

PM160 CLAIMS MANUAL

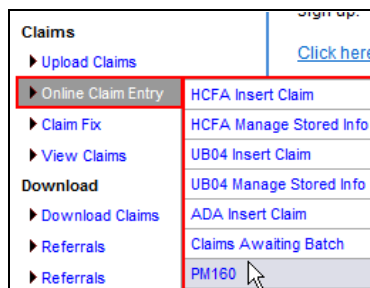


The PM160 Claim form is now available in multiple Office Ally programs. The form has been updated, and will look slightly different, but will still include the 5010 required fields. There are multiple ways to access the claim form, and there are data entry shortcuts inside the form itself.

ACCESSING THE PM160 CLAIM FORM

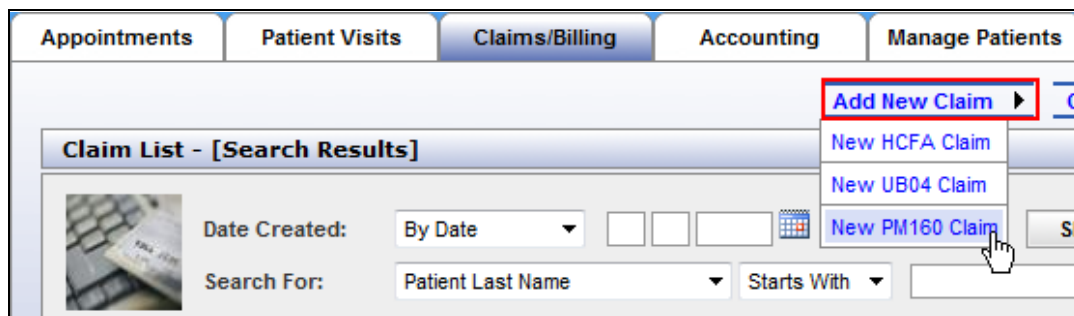
IN SERVICE CENTER

From the Service Center, hover your mouse over **Online Claim Entry**, and select **PM160**. This will open the PM160 Status page, which will show the records for all PM160 claims for all patients. Create a new claim from by clicking **New PM160 Claim**.



IN PRACTICE MATE™

From your Practice Mate account, go to the **Claims/Billing Tab**, and hover your mouse over the **Add New Claim** link. Select **Create PM160 Claim**. This will open the PM160 Status page, which will show the records for all PM160 claims for all patients. Create a new claim form by clicking **New PM160 Claim**.



IN EHR 24/7™

There are multiple sections of EHR where you can access the PM160 claim form. Regardless of the location in which you open a PM160 Claim form, it will open a new browser window.

1. In the **Patient Charts Tab**, choose the patient you will be creating the claim for. Hover over the **Others** link, and select **PM160**. This will open the PM160 Status page, which will only show the records for this particular patient. Clicking **New PM160 Claim** from the Status page will create a new claim with some of the patient information already populated into the form.

The screenshot shows the 'Patient Charts' tab with a sub-tab 'Progress Notes'. The patient information for Aaron Apple is displayed. A dropdown menu is open, showing various options, with 'PM160' highlighted at the bottom. A red arrow points to the 'PM160' option.

- In the **Patient Charts Tab**, choose the patient you will be creating the claim for. Hover over the **Progress Notes** link, and select **Progress Notes/Encounters**. Their Patient Chart-Progress Notes page will display, listing any progress notes/encounters created for this patient. Click on the **View** icon for the progress note/encounter you wish to create a claim for. Above the progress note display, hover your mouse over the **Create** link, and select **Create PM160 Claim**. This will open the PM160 Claim form, which will have some of the patient information already populated.

The screenshot shows the 'Progress Note' page for Aaron Apple. The encounter details are displayed, including the date (9/25/2012) and type (Office Visit). A dropdown menu is open, showing various options, with 'Create PM160 Claim' highlighted. A red arrow points to the 'Create PM160 Claim' option.

- In the **Document Center Tab**, check the box for any encounter you want to create a claim for. Hover your mouse over the **Select Actions** link, and select **Create PM160 Claim**. This will open a PM160 claim form, which will have some of the patient information already populated.

The screenshot shows the 'Document Center' tab with a sub-tab 'Encounters'. A list of encounters is displayed, with the first encounter (101647746) selected. A dropdown menu is open, showing various options, with 'Create PM160 Claim' highlighted. A red arrow points to the 'Create PM160 Claim' option.

- In the **Document Center Tab**, hover your mouse over the **Select Actions** link, and select **View PM160 Status**. This will open the PM160 Status page that will show the records for all PM160 claims for all patients. Create a new claim from the PM160 Status page by clicking **New PM160 Claim**.

The screenshot shows the Office Ally Document Center interface. At the top, there are tabs for Desktop, Appointments, Patient Charts, Document Center (selected), References, Patient Portal, and Manage Office. Below these are sub-tabs for Encounters, Orders, Results, Medications, Documents, Education Resources, and Reports. The main section is titled "Encounters - [Search Results]". It includes a search bar with fields for Encounter Date (By Date), Search For (Patient Last Name), Starts With, and a Search button. There are also filters for Display Filter (Provider: Derek Shepherd), Encounter Type (-- All --), Billing Status (All), and Progress Note Status (All). A dropdown menu for "Select Actions" is open, showing options: Create Practice Mate Visits, Create HCFA Claims, Create UB04 Claims, Create PM160 Claim, View Billing Info, and View PM160 Status (highlighted with a red arrow). Below the search results is a table with columns: Encounter ID, Encounter Date, Patient Name, Location of Service, Provider, Type, Billing Status, Visit ID, View Billing Info, Change Billing Status, and Encounter Status. The table contains one row for Encounter ID 101647745, dated 10/4/2012, for patient Aaron, Apple, at location CHWD-41, provided by Derek Shepherd, for an Office Visit, with a New Billing Status, and an Unsigned Encounter Status.

Encounter ID	Encounter Date	Patient Name	Location of Service	Provider	Type	Billing Status	Visit ID	View Billing Info	Change Billing Status	Encounter Status
101647745	10/4/2012	Aaron, Apple	CHWD-41	Derek Shepherd	Office Visit	New				Unsigned

PM160 STATUS PAGE

When you access the PM160 form, you will see the **PM160 Status** page. The first time you see this page for the new PM160 claim forms, the Saved Claims and Submitted Claims sections will be empty.

PM160 Status

[New PM160 Claim](#)

Find a Claim

Patient First Name:

Provider First Name:

Patient Last Name:

Provider Last Name:

PM160 ID:

Payer:

Date Submitted

Start: End:

Date Created

Start: End:

[Search](#)
[Show All](#)

Saved Claims

No Claims Found

Submitted Claims

No Claims Found

[View Prior Claims](#)

****For users that were using the older PM160 form tool, you have not lost your old claims. Click on the **View Prior Claims** link below the Submitted Claims section. Any claims you had saved or submitted in the old form will be listed.**

Old PM160 Form Tool:

[Claims Created](#)
[Back to New PM160 Status Page](#)

* "Failed" in the Status column means that either Provider Number or Patient ID was not matched

	View	Edit	PM160 ID	First Name	Last Name	Payer	Creation Date	Matched Member	Matched Provider	Status
	View	Edit	237387	john	smith	CAL-OPTIMA	10/5/2012 10:06:00 AM			Pending

[Delete Selected Items](#)

Search PM 160 Claims

Please enter any of the search criteria below

PM160 ID:

Patient First Name:

Patient Last Name:

[Search](#)

[Clear](#)

Claims Submitted

	View	PM160 ID	First Name	Last Name	Payer	Fee Submitted	Submission Date	Status
	View	64422	doe	john	CAL-OPTIMA	\$0.00	1/1/1900 12:00:00 AM	Submitted
	View	67055			CAL-OPTIMA	\$0.00	1/1/1900 12:00:00 AM	Submitted

On the new PM160 Status page, the top portion of the page will allow you to search through the Saved and Submitted claims. Enter your search criteria, and click **Search**. Your results will appear under the search section, still divided into Saved and Submitted Claims.

****EHR Users:** If you access PM160 via the Patient Chart, it will only display claims related to that patient.

PM160 Status

[New PM160 Claim](#)

Find a Claim

Patient First Name:
 Provider First Name:

Patient Last Name:
 Provider Last Name:

PM160 ID:
 Payer:

Date Submitted
 Start End

Date Created
 Start End

[Search](#)
[Show All](#)

Saved Claims

	PM160 ID	Patient Name	Provider Name	Payer	Created Date	Matched Member	Matched Provider	Status		
<input type="checkbox"/>	2249	Aaron, Apple	Wilson, Chris	OfficeAlly Demo	9/25/2012 11:02:13 AM			Pending	Edit	View
<input type="checkbox"/>	2248	Acuna, Isaiah A	Wilson, Chris	OfficeAlly Demo	9/25/2012 9:58:47 AM			Pending	Edit	View
<input type="checkbox"/>	119	ROY, EVA R		CalOptima	4/6/2011 8:24:53 AM			Pending	Edit	View

[1](#) [2](#) [3](#)

[Delete Selected](#)

Submitted Claims

	PM160 ID	First Name	Last Name	Payer	Fee Submitted	Submission Date	Status	
	2262	Isaiah	Acuna	OfficeAlly Demo	99.60	10/2/2012 8:34:00 AM	In Process/Ready for Submission	View
	2259	Aapple	Aaron	OfficeAlly Demo	124.99	10/1/2012 2:25:00 PM	In Process/Ready for Submission	View
	173	John	Doe	CalOptima	0.00	8/15/2011 2:38:00 PM	Submitted	View

[1](#) [2](#) [3](#)

[View Prior Claims](#)

SAVED CLAIMS

- In the left column under the Saved Claims section, you can select multiple claims with the check boxes, and click **Delete Selected** to remove multiple claims at one time.
- The **Edit** link will open the claim to change, add, and/or delete information, and either save or submit the claim.
- The **View** link will allow you to open or save a PDF file of the claim form.

Saved Claims

	PM160 ID	Patient Name	Provider Name	Payer	Created Date	Matched Member	Matched Provider	Status		
<input checked="" type="checkbox"/>	2249	Aaron, Apple	Wilson, Chris	OfficeAlly Demo	9/25/2012 11:02:13 AM			Pending	Edit	View
<input checked="" type="checkbox"/>	2248	Acuna, Isaiah A	Wilson, Chris	OfficeAlly Demo	9/25/2012 9:58:47 AM			Pending	Edit	View
<input type="checkbox"/>	2247	Aaron, Apple	Wilson, Chris	OfficeAlly Demo	9/25/2012 9:07:23 AM			Pending	Edit	View

[1](#) [2](#) [3](#)

Delete Selected

←

SUBMITTED CLAIMS

- The **View** link will allow you to open or save a PDF file of the submitted claim form.
*****For users that were using the older PM160 form tool**, clicking on the **View Prior Claims** link will display any claims you had saved or submitted in the old form.

Submitted Claims							
PM160 ID	First Name	Last Name	Payer	Fee Submitted	Submission Date	Status	
2262	Isaiah	Acuna	OfficeAlly Demo	99.60	10/2/2012 8:34:00 AM	In Process/Ready for Submission	View
2259	Aapple	Aaron	OfficeAlly Demo	124.99	10/1/2012 2:25:00 PM	In Process/Ready for Submission	View
1 2 3							

[View Prior Claims](#)

CREATING A NEW PM160 CLAIM

If you access the PM160 claim form through the Progress Notes in the Patient Charts Tab or by selecting **Create PM160 Claim** from the **Select Actions** link in the Document Center Tab in EHR, you will be taken directly to the claim form. If you access the PM160 Claim form any other way, you will see the PM160 Status page. To begin a claim, click **New PM160 Claim**.

There are data entry shortcuts in multiple sections of the form, which will save information for any subsequent claims. This will allow you to search for and auto-populate information for later claims, saving time on data entry.

PATIENT

To enter information, you will need to click **New** next to the **Patient** section. This will open a pop-up box labeled **New Patient**. Practice Mate/EHR users: you can click **Browse** to search through your patient list, which will populate some of the patient information. You may also type the patient's information directly into the New Patient window. Click **Save & Update** when finished. The information will then be populated into the PM160 form in the Patient section, and saved for future claim entries.

The next time you create a claim for this patient, click **Select**, search and select the patient, and the information will again populate into the claim form.

PM160 Immunizations & Well Child Return to Claim Status Page - X

[View PDF](#) [Clear Form](#) [Save Claim](#) [Submit Claim](#)

Payer: CalOptima PM160 ID:

CHDP Claim Type: ☐ General CHDP ☒ Prepaid Health Plan/Information Only

Patient [Edit](#) [New](#) [Select](#)

Patient Name (Last,First Middle Initial) Medical Record No. L.A. Code Ethnic code:

BirthDate

Responsible Person

CHDP Assessment

Indicate Out Screening

New Patient

[Browse](#)

Last Name First Name Middle Initial Medical Record No. L.A. Code Ethnic code:

BirthDate Sex County

Responsible Person

Last Name First Name Middle Initial Medical Record No. L.A. Code Ethnic code:

County AID

☐ Identification No. above below

[Save & Update](#)

Patient List

Last Name Starts With Search Show All

Select	Patient ID	PatAcctNo.	Last Name	First Name	MI	Preferred Phone	Date Of Birth	Gen	Prl. Insurance
Select	17047438		Aaron	Aapple			03/01/2011	M	
Select	17045732		ACTIVE ALLERGY	Patient			11/10/1970	M	
Select	17045543	Testing	Isaiah	Acuna	A	360-241-8108	05/31/1944	M	Secondary Insurance
Select	17045330		Adama	Lee	W	555-444-1212	04/04/1984	M	Primary Insurance

12345678910

Referral refused.

If you need to change any information after you have saved & updated the section, click the **Edit** button and make your corrections. Click **Save & Update** when finished.

– Patient **Edit** New Select –

BILLING PROVIDER/ SERVICE LOCATION NAME & ADDRESS

Click **New** next to the **Billing Provider** section. This will open a pop-up box labeled **New Provider**. Click **Browse** to search through your provider list, which will populate some of the provider information. You may also type provider information directly into the **New Provider** window.

In the **Service Facility** section, there is a **Browse** button as well. Search through your Facility List to populate some of the service facility information. You may also type facility information directly into the **New Provider** window.

Click **Save & Update** when finished. The information will then be populated into the PM160 form in the Billing Provider and Service Location Name & Address sections, and saved for future claim entries.

The next time you create a claim and want to enter this provider and facility information, click **Select**, search and select the desired information, and it will again populate into the claim form.

The screenshot shows the PM160 form with the following sections and elements:

- Billing Provider** section: Includes buttons for **Edit**, **New** (highlighted with a red box and an arrow), and **Select**. Below are fields for **Health Plan Code/Provider #**, **Last Name**, **Address**, **Phone**, and **Service Location Name & Address**.
- Place of Service** section: A dropdown menu.
- Patient Eligibility** section: Includes fields for **County**, **AID**, and **Identification No.**, with a checkbox for **Identification No. above belongs to**.
- New Provider** pop-up window: Contains two main sections:
 - Provider Information**: Includes fields for **First Name**, **Last Name**, **Phone Number**, **Provider NPI**, **Federal Tax ID**, and **Taxonomy Code**. A **Browse** button is highlighted with a red box.
 - Service Facility**: Includes fields for **Service Name**, **Service Location** (dropdown), **Service Facility NPI**, and a checkbox for **Same As Above**. Below are fields for **Address 1**, **Address 2**, **City**, **State** (dropdown), and **Zip**. A **Browse** button is highlighted with a red box.
- Save & Update** button: Located at the bottom right of the **New Provider** window, highlighted with a red box.
- Bottom Buttons**: **View PDF**, **Clear Form**, **Save Claim**, and **Submit Claim**.

If you need to change any information after you have saved & updated the section, click the **Edit** button and make your corrections. Click **Save & Update** when finished.

– Billing Provider **Edit** New Select –

Note: The **Provider NPI** needs to match the NPI on file with the payer. In the **Federal Tax ID** field, do not include any hyphens in your entry.

REFERRED TO

Click **New** in the **Referred To** section. Type the information into the fields, and click **Save**. The information will then be populated into the PM160 form in the Referred To section, and saved for future claim entries. The next time you create a claim with this same Referred Provider, click **Select**, search and select the desired information, and it will populate into the claim form.

The screenshot shows the 'Referred To' section of the PM160 form. It includes a table with checkboxes for various services (03 Nutritional Assessment, 04 Anticipatory Guidance Health Education, 05 Developmental Assessment, 06 Snellen or Equivalent, 07 Audiometric). To the right, the 'Referred To' section has fields for Name and Telephone No. with buttons for Remove, Edit, New, and Select. A modal window titled 'New Referred Provider' is open, showing fields for First Name, Last Name, and Phone Number, with a Save button.

If you want to delete the entry in the Referred To section, click **Remove**. If you need to change any information after you have saved & updated the section, click the **Edit** button and make your corrections. Click **Save & Update** within the Edit Referred Provider window when finished.

A close-up of the 'Referred To' section showing the buttons: Remove, Edit, New, and Select. The 'Remove' and 'Edit' buttons are highlighted with a red box.

ADDITIONAL FEATURES

At the top and bottom of the claim page, there are additional buttons to assist in your claims submission process.

The screenshot shows the header bar of the PM160 form. It includes the text 'PM160 Immunizations & Well Child' and a link 'Return to Claim Status Page - X'. Below this, there are four buttons: View PDF, Clear Form, Save Claim, and Submit Claim.

Return to Claim Status Page- This will close the current claim without saving it, and direct you back to the PM160 Status page. You will see a warning appear, stating if you close the page your work will not be saved. Choose whether you want to close the page with the yes or no options.

View PDF- This will open the claim with your PDF reader, allowing you to see the traditional form format, and save or print the claim.

Clear Form- This will delete any information you have entered into the claim form, letting you start over if needed.

Save Claim- This will save the claim form, and any information which has been entered, to the Saved Claims section of the PM160 Status page. You may save an incomplete claim to go back to later without having to start over.

Submit Claim- This will send the claim to the insurance payer when you have finished entering the information for the claim. Once the claim is submitted, it will be listed in the Submitted Claims section of the PM160 Status page, and will no longer be able to be edited.

If you try to submit a claim that has missing or incorrect information, you will see the flagged fields become highlighted, and a list of the problems will display in the bottom left corner of the claim. (The figure below has been condensed to show relevant information.)

	A	B	C	D	Fees
01 History and Physical Exam	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100.0
02 Dental Assessment/ Referral	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
03 Nutritional Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
04 Anticipatory Guidance Health Education	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
05 Developmental Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
06 Snellen or Equivalent	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Patient Visit
☐ New Patient or Extended Visit
☒ Routine Visit

Type of Screen
☐ Initial
☒ Periodic

Total Fees

Billing Provider
Health Plan Code/Provider #
Place of Service
Last Name: **First Name:**
Address
Phone: **Federal Tax ID:**
Taxonomy Code:

Date of Service(mm/dd/yyyy)

Referred To
Name **Telephone No.**

Name **Telephone No.**

Missing Information:

- The fee in CHDP Assessment line 1 cannot be more than \$99.99.
- CHDP Line 2 is required.
- Please select a provider.
- CHDP Line 1 is required.
- Fees are required.
- 'Date of Service' is a required field.

COMMON ERRORS

MISSING INFORMATION

If you try to Save & Update from a window with required information missing, the fields will highlight, and your action will be delayed until the needed information is supplied.

New Patient

Patient Information

Last Name **First Name** **Middle Initial** **Medical Record No.** **L.A. Code** **Ethnic code:**

BirthDate **Sex** **County of Residence** **Telephone No.**

Responsible Person

Last Name **First Name** **Street Address** **City** **State** **Zip**

Patient Eligibility

County **AID Identification No.**

☐ Identification No. above belongs to mother

If you try to submit a claim that has missing information, you will see the required fields become highlighted, and a list of the problems will display in the bottom left corner of the claim. (The figure below has been condensed to show relevant information.)

PM160 Immunizations & Well Child
Return to Claim Status Page - ✕

There is missing information in your form. Please see details at the bottom of the form.

[View PDF](#) [Clear Form](#) [Save Claim](#) [Submit Claim](#)

Payer

CalOptima
PM160 ID

CHDP Claim Type: ☐ General CHDP ☒ Prepaid Health Plan/Information Only

Follow-Up Codes

1. No DX/RX indicated or now under care.

2. Questionable result, recheck scheduled

3. DX made and RX started.

4. DX pending/return visit scheduled.

5. Referred to another examiner for DX/RX.

6. Referral refused.

Date of Service(mm/dd/yyyy)

CHDP Assessment

Indicate Outcome For Each Screening Procedure	No Problem Suspected	Refused, Contra-indicated, Not Needed	Problem Suspected Enter Follow-Up Codes in Appropriate Column		Fees
	A	B	New C	Known D	
01 History and Physical Exam	<input type="checkbox"/>	<input type="checkbox"/>			
02 Dental Assessment/ Referral	<input type="checkbox"/>	<input type="checkbox"/>			

Billing Provider [Edit](#) [New](#) [Select](#)

Health Plan Code/Provider #

Last Name:

Address

Phone:

Place of Service

First Name:

Federal Tax ID:

Taxonomy Code:

Service Location Name & Address

Service Name:

Address

Service NPI:

[View PDF](#) [Clear Form](#) [Save Claim](#) [Submit Claim](#)

Missing Information:

- Please select a patient.
- Please select a provider.
- 'Next CHDP Exam' is a required field.
- CHDP Line 1 is required.
- CHDP Line 2 is required.
- 'Date of Service' is a required field.

INCORRECT INFORMATION

If there is incorrect information on the claim form, the claim will fail, and appear in your Saved Claims section with a Status of **Failed**. To correct the errors, click the **Edit** link for the failed claim, and click the pop up in the top left corner to see the explanation of what information is incorrect.

The claim failed, click here to see the errors.

Please resolve these errors before resubmission.

PM160 Claim Errors ✕

- Member Not Found
- Provider Not Found

IMMUNIZATION FEES

CHDP claims processing system does not recognize or process fee amounts over \$99.99. Office Ally's new PM160 claim form will not allow you to enter an amount greater than this. The field will become highlighted, and details will display under the Missing Information section at the bottom of the form. (The figure below has been condensed to show relevant information.)

	Given Today		Not Given Today		Fee
	Now Up To Date For Age	Still Not Up To Date For Age	Already Up To Date For Age	Refused or Contra-Indicated	
	A	B	C	D	
33 - MMR, VFC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100.0
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Patient Visit <input type="radio"/> New Patient or Extended Visit <input checked="" type="radio"/> Routine Visit	Type of Screen <input type="radio"/> Initial <input checked="" type="radio"/> Periodic	Total Fees <div style="background-color: #f0f0f0; width: 100px; height: 20px;"></div>
---	---	---

Missing Information:

- Fees are required.
- The fee in Immunizations line 1 cannot be more than \$99.99.

If you need to be reimbursed for any of the 4 exceptions to the \$99.99 fee amount, you will find the additional codes in the drop down lists. Select the vaccine with **Purchased** in the description first, and enter 99.99 in the Fee field. Select the vaccine with **Purchased (Add. Fee)** in the description for the next line, and enter the remainder of the fee amount. This will document the whole fee amount to be reimbursed and fit the CHDP's format.

	Given Today		Not Given Today		Fee
	Now Up To Date For Age	Still Not Up To Date For Age	Already Up To Date For Age	Refused or Contra-Indicated	
	A	B	C	D	
77 - Human Papillomavirus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	99.99
77 - Human Papillomavirus Vaccine, Purchased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
78 - Human Papillomavirus Vaccine, Purchased (Add. Fee)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
79 - Tdap	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
80 - Influenza Preservative Free, Purchased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
81 - Rotavirus Vaccine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
82 - Dtap-Hib-IPV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
83 - Dtap-IPV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
84 - Influenza A (H1N1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
85 - Bivalent HPV, VFC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
86 - Bivalent HPV, Purchased	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
87 - Bivalent HPV, Purchased (Add. Fee)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
88 - Pneumococcal 13-valent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total Fees					99.99


TRANSITION TO NEW PM160 CLAIM FORM FORMAT (FOR USERS THAT USED OLD PM160 FORM)

Any saved or failed claims that appear in your Saved Claims section will still be available to you to view and/or edit, but will be found in a different location of the PM160 Status page. To find these old forms, scroll down to the Submitted Claims section, and click **View Prior Claims**.

Submitted Claims							
PM160 ID	First Name	Last Name	Payer	Fee Submitted	Submission Date	Status	
2262	Isaiah	Acuna	OfficeAlly Demo	99.60	10/2/2012 8:34:00 AM	In Process/Ready for Submission	View
2259	Aapple	Aaron	OfficeAlly Demo	124.99	10/1/2012 2:25:00 PM	In Process/Ready for Submission	View
2240	PM160 Man	Super	OfficeAlly Demo	124.00	9/19/2012 11:51:00 AM	In Process/Ready for Submission	View
1 2 3							

 [View Prior Claims](#)

You will be taken to the old PM160 page format, with your previously created and saved claims. Any saved or failed claims will appear in the Claims Created section at the top. You will be able to **View**, **Edit**, or **Delete** claims in this section. All these claims will be in the old format style. Any previously submitted claims will be listed under the Claims Submitted section. You will be able to **View** these claims. When you are finished with this page, click the **Back to New PM160 Status Page** button in the top right corner to return to the new claim format.



[Claims Created](#)
[Back to New PM160 Status Page](#)

* "Failed" in the Status column means that either Provider Number or Patient ID was not matched

View	Edit	PM160 ID	First Name	Last Name	Payer	Creation Date	Matched Member	Matched Provider	Status
<input type="checkbox"/>	View Edit	237387	john	smith	CAL-OPTIMA	10/5/2012 10:06:00 AM			Pending

[Delete Selected Items](#)

Search PM 160 Claims

Please enter any of the search criteria below

PM160 ID	<input type="text"/>
Patient First Name	<input type="text"/>
Patient Last Name	<input type="text"/>

[Search](#) [Clear](#)

[Claims Submitted](#)

View	PM160 ID	First Name	Last Name	Payer	Fee Submitted	Submission Date	Status
View	64422	doe	john	CAL-OPTIMA	\$0.00	1/1/1900 12:00:00 AM	Submitted
View	67055			CAL-OPTIMA	\$0.00	1/1/1900 12:00:00 AM	Submitted

User ID:

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 SXIV

If you have further questions, or need assistance, contact Training Support at (360) 975-7000 opt. 2.