

PAYER LIST

Office Ally has the ability to submit to thousands of insurance companies (payers). To review the list of payers we have a connection with, please visit our Payer List under Resource Center > Payer Lists, or by clicking <u>here</u>.

Payer I	ist - Profession	al (CMS150	00)	& Iı	nst	itut	ion	al (l	JB)4)	
Payer ID		Payer Name									
Line of Busines	s Select 💌	Type/Model	Sel	ect	-		т	ransac	tions	All	•
		Search	S	Show A	AII	Do	wnloa	d Full I	List		
 ENR = Pre E TYP = Type/ C/P - Comm G/NP - Gove 	vollment Required Iodel rcial/Par nment/Non-Par	 ST = State LOB = Line Of Bu M = Medical / Pro H = Hospital / Inst 	isiness fessiona titutional	al I				- R - R - El - Sl	TE = Rei TS = Rei RA = Ele EC = Sec	al Time E al Time C ctronic R condary (ligbility (270/271) Iaim Stabus (276/277) emittance Advice (835) CCB)
			1	2345	5678	8 9 10	11 12	13 14 15 16 17 18 19 20 21 22 23 24 25 26			
Payer ID	Payer Name	•	ENR	түр	ST	LOB	RTE	RTS	ERA	SEC	Note

PRE-ENROLLMENT

Certain payers require pre-enrollment to be completed before submitting claims electronically through a clearinghouse. If the necessary steps are not taken, your claims may be rejected back until pre-enrollment has been completed. You can find the necessary payer enrollment forms under Resource Center > Payer Enrollment Forms, or by clicking here.



Payer enrollment forms will be separated based on the state they're for. If a payer is not state specific, it will be listed under the "ALL or Multiple States Payer Enrollment Forms" section.



If a payer is not able to receive electronic claims or we don't yet have them available on our payer list, Office Ally can send paper claims on your behalf. In order to activate this feature, the <u>Update printing option</u> form will need to be completed. This form is located under Resource Center > Office Ally Forms/Manuals > Account Management.

CREATING AND SUBMITTING CLAIMS

Once you have completed the necessary pre-enrollment forms (if needed), you can begin submitting claims through Office Ally's Online Claim Entry tool. To access the Online Claim Entry tool, go to Office Ally's home page, hover over the log in link, and click on Office Ally. Enter in your user name and password that was assigned to your account.

LOGIN	Products/
Office Ally	
Practice Mate	
EHR 24/7	•
Forgot Password	s
Forgot UserName	a
	No contracts to

From the Service Center menu, hover over the "Online Claim Entery" link. There will be mulitple claim form options to choose from. The insert claim form you select will allow you to begin completing the online claim form immediatly. In this section we will select "Managed Stored Information". This area of Online Claim Entry will allow you to build and store data for future claim use so that you will not have to manually enter data for each claim you create.

Upload Claims		Below are links to
Online Claim Entry	CMS 1500	02/12 Insert Claim (New)
Claim Fix	HCFA Mana	age Stored Info
View Claims	UB04 Inser	t Claim
CCDA	UB04 Mana	ge Stored Info
Upload CCDA	ADA Insert	Claim
Download	Claims Awa	aiting Batch
Download Claims	PM160	

To begin adding stored information , click on the the 'Add' button to the right of Stored Payers. This will be the list of payers that you plan on submitting claims to.

Stored Information					K
Stored Payers	Select Payer	•	Edit	Delete	Add
Stored Patients	Colort Delivet (elister fo		Edit	Delete	Add

Below, you will see the available fields that can be filled in. Click the 'OA Payers' button to open a database of all payers that can be submitted to electronically. Enter the name of a company, click 'Search' and locate a payer from the search results.

Add P	ayer —					
— Pa	yer Infor	mation				
Paye	er Name:	*	0	A Payers		
Add	ress/Payer	ID:				
2 nd	Address:					
City:						
State	e:					
Zip:						
				l	Update	Cancel
Office	Ally's Pay	rer List - [Search Results - Top 200 Red	ords]			
Office	a Ally's Pa y Name ▼ S	ver List - [Search Results - Top 200 Red arts With V Blue Cross	ords]		Search	Show All
Office Payer Select	ally's Par Name ▼ S PayerID	ver List - [Search Results - Top 200 Red arts With V Blue Cross	ords]	City	Search State	Show All
Office Payer Select Select	Ally's Par Name ▼ S PayerID BC001	ver List - [Search Results - Top 200 Re arts With V Blue Cross PayerName Blue Cross	ords]	City	Search State CA	Show All Zip

For electronic submission, the only required fields are the 'Payer Name' and 'Payer ID'. The Payer ID is the electronic address for a specific insurance company, replacing the need for a mailing address. Click 'Select' next to the payer you choose and the information will copy to the table for you.

If you cannot find a payer on our payer list, include the payer's mailing address on the claim. Office Ally will attempt to find the matching Payer ID based on the listed payer name and address. If we cannot determine an electronic connection for the listed payer and you have authorized paper submission, we will print and mail the claims for you.

Click the 'Update' button at the bottom of the screen to add that payer to your stored information list.



Patients, Billing Providers, Rendering Providers, and Facilities can be entered similarly by clicking the 'Add' button, entering the desired information, and clicking 'Update'.

Stored Templates is an optional tool that can help you maximize efficiency when billing. It can be used for storing recurring diagnosis and procedure codes for a specific patient or for storing commonly used codes used for certain types of visits that apply to various patients. Enter a name for the template and any information you would like to appear on the claim form whenever this template is selected.

Templat	e Informatio	•					-										
implate N	ame					4											
Date of	Current						15. If Patie	nt Has Had	Same or Sim	lar lliness, C	live First	Date: 16. Fro	Dates Pati m:	ent Unable to Wo To:	rk in Current Oci	cupation	
Name o	f Referring Phys	sician or Othe	r Source (Firs	st, Middle I	nt, Last)		Referring	Physician II				18.	Hospitaliz	ation Dates Relate	d To Current Se	rvices	
							17a.					Fro	m: []	To:			
							170	NPI									
Reserve	ed For Local Use											20.	Outside L	ab?	\$ Charge		
		Store Security											YES O	NO			
. Diagnos	sis or Nature of	Illness or Inju	ury (Relate Ite	ms A(1)	B(2), C(3)	or D(4) to its	em 24E by B	ine)			-	22. Col	Medicaid i se	Resubmission	Onig	ginal Ref.	No
(1)		B(2)	***		C(3)	***	D(4	9	44.4	ICD Ind.	-			123			_
(5)		F(6)	***		G(7)		H(B	3)	++++			23	Prior Auth	orization Number	r		
9)		4(10)		1	K(11)	480	1.(1	2)	***								
24. A.			8.	с.	D.				٤.	۶.	G,	н.	L	J.			
From	24. Date Of Se To	rvice	Place Of Service	EMG	CPT/ HCPCS		Modifie B	r c D	Diag. Pointer	Charge	Days Or Units	EPS0T Family Plan	ID QUAL	Rendering Provider ID 8	Rendering Provider NPI	NDC Qual	NDC Cod

If you plan to enter specific diagnosis codes for your template, the ICD indicator selection will have to be made prior to adding your diagnosis to the template. There will be an option to select either ICD-9 or ICD-10 diagnosis codes from Office Ally's diagnosis code list. When finished, click the 'Update' button to save your template.

A(1) m C(2) m D(4) m LCD Ind. T E(5) CO-10 br CO-9 Cresswalt m G(7) m H(8) m (9) CO-10 br CO-9 Cresswalt m K(11) m L(12) m 23. Prior Authorization Number 24. A. B. C. D. E. F. G. H. L J. 24. Date Of Service Of Of From EMG CPT/ B Modifier Diago Diago EPS0T Units D. Rendering Provider NP													19. Reserve			
24. A. B. C. D. E. F. G. H. I. J. J. 24 Date Of Service From Place Of Service Place Of Service EMG CPT/ HCPCS Modifier B Diag. Pointer Diag. Pointer Diag. Pointer Diag. Pointer Diag. Provider ID# Diag. Provider ID# Provider ID#	Long to the set of a log y (water lenter a right p(2), close region lenter a right p(2), close right p(2), clos										A(1) E(5) I(9)					
24. Date Of Service Place From To Service EMG CPT/ HCPCS A B C D Pointer Diag. Pointer Pointer Plan Pointer Plan QUAL Provider ID # Provider ID # Provider ID #				J.	L.	Н.	G.	F.	E.			D.	C.	В.		24. A.
	NDC NDC Qual Code	NDC Qual	Rendering Provider NPI	Rendering Provider ID #	ID QUAL	EPSDT Family Plan	Days Or Units	Charge	Diag. Pointer	difier C D	Mod A B	CPT/ HCPCS	EMG	Place Of Service	24. Date Of Service 1 To	From

Below is and example of how the Managed Stored Information is used to created a claim with the stored data you have entered. From each drop down list, you will select each item that you would like to be automatically filled in on the claim form. Once the information is selected, click on Create New Claim button.

Stored Payers	Select Payer	•	Edit	Delete	Add
Stored Patients	Select Patient (click for rr 🔻		Edit	Delete	Add
Stored Billing Providers	Select Provider	•	Edit	Delete	Add
Stored Rendering Providers	Select Provider	•	Edit	Delete	Add
Stored Facilities	Select Facility	•	Edit	Delete	Add
Stored Templates	Select Template	-	Edit	Delete	Add

After you have selected to created the claim form, there will still be required fields to be completed that can not be filled in by the stored information. Dates of service (DOS), diagnosis code pointers, etc. will need to be completed for each new claim.

	24. A.	В.	C.	D.				E.	F.	(
	24. Date Of Service From To	Place Of Service	EMG	CPT/ HCPCS	A	Modifie B	er C D	Diag. Pointer	Charge	Da (Un
1										
2										

After you enter in the DOS, diagnosis pointers, etc., review the claim for errors and then click the 'Update' button at the bottom of the claim form. The program will alert you if you missed certain required fields. If all required fields were completed, clicking on "Update' will put your claim in the Claims Awaiting Batch section.

Message from webpage 24. Lineltem 1: Missing From Date of Service. Lineltem 1: Missing Diagnosis Code Pointer 24. Lineltem 2: Missing From Date of Service. Lineltem 2: Missing Diagnosis Code Pointer 24. Lineltem 3: Missing Diagnosis Code Pointer 24. Lineltem 3: Missing Diagnosis Code Pointer 21. Missing Diagnosis Code Pointer 21. Missing Diagnosis Code 1.
ОК

CLAIMS AWAITING BATCH

After you have updated your claim, the process of submitting the claim has been completed. Your recently submitted claim is sent to the Claims Awaiting Batch. Your claim(s) will sit in there waiting for Office Ally to pick up them up for processing (occurs every 3 hours). From this section of Office Ally you can edit, print, or delete the claim before the claim is sent to the insurance company.

Online Entry - Waiting to be Batched							© C © C) CMS 1500 08/05 (Old)) CMS 1500 02/12 (New) Set Default			
Form Type	Processed	FileID	Claim ID	Patient Name	Total Charges	From DOS	Payer	Secondary	Print	Correct	Delete
HCFA	6/15/2015	ONLINE	172278628		875.00	11/5/2015		N	٩	Correct	Delete
HCFA	6/15/2015	ONLINE	172278561		1.00	11/1/2015		N	٩	Correct	Delete
HCFA	6/15/2015	ONLINE	171605213		1.00	8/1/2015		N	٩	<u>Correct</u>	<u>Delete</u>
HCFA	6/15/2015	ONLINE	169571030		60.00	10/19/2015		N		Correct	<u>Delete</u>

In order to access this section, hover over Online Claim Entry from the blue links on the left and select Claims Awaiting Batch.

· opiodo olarito	
Online Claim Entry	CMS 1500 02/12 Insert Claim (New)
Claim Fix	HCFA Manage Stored Info
View Claims	UB04 Insert Claim
CCDA	UB04 Manage Stored Info
Upload CCDA	ADA Insert Claim
Download	Claims Awaiting Batch
Download Claims	PM160

CLAIM FIX / REPAIRABLE CLAIMS

If a claim is rejected during Office Ally's or the payer's scrubbing process, your claims will be sent to 'Claim Fix'. These claims can be easily repaired and re-submitted by hovering over 'Claim Fix' and clicking 'Repairable Claims.'

 Online ordine Entry 		
Claim Fix	Repairable Claims	ed
View Claims	Claims Awaiting Batch	
CCDA		eu

A calendar will display once in Claim Fix. If a claim was rejected and is awaiting correction, the date will be highlighted in pink.

Claim Fix - Repairable Claims									
<<	No	ver	nbe	r 20	15	>>]	Ca	lendar Legend
S	М	Т	W	Т	F	S]		Active Date
1	2	3	4	5	6	7]		Claims Failed
8	9	10	11	<u>12</u>	13	14]		
15	16	17	18	19	20	21]		
22	23	24	25	26	27	28	1		
29	30						1		
aile	d C	lain	ns F	orl	Frid	ay,	Nove	mb	er 13, 2015

By clicking on the pink date, it will bring up a list of all the rejected claims for that day. In this section, you can correct the claim by clicking on the 'Correct' link. Once you have corrected the claim, it will be sent to the 'Claims Awaiting Batch' for further processing. There is a remove option as well if you do not plan on correcting/resubmitting the claim from Claim Fix. You can remove the claim by checking the box under the Select column and clicking on the Remove button (top right hand side). After correcting (or removing) the claim from Claim Fix, the calendar date will no longer be pink indicating there is nothing left to fix for that day.

	Ji Thursuay, No.	7ember 12, 2015				2	Check All Cle	ar All Print		Print Sele	ct	Remove
HCFA Failed Cla	ims (click to colla)	ose or expand this	section) Export To Excel									
										<< P	revious 1	Next >>
Processed	File ID	<u>Claim ID</u>	Patient Name	Provider	Tax ID	<u>Total</u> <u>Charges</u>	Secondary	From DOS	<u>Payer</u>	No. of Errors	Correct	Select
11/12/2015	291573316	1125222488				130.00	Y	10/26/2015	87726	1	Correct	
Error(s): 1. S	econdary Claim	Information Miss	sing or Invalid - Each line	must balance; Line Charge /	Amount = Line S	ium Of Adju	stment Amour	nts + Line Payer 🖡	Paid Amou	int		
11/12/2015	291737638	1125636865				140.00	N	11/03/2015	BC001	2	Correct	
Error(s): 1. Claim Contains Invalid Diagnosis Code References in Line Items 2. Diagnosis code reference, on line 01 is invalid.												

NOTE: Claims that are rejected will remain in the 'Claim Fix' until they are either corrected or removed.

DOWNLOAD FILE SUMMARY

To view reports for the claim batches you've submitted, click the 'Download File Summary' link. This calendar is similar to the 'Claim Fix,' but pink dates here signify that a report is available for claims submitted on this date. File Summary reports will show which claims have passed or failed Office Ally's screening process, while EDI Status reports will show which claims have been accepted or rejected by the billed insurance company. These reports can be used to verify the receipt and status of your submitted claims.



Click on a date to view reports from the billed payers on that date. Once you have viewed all reports for a date, it will show a blue background.

(0) Downloads pending in prior month																
<<	No	ven	nbe	r 20	15	>>	Ca	lendar Le	egend							
S	М	Т	W	Т	F	S		Active Da	te 🔳							
1	2	3	4	5	<u>6</u>	7		Report(s)	To Be Viewed 🔳							
8	<u>9</u>	<u>10</u>	<u>11</u>	12	<u>13</u>	14		Report(s)	Viewed							
15	16	17	18	19	20	21	Not	Notes: This Download File Summary page has been changed to display only								
22	23	24	25	26	27	28	File	ile Summary and Payer Response reports. To view EOB and ERA 835 reports,								
29	30					\square	plea	ase use pa	age "Download EOI	B / ERA 835".						
						_										
Pay	/er 🛛		Forn	n Ty	ре	N.	Fi	ile ID 🛛 🔍	File N	Vame		#Accepted	#Pending 🗏	#Failed 1	Total 🗏	Download/View 🏾
MU	ILTI	HC	CFA				291	1737544	ONLINE ENTRY	BATCH: 24572222		14	0	1	15	VIEW
MU	ILTI	HC	CFA				291	1572631	ONLINE ENTRY	BATCH: 24628304		14	0	1	15	VIEW
MU	ILTI	Pa	yer	Res	spo	nse	291	1548187	291548187_EDI	_STATUS_2015111	2.txt	1	0	0	1	VIEW
					_	_	<u> </u>									

(0) Downloads pending in prior month							month	J						
Sovember 2015 >>> Calendar Legend								gend						
Μ	Т	W	Т	F	S	Act	tive Date	e	d					
2	<u>3</u>	<u>4</u>	5	<u>6</u>	7	Rer	port(s) 7	To Be Viewed	4					
<u>9</u>	<u>10</u>	<u>11</u>	12	<u>13</u>	14	Rer	Report(s) Viewed							
i 16	17	18	19	20	21	Notes	Notes: This Download File Summary page has been changed to display only							
2 23	24	25	26	27	28	File Su	ummary #	and Payer Respor	nse reports. To view EOB an	nd ERA 835 re	eports,			
30				\square	\square	please	a use pa	ge "Download EO)B / ERA 835".					
yer "	1	Forn	n Ty	ре	T	File I	D	File	Name 🛛	#Accepted \	#Pending 🗏	#Failed 🗏	Total 🗏	Download/View 🗏
JLTI	HC	SFA				29173	37544	ONLINE ENTRY	BATCH: 24572222	14	0	1	15	VIEW
JLTI	HC	FA				29157	72631	ONLINE ENTRY	BATCH: 24628304	14	0	1	15	VIEW
JLTI	Pa	yer	Res	spo	nse	29154	48187 2	291548187_ED	I_STATUS_20151112.txt	1	0	0	1	VIEW
	Dov No M 2 9 16 23 30 yer [™] JLTI JLTI JLTI	Downlo M T 2 3 9 10 16 17 23 24 30	Downloads M T W 2 3 4 9 10 11 16 17 18 23 24 25 30 - JLTI HCFA JLTI HCFA JLTI Payer	Downloads per M T W T 2 3 4 5 9 10 11 12 16 17 18 19 2 3 4 5 3 10 11 12 16 17 18 19 2 3 4 5 30 - - - yer Form Ty - - JLTI HCFA - - JLTI Payer Re - -	Downloads pendit M T W T F 2 3 4 5 6 9 10 11 12 13 16 17 18 19 20 23 24 25 26 27 30 Ver Form Type Form Type JLTI HCFA JLTI HCFA JLTI Payer Respt	Downloads perding in M T W T F S 2 3 4 5 6 7 9 10 11 12 13 14 16 17 18 19 20 21 23 24 25 26 27 28 30 yer Form Type JLTI HCFA JLTI Payer Response	Downloads pending in prior M T W T F S Acc M T W T F S Acc 2 3 4 5 6 7 Re 9 10 11 12 13 14 Re 23 24 25 26 27 28 File St 30 S Form Type File I File I JLTI HCFA 2915 2915 JLTI Payer Response 2915	Downloads pending in prior month November 2015 Calendar Leg M T W T F S Active Dat 2 3 4 5 6 7 Report(s) T 9 10 11 12 13 14 Report(s) Notes: This D 2 3 2 26 27 28 File Summary in please use pairs 30 S Form Type File ID File ID JLTI HCFA 291572631 JLTI Payer Response 291548187 2 291548187 2	Downloads pending in prior month November 2015 ≥> Calendar Legend M T W T F S 2 3 4 5 6 7 Report(s) To Be Viewed Notes: This Download File Sum 2 10 11 12 13 14 Report(s) Viewed Notes: This Download File Sum 2 3 2 2 2 2 2 2 2 2 2 2 2 2 2 3 4 5 6 7 Report(s) Viewed Notes: This Download File Sum 2 3 2 <t< td=""><td>Downloads pending in prior month November 2015 >> Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 9 10 11 12 13 14 Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 File Summary and Payer Response reports. To view EOB at please use page "Download EOB / ERA 835". Yer Form Type File ID File Name JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24572222 JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24628304 JLTI Payer Response 291548187 291548187_EDI_STATUS_20151112.td</td><td>Downloads pending in prior month Image: November 2015 >>> Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 File Summary and Payer Response reports. To view EOB and ERA 835 replays use page "Download EOB / ERA 835". Yer Form Type File ID File Name #Accepted I JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24572222 14 JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24628304 14 JLTI Payer</td><td>Downloads pending in prior month November 2015 Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 1 11 12 13 14 Report(s) Viewed Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 Report(s) Viewed Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 Report(s) Viewed Report(s) Viewed</td><td>Downloads pending in prior month Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 2 1 12 13 14 Report(s) Viewed Report(s) Viewed Report(s) Viewed 2</td><td>Downloads perding in prior month Calendar Legend M T W T F S Active Date Notes: This Download File Summary page has been changed to display only 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed</td></t<>	Downloads pending in prior month November 2015 >> Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 9 10 11 12 13 14 Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 File Summary and Payer Response reports. To view EOB at please use page "Download EOB / ERA 835". Yer Form Type File ID File Name JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24572222 JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24628304 JLTI Payer Response 291548187 291548187_EDI_STATUS_20151112.td	Downloads pending in prior month Image: November 2015 >>> Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 2 3 4 5 6 7 Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 File Summary and Payer Response reports. To view EOB and ERA 835 replays use page "Download EOB / ERA 835". Yer Form Type File ID File Name #Accepted I JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24572222 14 JLTI HCFA 291572631 ONLINE ENTRY BATCH: 24628304 14 JLTI Payer	Downloads pending in prior month November 2015 Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 1 11 12 13 14 Report(s) Viewed Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 Report(s) Viewed Report(s) Viewed Report(s) Viewed 23 24 25 26 27 28 Report(s) Viewed Report(s) Viewed	Downloads pending in prior month Calendar Legend M T W T F S Active Date 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed 2 1 12 13 14 Report(s) Viewed Report(s) Viewed Report(s) Viewed 2	Downloads perding in prior month Calendar Legend M T W T F S Active Date Notes: This Download File Summary page has been changed to display only 2 3 4 5 6 7 Report(s) To Be Viewed Report(s) Viewed

Note: These reports will remain available for your records for at least three years.

INVENTORY REPORTING

Within the Inventory Reporting section, you can view all of the claims you sent to Office Ally, whether they have passed or rejected. Inventory Reporting will list the Office Ally Claim/File ID assigned to each claim as well as the Payer ID the claim was sent to, OA's Receive Date, Patients First/Last Name, Patient Acct Number, From/To DOS, Tax ID (Master Vendor), Insured ID, and Total Charges. You are able to click on the Claim ID (blue link) and pull up the claim image. From here you can click on "Print to PDF File" to print that claim image.

SCAN Claim Status							
Reports							
Billing Report							
Upload Eligibility							
View Claim History							
Quick Claim Status							
Inventory Reporting							
LookUp / References							

Note: Office Ally archives all claims submitted here for at least seven years.

SUPPORT

If you have any questions about Office Ally's Service Center, or would like one-on-one help with any of our products, please call our Technical Support line at (360) 975-7000 Option 2. If you need assistance with claim rejections or claim not on file issues, call our Customer Service line at (360) 975-7000 Option 1. Please have your username ready.