

ONLINE CLAIM ENTRY INSTRUCTIONS



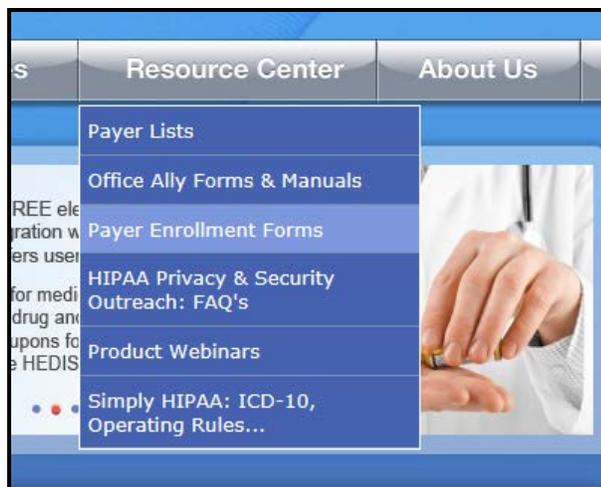
PAYER LIST

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 [here](#).

| Payer ID | Payer Name | ENR | TYP | 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.

[ALL or Multiple States Payer Enrollment Forms](#)

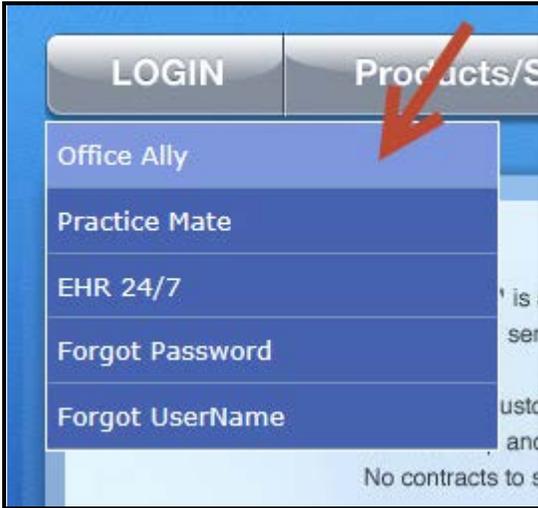
Payer Enrollment Forms for State Specific Payers:

AL | AK | AZ | AR | CA | CO | CT | DE | FL | GA | HI | ID | IL | IN | IA | KS | KY | LA | ME | MD
MA | MI | MN | MS | MO | MT | NE | NV | NH | NJ | NM | NY | NC | ND | OH | OK | OR | PA | RI | SC
SD | TN | TX | UT | VT | VA | WA | DC | WV | WI | WY

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 [Update printing option](#) form will need to be completed. This form is located under Resource Center > Office Ally Forms/Manuals > Account Management.

CREATING AND SUBMITTING CLAIMS

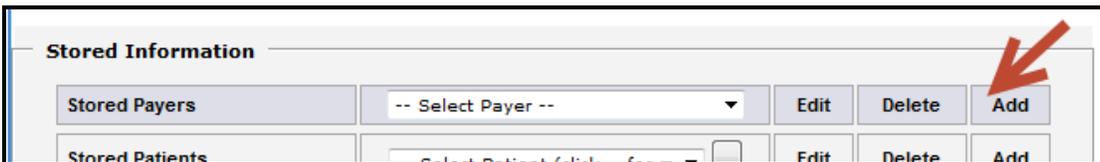
Once you have completed the necessary pre-enrollment forms (if needed), you can begin submitting claims through Office Ally's Online Claim Entry tool. To access the Online Claim Entry tool, go to Office Ally's home page, hover over the log in link, and click on Office Ally. Enter in your user name and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



From the Service Center menu, hover over the "Online Claim Entry" link. There will be multiple claim form options to choose from. The insert claim form you select will allow you to begin completing the online claim form immediately. 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.



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.



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.

Office Ally's Payer List - [Search Results - Top 200 Records]

Payer Name: [v] Starts With: [Blue Cross] Search Show All

| Select | PayerID | PayerName | City | State | Zip |
|--------|---------|----------------------------------|------|-------|-----|
| Select | BC001 | Blue Cross | | CA | |
| Select | BC001 | Blue Cross-California - Medi-Cal | | CA | |

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.

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.

The screenshot shows a form with several sections:

- 21. Diagnosis or Nature of Illness or Injury:** Includes dropdown menus for ICD-10 System Defined List and ICD-10 to ICD-9 Crosswalk, and a dropdown for ICD Ind.
- 20. Outside Lab?** Radio buttons for YES and NO.
- 22. Medicaid Resubmission Code:** A text input field.
- 23. Prior Authorization Number:** A text input field.
- Table 24. A.:** A table with columns for Date of Service (From/To), Place of Service, EMG, CPT/HCPCS, Modifier (A, B, C, D), Diag. Pointer, Charge, Days Or Units, EPSDT Family Plan, ID QUAL, Rendering Provider ID #, Rendering Provider RPI, NDC Qual, and NDC Code.

Below is an example of how the Managed Stored Information is used to create 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.

The 'Stored Information' section contains several dropdown menus:

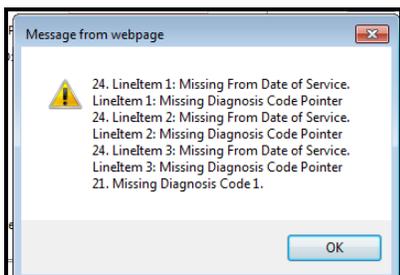
- Stored Payers: -- Select Payer --
- Stored Patients: -- Select Patient (click .. for π) --
- Stored Billing Providers: -- Select Provider --
- Stored Rendering Providers: -- Select Provider --
- Stored Facilities: -- Select Facility --
- Stored Templates: -- Select Template --

 Below these is a red button labeled "Create CMS 1500 02/12 Claim (New)".

After you have selected to create the claim form, there will still be required fields to be completed that cannot 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. 24. Date Of Service | | B. Place Of Service | C. EMG | D. CPT/ HCPCS | E. Modifier | | | | F. Diag. Pointer | Charge | |
|---|----------------------------|----|---------------------|--------|---------------|-------------|---|---|---|------------------|--------|--|
| | From | To | | | | A | B | C | D | | | |
| 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.

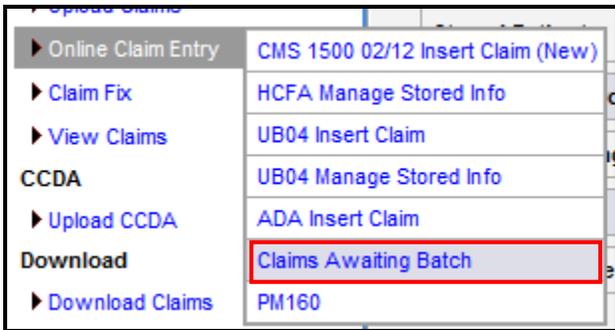


CLAIMS AWAITING BATCH

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 | | | | | | | | | | <input type="radio"/> CMS 1500 08/05 (Old) <input checked="" type="radio"/> CMS 1500 02/12 (New) <input type="button" value="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 | <input type="text"/> | 875.00 | 11/5/2015 | | N | | Correct | Delete |
| HCFA | 6/15/2015 | ONLINE | 172278561 | <input type="text"/> | 1.00 | 11/1/2015 | | N | | Correct | Delete |
| HCFA | 6/15/2015 | ONLINE | 171605213 | <input type="text"/> | 1.00 | 8/1/2015 | | N | | Correct | Delete |
| HCFA | 6/15/2015 | ONLINE | 169571030 | <input type="text"/> | 60.00 | 10/19/2015 | | N | | Correct | Delete |

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



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.'



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 | | | | | | |
|-------------------------------|----|----|----|----|----|----|
| November 2015 | | | | | | |
| S | M | T | W | T | F | S |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| 29 | 30 | | | | | |

Failed Claims For Friday, November 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.

| Processed | File ID | Claim ID | Patient Name | Provider | Tax ID | Total Charges | Secondary | From DOS | Payer | No. of Errors | Correct | Select |
|--|-----------|------------|--------------|----------|--------|---------------|-----------|------------|-------|---------------|-------------------------|--------------------------|
| 11/12/2015 | 291573316 | 1125222488 | | | | 130.00 | Y | 10/26/2015 | 87726 | 1 | Correct | <input type="checkbox"/> |
| Error(s): 1. Secondary Claim Information Missing or Invalid - Each line must balance; Line Charge Amount = Line Sum Of Adjustment Amounts + Line Payer Paid Amount | | | | | | | | | | | | |
| 11/12/2015 | 291737638 | 1125636865 | | | | 140.00 | N | 11/03/2015 | BC001 | 2 | Correct | <input type="checkbox"/> |
| 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.

Download

- ▶ [Download Claims](#)
- ▶ [Referrals](#)
- ▶ [Referrals](#)
- ▶ [Upload Referral Requests](#)
- ▶ [Download File Summary](#)
- ▶ [Download EOB / ERA 835](#)

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

| << November 2015 >> | | | | | | | Calendar Legend | |
|---------------------|----|----|----|----|----|----|-----------------|------------------------|
| S | M | T | W | T | F | S | Active Date | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | | Report(s) To Be Viewed |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 | | Report(s) Viewed |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 | | |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 | | |
| 29 | 30 | | | | | | | |

Notes: This Download File Summary page has been changed to display only File Summary and Payer Response reports. To view EOB and ERA 835 reports, please use page "Download EOB / ERA 835".

| Payer | Form Type | File ID | File Name | #Accepted | #Pending | #Failed | Total | Download/View |
|-------|----------------|-----------|-----------------------------------|-----------|----------|---------|-------|----------------------|
| MULTI | HCFA | 291737544 | ONLINE ENTRY BATCH: 24572222 | 14 | 0 | 1 | 15 | VIEW |
| MULTI | HCFA | 291572631 | ONLINE ENTRY BATCH: 24628304 | 14 | 0 | 1 | 15 | VIEW |
| MULTI | Payer Response | 291548187 | 291548187_EDI_STATUS_20151112.txt | 1 | 0 | 0 | 1 | VIEW |

(0) Downloads pending in prior month

| << November 2015 >> | | | | | | | Calendar Legend | |
|---------------------|----|----|----|----|----|----|--|--|
| S | M | T | W | T | F | S | Active Date | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | Report(s) To Be Viewed | |
| 8 | 9 | 10 | 11 | 12 | 13 | 14 | Report(s) Viewed | |
| 15 | 16 | 17 | 18 | 19 | 20 | 21 | Notes: This Download File Summary page has been changed to display only File Summary and Payer Response reports. To view EOB and ERA 835 reports, please use page "Download EOB / ERA 835". | |
| 22 | 23 | 24 | 25 | 26 | 27 | 28 | | |
| 29 | 30 | | | | | | | |

| Payer | Form Type | File ID | File Name | #Accepted | #Pending | #Failed | Total | Download/View |
|-------|----------------|-----------|-----------------------------------|-----------|----------|---------|-------|----------------------|
| MULTI | HCFA | 291737544 | ONLINE ENTRY BATCH: 24572222 | 14 | 0 | 1 | 15 | VIEW |
| MULTI | HCFA | 291572631 | ONLINE ENTRY BATCH: 24628304 | 14 | 0 | 1 | 15 | VIEW |
| MULTI | Payer Response | 291548187 | 291548187_EDI_STATUS_20151112.txt | 1 | 0 | 0 | 1 | VIEW |

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.