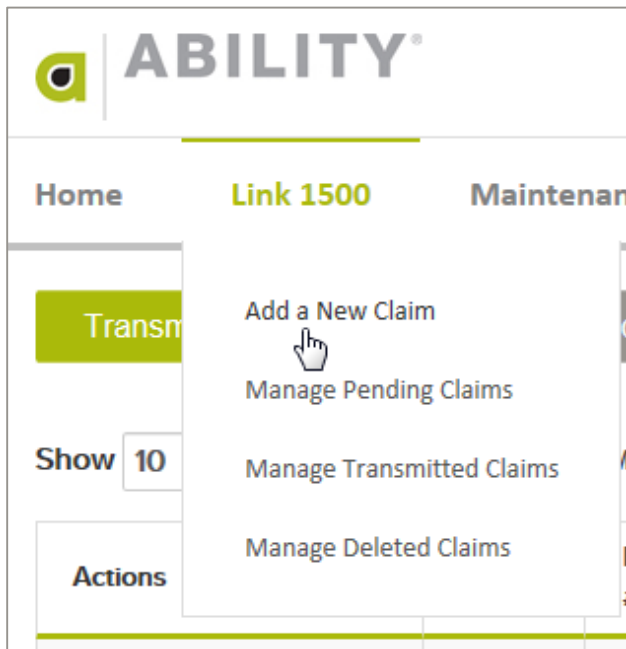


Figure 40: Link 1500 tab with Add a New Claim option selected

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

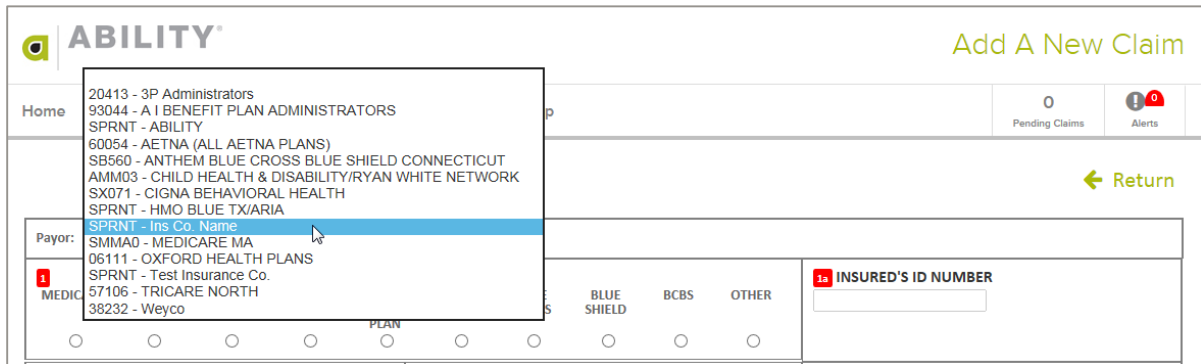


Figure 41: Add a New Claim Page with Payer drop-down box displayed

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

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

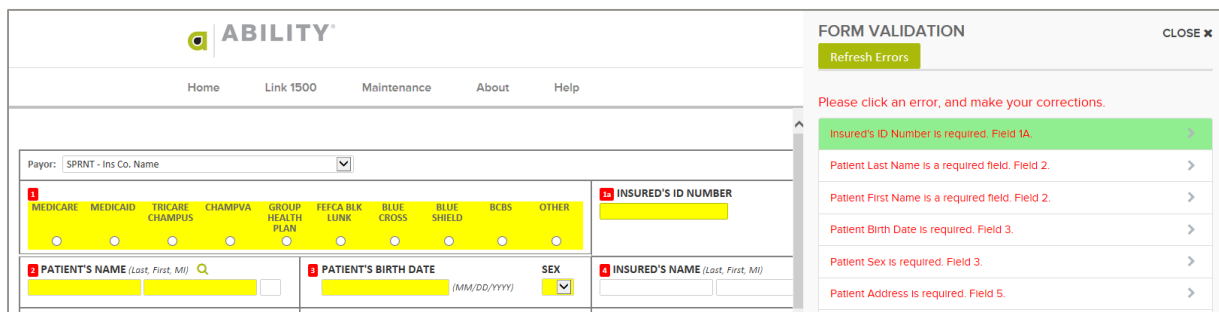


Figure 42: Payer Page with required fields highlighted and Form Validation panel

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 will appear highlighted in green with your cursor.

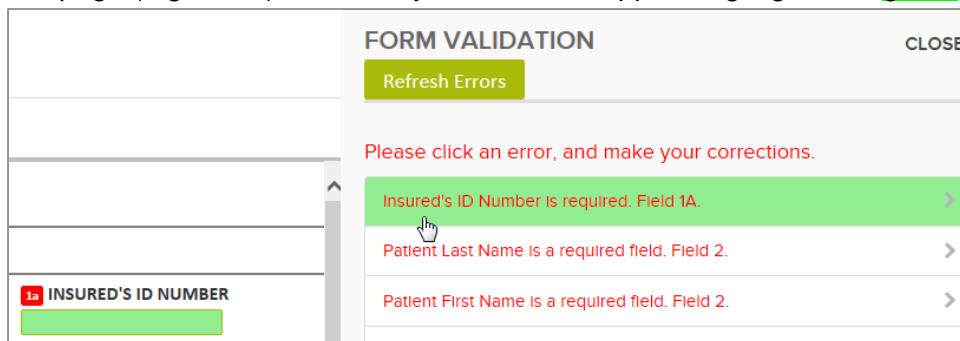


Figure 43: Form Validation panel with Insured's ID Number selected

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 ABILITY | COMPLETE to view or check eligibility for this patient.
 - Cancel – Return to a Manage Claims page. Any claims information you entered will be lost.
 - Reset – Redisplay a blank claim form. Any claims information you entered will be 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).

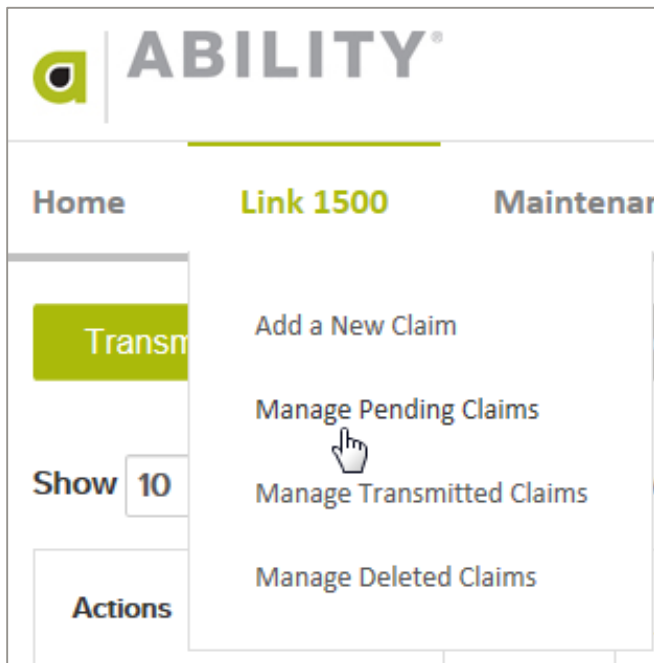


Figure 44: Link 1500 tab with Manage Pending Claims option selected

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).

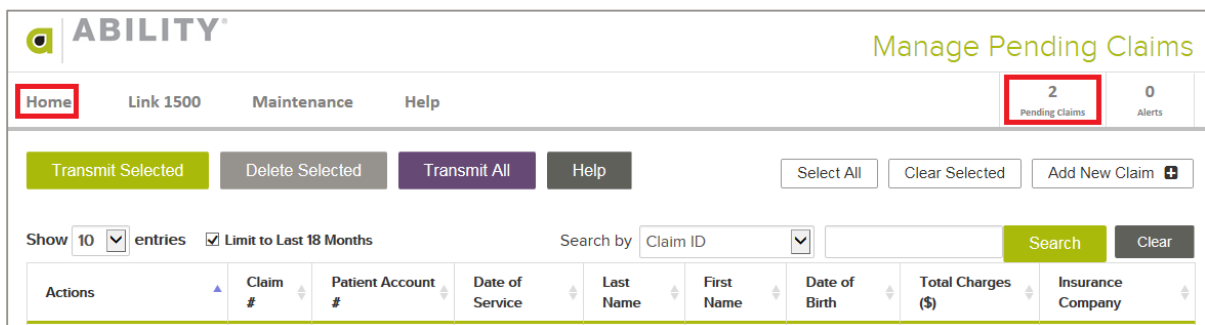



Figure 45: Direct Links to Manage Pending Claims page (Home tab and Pending Claims block)

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



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

Action for multiple rows	Description
Transmit Selected	Transmit (send) selected claim rows to the insurance company. Click OK when the confirmation dialog box appears to submit.
Delete Selected	Delete selected claims. Click OK when the confirmation dialog box appears to delete these rows.
Transmit All	Transmit all claims on all pages to the insurance companies indicated. Click OK when the confirmation dialog box appears to submit. After you select this item, no pending claims will appear.
Select All	Select all claims on the page displayed, only. Claims on additional pages are not selected.
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 actions are available to you in the Actions column.

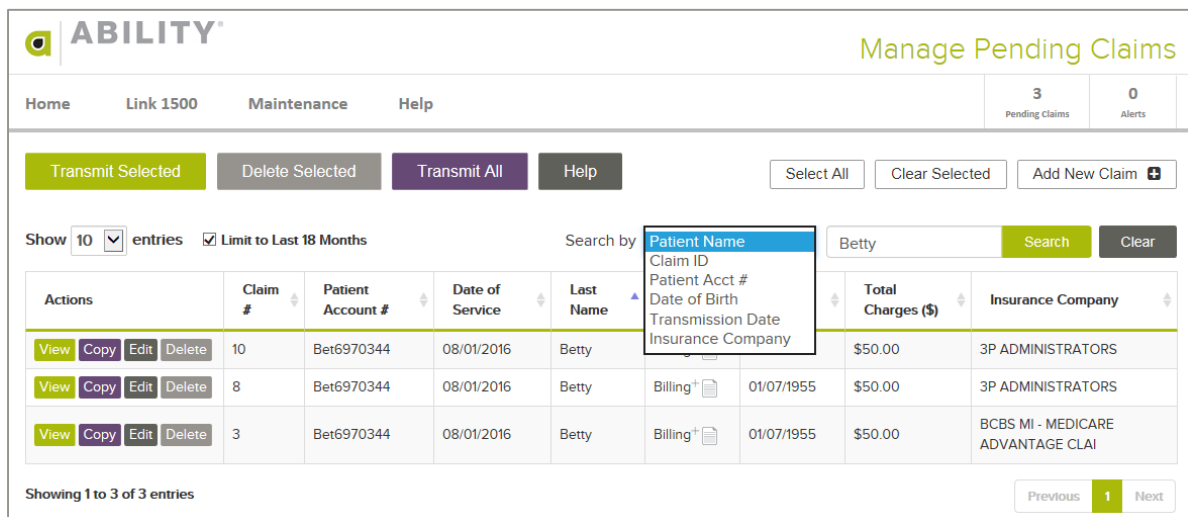
NOTE: Use these selections when you want to take action on an individual row.

Action for an individual row	Description
View	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 ABILITY COMPLETE. NOTE: Click Printer Friendly 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	Copy the selected claim. Click OK when the confirmation dialog box appears. ABILITY CHOICE All-Payer Claims assigns the claim to the next available number in the claim number sequence.

Action for an individual row	Description
	Edit the information of an existing claim. You can also use this action to check eligibility through ABILITY COMPLETE. Click OK when the confirmation dialog box appears.
	Delete an existing claim. Click OK 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 Birth
- Insurance Company






ABILITY® Manage Pending Claims

Home Link 1500 Maintenance Help 3 Pending Claims 0 Alerts

Transmit Selected Delete Selected Transmit All Help Select All Clear Selected Add New Claim +

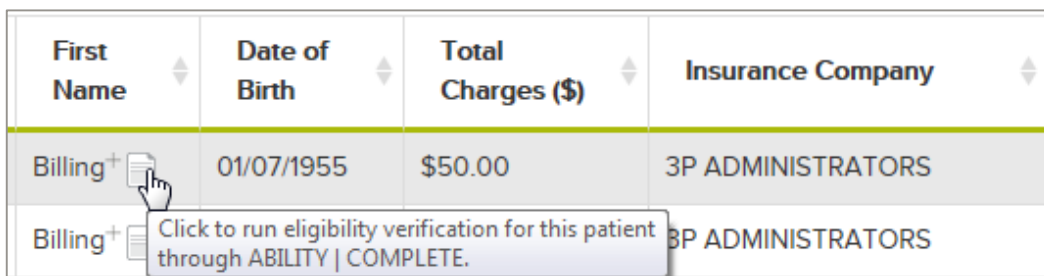
Show 10 entries Limit to Last 18 Months Search by Betty Search Clear

Actions	Claim #	Patient Account #	Date of Service	Last Name	Total Charges (\$)	Insurance Company
	10	Bet6970344	08/01/2016	Betty	\$50.00	3P ADMINISTRATORS
	8	Bet6970344	08/01/2016	Betty	\$50.00	3P ADMINISTRATORS
	3	Bet6970344	08/01/2016	Betty	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI

Showing 1 to 3 of 3 entries Previous 1 Next

Figure 46: Manage Pending Claims page with results limited by Patient Name

If you want to run eligibility verification for this patient through ABILITY | COMPLETE, click the icon next to the patient’s first name (Figure 47).



First Name	Date of Birth	Total Charges (\$)	Insurance Company
Billing+ Betty	01/07/1955	\$50.00	3P ADMINISTRATORS
Billing+ Betty			3P ADMINISTRATORS

Click to run eligibility verification for this patient through ABILITY | COMPLETE.

Figure 47: Eligibility Verification icon in First Name column

A warning message alerts you that any changes you made in ABILITY | COMPLETE may result in discrepancies between the information that appears there and what you see in **ABILITY | CHOICE All-Payer Claims** (Figure 48).

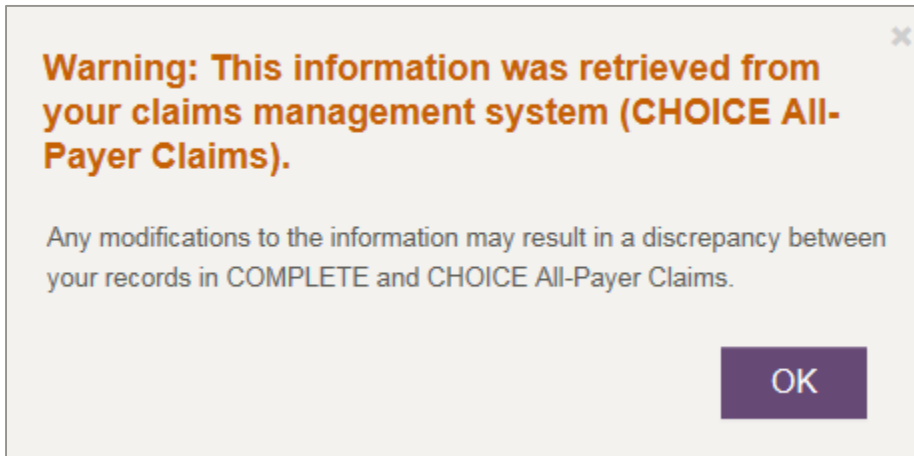


Figure 48: Warning Message

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

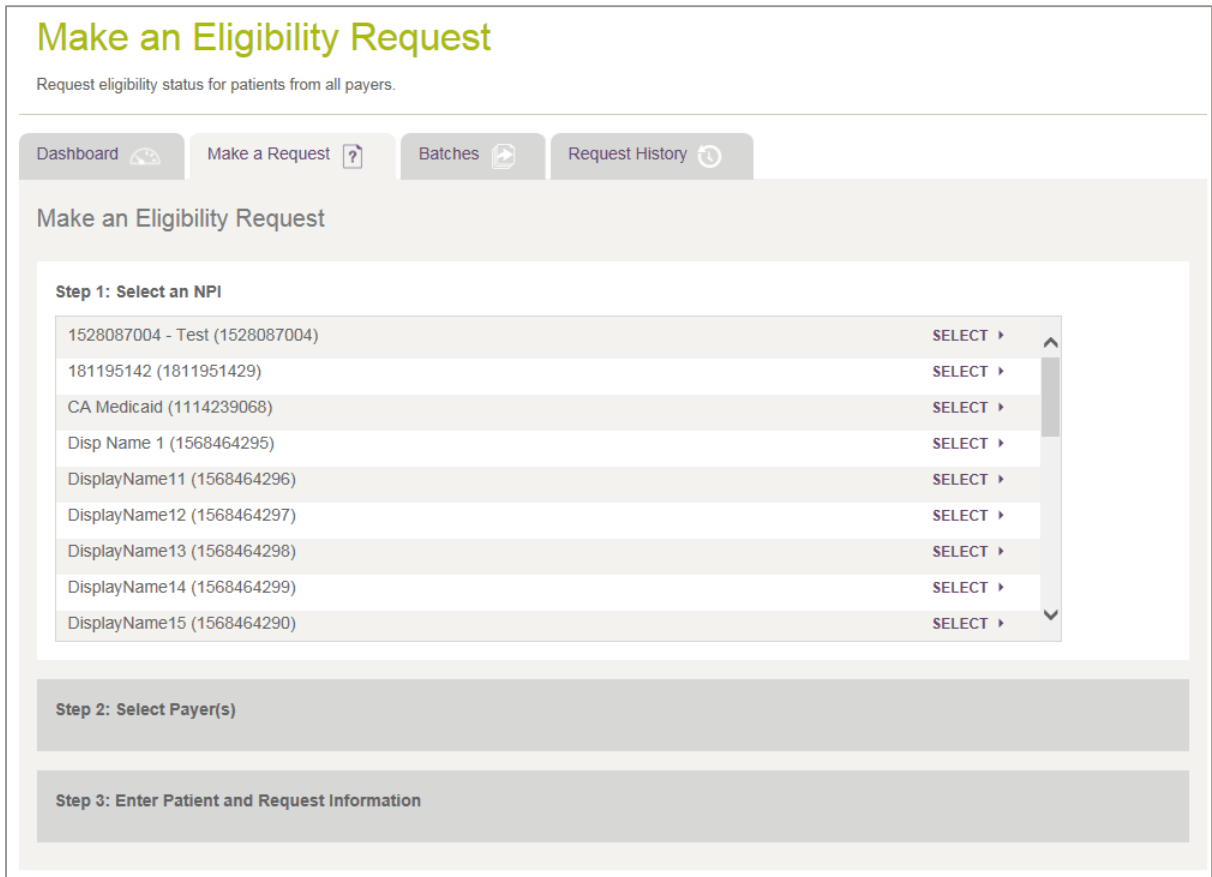


Figure 49: Make an Eligibility Request Page in ABILITY | COMPLETE

- Click a row to select it, then click **Transmit Selected**. A message box prompts you to confirm your selection (Figure 50).

The screenshot shows the 'Manage Pending Claims' interface. A modal dialog box is centered on the screen, asking 'Do you wish to submit 2 row(s)?' with 'Cancel' and 'OK' buttons. The background interface includes a navigation bar with 'Home', 'Link 1500', and 'Maintenance'. On the right, there are counters for '3 Pending Claims' and '0 Alerts'. Below the navigation bar are buttons for 'Transmit Selected', 'Delete Selected', 'Clear Selected', and 'Add New Claim'. A search section includes a dropdown for 'Show 10 entries', a checked 'Limit to Last 18 Months' option, a search input field with 'Patient Name' selected, and 'Search' and 'Clear' buttons. A table lists three claims with columns for Actions, Claim #, Patient Account #, Date of Service, Last Name, First Name, Date of Birth, Total Charges (\$), and Insurance Company. The first and third rows are highlighted in green. At the bottom, it says 'Showing 1 to 3 of 3 entries' and has 'Previous', '1', and 'Next' navigation buttons.

Actions	Claim #	Patient Account #	Date of Service	Last Name	First Name	Date of Birth	Total Charges (\$)	Insurance Company
View Copy Edit Delete	10	Bet6970344	08/01/2016	Betty	Billing	01/07/1955	\$50.00	3P ADMINISTRATORS
View Copy Edit Delete	8	Bet6970344	08/01/2016	Betty	Billing	01/07/1955	\$50.00	3P ADMINISTRATORS
View Copy Edit Delete	3	Bet6970344	08/01/2016	Betty	Billing	01/07/1955	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI

Figure 50: Manage Pending Claims page with Submit dialog box (first and third row selected)

Click **OK** to transmit the claims.

After you transmit a claim, it will appear 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 51).

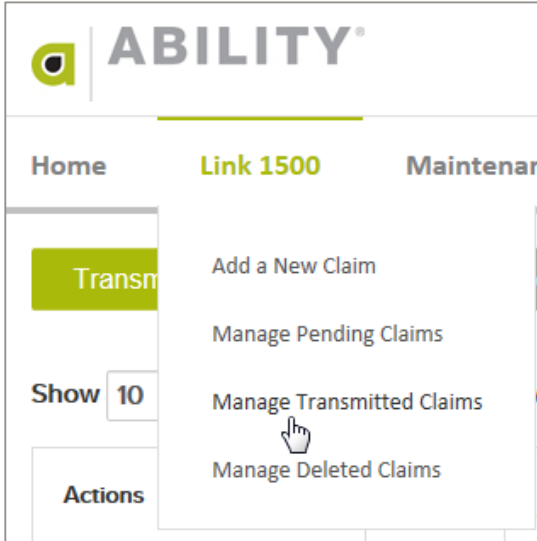


Figure 51: Link 1500 tab with Manage Transmitted Claims selected




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 take action on multiple rows.

Action for multiple rows	Description
Copy Selected	Copy selected rows to the Manage Pending Claims page and assign them the next available claims numbers in sequence.
Delete Selected	Delete selected claims. Click OK when the confirmation dialog box appears to delete these rows.
Select All	Select all claims on the page displayed, only. Claims on additional pages are not selected.
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 actions are available to you in the Action column.

NOTE: Use these selections when you want to take action 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 ABILITY COMPLETE.</p> <p>NOTE: Click Printer Friendly 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 OK when the confirmation dialog box appears. You can also use this action to check eligibility through ABILITY COMPLETE.</p> <p>ABILITY CHOICE All-Payer Claims assigns the claim to the next available number in the claim number sequence.</p>
	<p>Delete an existing claim. Click OK when the confirmation dialog box appears.</p>

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

- Patient Name (the default)
- Claim ID
- Patient Acct #
- Date of Birth
- Insurance Company

ABILITY Manage Transmitted Claims

Home Link 1500 Maintenance Help 3 Pending Claims 0 Alerts

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



Show 10 entries Limit to Last 18 Months Search by Patient Name Betty Search Clear

Actions	Claim #	Patient Account #	Date of Service	Last Name	First Name	Amount (\$)	Transmission Date	Insurance Company
View Copy Delete	12	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/17/2016	BCBS MI - MEDICARE ADVANTAGE CLAI
View Copy Delete	11	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/08/2016	BCBS MI - MEDICARE ADVANTAGE CLAI
View Copy Delete	10	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/19/2016	3P ADMINISTRATORS
View Copy Delete	6	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/05/2016	3P ADMINISTRATORS
View Copy Delete	5	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/05/2016	BCBS MI - MEDICARE ADVANTAGE CLAI
View Copy Delete	4	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/17/2016	3P ADMINISTRATORS
View Copy Delete	3	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/19/2016	BCBS MI - MEDICARE ADVANTAGE CLAI
View Copy Delete	2	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/05/2016	BCBS MI - MEDICARE ADVANTAGE CLAI
View Copy Delete	1	Bet6970344	08/01/2016	Betty	Billing+	\$50.00	08/05/2016	3P ADMINISTRATORS

Showing 1 to 9 of 9 entries Previous 1 Next

Figure 52: Manage Transmitted Claims page (searched by Patient Name)

If you want to run eligibility verification for this patient through ABILITY | COMPLETE, click the icon next to the patient's first name (Figure 53).

First Name	Date of Birth	Total Charges (\$)	Insurance Company
Billing+ 	01/07/1955	\$50.00	3P ADMINISTRATORS
Billing+ 			3P ADMINISTRATORS

Click to run eligibility verification for this patient through ABILITY | COMPLETE.

Figure 53: Eligibility Verification icon in First Name column

- Click a row to select it. The following figure (Figure 54) displays the selected claims that were submitted in the previous section.

ABILITY Manage Transmitted Claims

Home Link 1500 Maintenance Help 1 Pending Claims 0 Alerts

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

Show 10 entries Limit to Last 18 Months Search by Patient Name Betty Search Clear

Actions	Claim #	Patient Account #	Date of Service	Last Name	First Name	Date of Birth	Total Charges (\$)	Transmission Date	Insurance Company
View Copy Delete	10	Bet6970344	08/01/2016	Betty	Billing	01/07/1955	\$50.00	08/19/2016	3P ADMINISTRATORS
View Copy Delete	3	Bet6970344	08/01/2016	Betty	Billing	01/07/1955	\$50.00	08/19/2016	BCBS MI - MEDICARE ADVANTAGE CLAI

Showing 1 to 2 of 2 entries Previous 1 Next

Figure 54: 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 55).

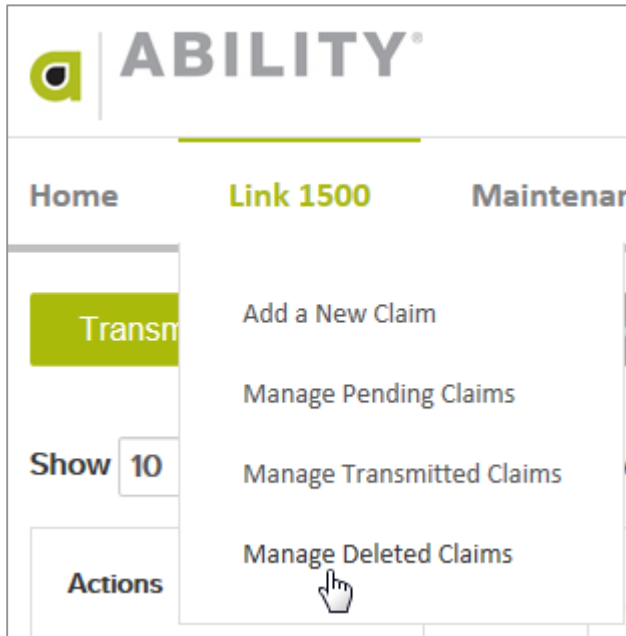


Figure 55: Link 1500 tab with Manage Deleted Claims option selected

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 take action on multiple rows.

Action	Description
Recover Selected	Recover previously deleted rows. Click OK 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 58):

- Patient Name (the default)
- Claim ID
- Patient Acct #
- Date of Birth
- Insurance Company

The screenshot shows the 'Manage Deleted Claims' interface. At the top, there are navigation links for Home, Link 1500, Maintenance, and Help. On the right, there are counters for '3 Pending Claims' and '0 Alerts'. Below this, there are buttons for 'Recover Selected', 'Help', 'Select All', 'Clear Selected', and 'Add New Claim'. The search section includes a dropdown for 'Show 10 entries', a checked checkbox for 'Limit to Last 18 Months', and a search input field containing 'Betty'. A dropdown menu is open over the search field, listing search criteria: Patient Name (selected), Claim ID, Patient Acct #, Date of Birth, Transmission Date, and Insurance Company. The main table displays the following data:

Status	Claim #	Patient Account #	Date of Service	Last Name	First Name	Total Charges (\$)	Insurance Company
Transmitted	10	Bet6970344	08/01/2016	Betty	Billing+	\$0.00	3P ADMINISTRATORS
Untransmitted	9	Bet6970344	08/01/2016	Betty	Billing+ [document icon]	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI
Transmitted	7	Bet6970344	08/01/2016	Betty	Billing+ [document icon]	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI
Transmitted	3	Bet6970344	08/01/2016	Betty	Billing+ [document icon]	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI

At the bottom, it indicates 'Showing 1 to 4 of 4 entries' and has 'Previous', '1', and 'Next' navigation buttons.

Figure 56: Manage Deleted Claims page (searched by Patient Name)

If you want to run eligibility verification for this patient through ABILITY | COMPLETE, click the icon next to the patient's first name (Figure 57).




First Name	Date of Birth	Total Charges (\$)	Insurance Company
Billing+ 	01/07/1955	\$50.00	3P ADMINISTRATORS
Billing+ 	Click to run eligibility verification for this patient through ABILITY COMPLETE.		3P ADMINISTRATORS


Figure 57: Eligibility Verification icon in First Name column

2. Click a row to select it. The following figure displays the two selected claims that were transmitted in the previous section (Figure 58).


Manage Deleted Claims

Home Link 1500 Maintenance Help
3 Pending Claims 0 Alerts





Recover Selected
Help

Select All
Clear Selected
Add New Claim 

Show 10 entries Limit to Last 18 Months

Search by Patient Name

Search
Clear

Status	Claim #	Patient Account #	Date of Service	Last Name	First Name	Date of Birth	Total Charges (\$)	Insurance Company
Transmitted	10	Bet6970344	08/01/2016	Betty	Billing+ 	01/07/1955	\$50.00	3P ADMINISTRATORS
Untransmitted	9	Bet6970344	08/01/2016	Betty	Billing+ 	01/07/1955	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI
Transmitted	7	Bet6970344	08/01/2016	Betty	Billing+ 	01/07/1955	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI
Transmitted	3	Bet6970344	08/01/2016	Betty	Billing+ 	01/07/1955	\$50.00	BCBS MI - MEDICARE ADVANTAGE CLAI

Showing 1 to 4 of 4 entries

Previous
1
Next

Figure 58: Manage Deleted Claims page (searched by Patient Name)

3. After selecting rows, click **Recover Selected**. When the message box appears, click **OK** to recover the selected rows (Figure 59).

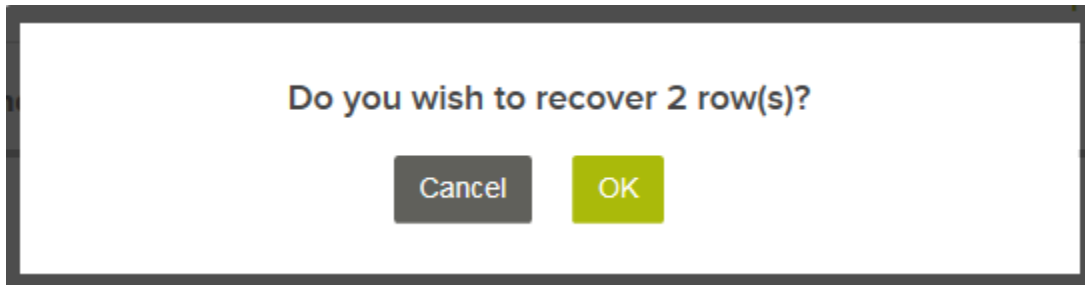


Figure 59: Recover Confirmation dialog box

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

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