

# INVENTORY REPORTING



The Inventory Reporting tool allows you to search through/view all of the claims you've sent to Office Ally. Results will include:

- Current status of the claim in Office Ally's system (Passed, Pending or Rejected)
  - **Passed** - Office Ally accepted the claim and it was sent to the payer
  - **Pending** - Claim failed member eligibility checking and it'll go into pending mode until the next retry
  - **Rejected** - Claim was rejected (by OA or payer) and is in need of correction
  - **Rejected+** - Claim was rejected (by OA or payer) and was either corrected or removed from Claim Fix
  - **Rejected\*** - Claim was rejected for being a duplicate within 90 days and cannot be corrected/resubmitted
- Office Ally Claim ID and File ID
- Payer ID the claim was processed under
- Office Ally's Receive Date
- Patient's First and Last Name
- Patient Account Number
- From and To Date of Service
- Provider Tax ID
- Insured ID
- Total Charge

## USING INVENTORY REPORTING (SEARCH, VIEW AND PRINT CLAIM IMAGES)

1. While logged into Office Ally's Service Center, click on the **Inventory Reporting** link on the left hand side. The **Inventory Reporting** screen will look as follows:

**Inventory Reporting: Detailed**

**Search Options**

Select Payer:

Form Type:  HCFA  UB04  ADA

From Date:    To Date:

Date Type:  DOS  Upload  Processed

Status:

Error Code:

Exclude Error:

Tax ID:  State License ID:

Patient Last Name:  Patient First Name:

Patient Account No:  Insured ID:

File ID:  Claim ID:

CPT Code:  Diagnosis Code:

Submission Type:

Sort By:

Please enter the search criteria then click 'Search'

Detail Report  Summary Report

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- There are many options for you to narrow down the results that pull up. The only required fields are the Date Range fields (From Date and To Date). By default, the dates will be the last 60 days. You can look back years if needed, but the total date range cannot exceed 60 days.
- If you do not specify patient information and just click **Search**, all claims submitted in the past 60 days will pull up.

Please enter the search criteria then click 'Search'

Detail Report  Summary Report

Search Results - 226 claims found

Status	File ID	Claim ID	Payer ID	Received Date	Patient Name (Last, First)	Patient Account No.	From DOS	To DOS	Tax ID	State License ID	Insured ID	Total Charge	Print	Error Code(s)
Passed	138459544	<a href="#">697240806</a>		4/28/2013			4/15/2013	4/15/2013				\$225.00		ACCEPT
Passed	138465318	<a href="#">697267729</a>		4/28/2013			4/1/2013	4/22/2013				\$734.00		ACCEPT
Passed	138465318	<a href="#">697267733</a>		4/28/2013			4/1/2013	4/22/2013				\$198.00		ACCEPT
Passed	138465318	<a href="#">697267732</a>		4/28/2013			4/2/2013	4/26/2013				\$320.00		ACCEPT
Passed	138465318	<a href="#">697267731</a>		4/28/2013			4/1/2013	4/18/2013				\$594.00		ACCEPT
Passed	138465318	<a href="#">697267730</a>		4/28/2013			4/1/2013	4/7/2013				\$931.00		ACCEPT
Passed	138479103	<a href="#">697305906</a>		4/29/2013			4/23/2013	4/23/2013				\$169.00		ACCEPT
Passed	138479103	<a href="#">697305904</a>		4/29/2013			4/25/2013	4/25/2013				\$540.00		ACCEPT
Passed	138479103	<a href="#">697305903</a>		4/29/2013			4/25/2013	4/25/2013				\$217.00		ACCEPT
Passed	138465318	<a href="#">697267738</a>		4/28/2013			4/3/2013	4/24/2013				\$256.00		ACCEPT
Passed	138465318	<a href="#">697267737</a>		4/28/2013			4/1/2013	4/21/2013				\$532.00		ACCEPT
Passed	138465318	<a href="#">697267736</a>		4/28/2013			4/22/2013	4/28/2013				\$346.50		ACCEPT

\*PHI has been removed from image.

- Clicking **Export to Excel** will create an excel spreadsheet with the result information.

Status	FileID	PayerID	ClaimID	First	Last	PatAcctNum	FromDOS	ToDos	TotalCharge	MasterVendor	StateLicenseID	InsuredID	ReceivedDate
Passed	138459544		697240806				4/15/2013	4/15/2013	225				4/28/2013
Passed	138465318		697267729				4/1/2013	4/22/2013	734				4/28/2013
Passed	138465318		697267733				4/1/2013	4/22/2013	198				4/28/2013
Passed	138465318		697267732				4/2/2013	4/26/2013	320				4/28/2013
Passed	138465318		697267731				4/1/2013	4/18/2013	594				4/28/2013

\*PHI has been removed from image.

- To view the claim image, click on the blue **Claim ID** link in the results.

Search Results - 226 claims found

Status	File ID	Claim ID	Pa
Passed	138459544	<a href="#">697240806</a>	S
Passed	138465318	<a href="#">697267729</a>	

- To print the claim image, scroll to the bottom left hand corner and click **Print to PDF File**.

Pay To Address:

Pay To City: State: Zip:

Pay To Tax ID:

Pay To NPI:

Pay To ID:

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## OFFICE ALLY ERROR CODES


There are multiple error codes used by Office Ally, each with their own description. You are able to view these codes and descriptions within Inventory Reporting.

1. First, be sure to check that you have enabled pop-ups when using Office Ally's website.
2. Perform any search in Inventory Reporting.
3. Click the gray arrow in the Error(s) column.

Error Code(s): If the code is PRRJK, it indicates that the claim was rejected at the payer. Click here to view error codes with descriptions.

Insured ID	Total Charge	Print	Error Code(s)
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4. You will then see the pop-up containing all of the Office Ally error codes.



ERROR CODES	
This list contains every error code, with description, that has ever been assigned to your claim(s) as of DATE: 6/29/2018 6:31:31 AM (PST)	
Error Code	Description
AT001	Missing/Invalid Attachment Report Type Code
AT002	Missing/Invalid Attachment Transmission Code
AT003	Missing/Invalid Attachment Control Number
CA01	Claim Accepted
DE001	Area of Cavity invalid (area), Valid Values =00,01,02,09,10,20,30,40,L,R
DE100	Invalid Billing Provider NPI
DE101	Invalid Rendering Provider NPI
DE102	Invalid Referring Provider NPI
DE103	Invalid Primary Care Provider NPI
DE104	Invalid PayTo Provider NPI
DE105	Invalid Billing Provider TaxId
DE106	Invalid Specialty, Taxonomy Code
DE110	Invalid Date of Service
DE111	Invalid Date of Service
DE1110	Date of Service Must be Greater or equal to Patients DOB
DE1111	Date of Service Must be Greater or equal to Patients DOB
DE1112	Date of Service Must be Greater or equal to Patients DOB
DE1113	Date of Service Must be Greater or equal to Patients DOB
DE1114	Date of Service Must be Greater or equal to Patients DOB

Note: You can use "Ctrl+F" to search for your specific code and description.

## USING INVENTORY REPORTING TO SUBMIT CORRECTED CLAIMS

You are able to submit corrected claims (even if they never rejected originally).

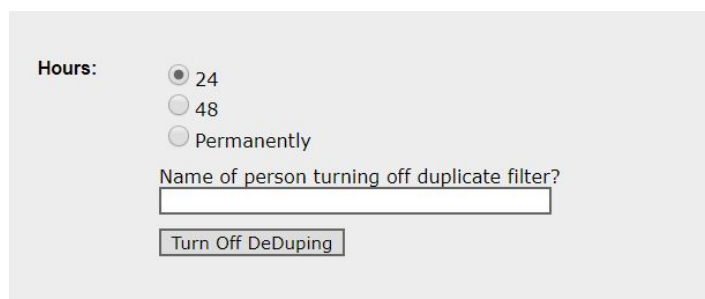
First you will need to turn off your **Duplicate Filter**:

1. You will need to be signed into the **Service Center** level of Office Ally, not Practice Mate or EHR. To be sure you are logged in correctly, go to [www.officeally.com](http://www.officeally.com), and then just click the word 'Login' and put in your user name and password.
2. After logging in, on the left hand side of the page, there will be a list of blue links. Towards the bottom of the page there will be a category titled **My Settings**. Under that category will be a link titled **Admin Section**. Hold your mouse over that and click **Duplicate Filter Setting**.

### My Settings



3. On the next page, select how long you would like to turn off the duplicate for, e.g. the next 24 hours, 48 hours, or permanently.
4. Put your name in the box below so there is a record of who chose to turn off the filter.
5. Click the button that says **Turn Off DeDuping**.



The image shows a screenshot of the 'Duplicate Filter Setting' form. It has a section labeled 'Hours:' with three radio button options: '24', '48', and 'Permanently'. Below this is a text input field labeled 'Name of person turning off duplicate filter?'. At the bottom of the form is a button labeled 'Turn Off DeDuping'.

6. Another box will pop up asking 'Are you sure...?' Click **OK**.

Once your Duplicate Filter has been turned off, you can now search for your claim(s) in Inventory Report, make the necessary corrections and resubmit them straight from there. To update a claim from Inventory Reporting, click on the **Edit Pencil icon** on the far left hand side. Once the necessary changes have been made, click on **Update** and the claim will be resubmitted.

**Please Note: Some payers require a Resubmission Code to be used on corrected claims and others do not. Please contact your payer to verify their resubmission requirements.**