



CMU CLAIMS SUBMITTAL

September 2021

Agenda



Overview of ways
to submit claims



Updates



FAQ



PLEASE PUT YOUR AVAILABILITY IN THE CHAT

Telehealth only, In-Person only, Telehealth & In-Person

3 Ways to submit claims

1 - Provider Portal

2 - Availity

3 - Mail

Not recommended
but is available if
needed

Mail to:

P.O. Box 5143, Lake
Forest, CA 92609

Snail Mail

The logo for Availity, featuring the word "Availity" in a white, sans-serif font centered on a dark green rectangular background.

This options is recommended for larger groups or providers already registered with Availity

Availity is a Clearinghouse like DocuStream

Must have software needed to submit 837 claims (DocuStream provided DocuHealthLink but Availity does not have a similar program)

Any questions/problems – contact Availity directly:

<https://www.availity.com/ediclearinghouse>

Provider Portal

CMU
Recommends
using this option

Live demo – After
review of the
steps

Step 1: Choose your client from the "Patient List"

The screenshot displays the cCLink Provider Portal interface. The top navigation bar includes icons for Home, In Basket, Patient List (active), Referral Search, Claims, Bhstest, Km, and My Groups. On the right, there are Menu and Log Out options, along with the Epic logo.

The main content area is titled "Patient Lists" and "My Patients (10 patient records)". Below this, there are tabs for "My Patients", "EpicCare Link Admitted Patients", and "ADT HOUSE BY UNIT - POST PARTUM". A "Refresh" button and a "Set As Default List" link are visible. A "Filter by PCP:" dropdown menu is also present.

Name	MRN	Sex	Birth Date	SSN	BHS PATIENT HEADER ACUITY
Bhs Test, One	800100689	F	09/09/2003	xxx-xx-8998	Moderate - Severe
Bhs, Karen	800100717	F	08/29/1978	xxx-xx-8970	Moderate - Severe
Bhstest, Cchpreferral	800000559	M	09/09/1965	xxx-xx-9300	Moderate - Severe
Bhstest, Child	800100249	F	10/06/2002	xxx-xx-4328	Mild - Moderate
Bhstest, Km	800101026	F	08/29/1978	xxx-xx-8304	Mild - Moderate
Bhstest, Portal	800101048	M	02/03/1966	xxx-xx-2091	Moderate - Severe
Bhstest, Referralsatwo	800000601	M	12/03/1965	xxx-xx-3180	Mild - Moderate
Bhstest, Rflnotone	800101458	M	12/25/2009	xxx-xx-4222	Moderate - Severe
Bhstest, Rflnotthree	<E1166163>	M	12/31/1975	xxx-xx-4949	Mild - Moderate
Testing, Becky	800000391	F	01/01/1977	xxx-xx-3333	Mild - Moderate

Step 2: Navigate to and click on “CMS Claims Entry” – this will open the CMS Claims Entry Screen

The screenshot displays the Epic cCLinko provider portal interface. The top navigation bar includes icons for Home, In Basket, Patient List, Referral Search, Claims, Bhstest, KG, and My Groups. The 'CMS Claim Entry' option is highlighted with a red rectangular box. Below the navigation bar, the 'Patient Snapshot' section is visible, containing tabs for Patient Snapshot and Facesheet. The patient information for KG Bhstest is shown, including legal name, gender, age, date of birth, MRN, and insurance details. The 'Demographics' section lists the patient's name, age, gender, date of birth, and phone number. The 'Significant History/Details' section shows smoking status, alcohol use, and preferred language. The 'Allergies' section indicates 'Not on File'. The 'Problem List' section shows one item: 'Major depression single episode, in partial remission'. The 'Since Last Behavioral Health Visit (1mo Ago)' section shows a visit on June 30 for 'Behavioral Health Screening with BHS ACCESS CLINICIAN - Zzzbhs, B'.

ccLinko PROVIDER PORTAL

Home In Basket Patient List Referral Search Claims Bhstest, KG My Groups

Menu Log Out **Epic**

KB

Snapshot Medications Demographics Coverages Referral by Member Claim by Member **CMS Claim Entry**

Patient Snapshot

Patient Snapshot Facesheet

KG Bhstest
Legal: Karen Bhstest
Female, 42 y.o., 8/29/1978 🗓️
MRN: 800000929

CCHP / HP MCAL/HP MEDICAL/KAISER
Effective: 4/5/2016
Rel to Sub: Self
Member ID: 108593101

PCP: None

ACCESS ENDS
10/21/2021

Other Health Coverage: None

Demographics 📅 KG will be 43 on Aug 29
510-772-5555 (H)

KG Bhstest
42 year old female
8/29/1978
Comm Pref: 🗓️

Since Last Behavioral Health Visit (1mo Ago)

Jun 30 📄 Behavioral Health Screening with BHS
ACCESS CLINICIAN - Zzzbhs, B

Allergies
Not on File

Significant History/Details

Smoking	Never Assessed
Smokeless Tobacco	Unknown
Alcohol	Not on File
Preferred Language	English

Problem List 1 item ⬆️

Other
Major depression single episode, in partial remission

Step 3: Claim Identification/Diagnosis

- Write down the claim number (Alternate ID)
- Enter diagnosis code(s) (Box 21) – **MAKE SURE TO ENTER THE ICD10 CODE AND NOT THE DSM5 CODE - No code set or qualifier necessary**

CMS Claim Entry

Claim Identification

Alternate ID
1600144

Accident Information

10. Condition related to
10a. Related to employment

15. Accident date
10b. Accident state

Illness Dates

14. Start of current illness
15. Start of similar previous
16. Work missed from
16. Work missed to
17. Referring provider
18. Hospitalization from
18. Hospitalization to
20. Outside lab
20. Outside lab charges

Diagnoses

21. Diagnosis	Code Set	Qualifier
A		

24h. EPSDT
24h. EPSDT Conditions

Step 4: Services

1) Enter "Svc from date"
(Box 24.A)

2) Enter a Place of Service Type
(Box 24.B)

3) Enter Procedure Service Code
(Box 24.D)

4) Enter "Modifier(s)"
(Box 24.D) – 1 per box

- 95 – POS is 02
- 76 – Same date/CPT
- 59 – Same date/different CPT

5) Enter "Assoc Dx"
(Box 24.E) –
This is the letter(s)
from Box 21

6) Enter "Amt billed"
(Box 24.F)

7) Enter "Quantity"
(Box 24.G)

8) Enter total billed
(Box 28) – This is the
total of all services if
there are multiple
dates

**** FOR MULTIPLE DATES OF SERVICE CLICK "NEW"
TO ENTER NEW DATE**

Services

#	From Date	To Date	POS Type	Service	Code Ty	Modifiers	Associ	Amount Bill	Quantit	Prior Insur	Prior Patie
1									1.00		

Service Entry - Line 1

24a. Service from date

24a. Service to date

24b. Place of service type

24d. Service

24d. Modifiers

24e. Associated diagnosis

24f. Amount billed

24g. Quantity

Time Info

NDC Info

Ambulance Info

+ New

X Delete

↓ Next

↑ Previous

Claim Level Information

28. Total billed

Step 5: Encounter Information

1) * Enter "Vendor"
(Box 33) –
type in your name/group
name

2) Enter "Place of Service"
(Box 32) –
can click on the
magnifying glass

3) Enter "Provider"
(Box 24j) –
type in your name

4) Enter the provider's
"Specialty" – will
automatically populate to
"Mental Health"

* If your "Vendor ID" starts with a 6 you are a "Shared Provider" and MUST ALSO enter information in "Miscellaneous Information"

Box ID – enter "BH"

Box Data Contents – enter "BH"

Shared Provider = providers with contracts for both CCHP commercial and CCMHP
Medi-Cal

👤 Encounter Information

33. Vendor

 ⓘ

26. Account number with vendor

32. Place of service

24j. Provider

Specialty

 ⓘ

Encounter date

 📅

Encounter time

 ⓘ

33b. [ZZ] Vendor taxonomy

24j. [ZZ] Provider taxonomy

27. Provider accept assignment code

 ⓘ

13. Benefit assignment indicator

 ⓘ

☰ Condition Codes

Condition Codes

 ⓘ

📄 Miscellaneous Information ⓘ

Box ID

Box Data Contents

<input type="text"/>	<input type="text"/>
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PROVIDER PORTAL DEMO

https://planlinktst.cchealth.org/Planlinktst/common/epic_login.asp

Availity is not requiring providers to enroll in the "Premium Plan". There is no additional charge to use Availity

All providers should now see "CMS Claims Entry" –

There was a problem with security fields behind the scenes. This has since been fixed.

Providers' NPI numbers were not being recognized –

Providers should only enter your name

Passwords are not all being recognized. -

If needed, will have to wait 24 hrs. to reset

Any ongoing problems contact bhs.support@cchealth.org

Updates

FAQs

- ❑ “Until now, billing via the Provider Portal was only for use with a PC, so those of us who use a Mac were not able to submit claims electronically. Has that changed with the switch to Availity”?

Billing through Provider Portal is a new function. Prior DocuHealthLink was being used which is software that only works with Windows operating systems. If the provider can log into Provider Portal, they can submit claims. It is important to note, if using a MAC, you must use the Chrome browser and not Safari.

- ❑ “Do I need to register with Availity”?

No, if you are already in the Provider Portal you can submit claims that way. Availity is a Clearinghouse and an extra option.

- ❑ “Can we submit a claim for more than one date and one procedure at a time, for instance, like filling out 6 different dates in the old CMS form? (It looks like it's one procedure at a time)”.

You can bill for multiple dates on the same form. We are still asking providers to only bill for one month at a time.

PLEASE NOTE: if you are only entering one service date DO NOT click “new”. This will clear the information within the claim. If you mistakenly click “new” you should click “delete”.

FAQs (Cont'd)

- ❑ “Does the system save any information, so we don't have to enter information that stays the same repeatedly, like diagnosis, service location, etc.”?

Unfortunately, the system does not save the diagnosis, location, etc. from one record to the next.

- ❑ “Are we able to print claims submitted through Provider Portal”?

YES – Once you “accept” the claim. Go into “Claim by Member”, click on the appropriate claim, and use the print icon.

- ❑ “How does one access Availity as a single practitioner? Or, what is the software necessary to use it”?

You are not able to access Availity directly. You will have to have the appropriate software/clearinghouse to submit claims. There are so many different options but if you are not already subscribing to them the Provider Portal is your best option.

FAQs (Cont'd)

- ❑ “My vendor number shows my home address. My new place of service is not showing.”

If you have more than one vendor number, you must choose the correct vendor number for your current place of service.

The address for the “vendor” will be the address you have provided on your W-9 and should also be your identified mailing address.

The place of service will have your office addresses.





QUESTIONS?