



## **B Electronic Media Claims (EMC) Guidelines**

This appendix contains information about electronic submission of claims and the software that providers use to transmit claims to HP. It contains the following sections:

- General Information
- Provider Electronic Solutions
- Vendor Software
- Alabama Medicaid Interactive Website

Technical support is available through the HP Electronic Claims Submission Help Desk.

(800) 456-1242 (Nationwide Toll Free)  
(334) 215-0111

### **B.1 General Information**

All claims which do not require attachments or an Administrative Review override by Medicaid must be submitted electronically. Electronic Claim Submission (ECS) offers many benefits to all participants in the claims submission process. ECS is the most efficient and effective means of processing claims, ensuring swift adjudication and payment to providers.

**Electronic claim submission reduces claims processing time from start to finish.** Rather than mailing paper claims, providers use the Alabama Medicaid Interactive website to submit claims to a central location.

With ECS, electronic claims avoid the sorting and keying process. The claim data is immediately available to the system. However, it is not only at the start of the claims cycle that electronic submission can save providers time.

Providers who submit claims electronically can check their claims to ensure that the data has passed basic edits, or can determine claim data that prevents the claim from paying. Providers can determine how much payment they will receive from each submission, in a fraction of the time it took when submitting claims on paper.

ECS assists providers in receiving quick payment and reduces claims processing time. Also, electronic claims submission provides an audit trail of claims that have failed preliminary edits. Providers may receive information regarding certain problems on submitted claims within minutes. This allows the provider the opportunity to make necessary corrections and resubmit the claim before the next scheduled check writing date.

To submit claims electronically, providers use software designed specifically for this purpose as well as the Alabama Medicaid Interactive web site. Providers may use software created by HP, called Provider Electronic Solutions software, or software developed by outside vendors. The following three sections provide general information about each electronic option.

## B.2 Provider Electronic Solutions

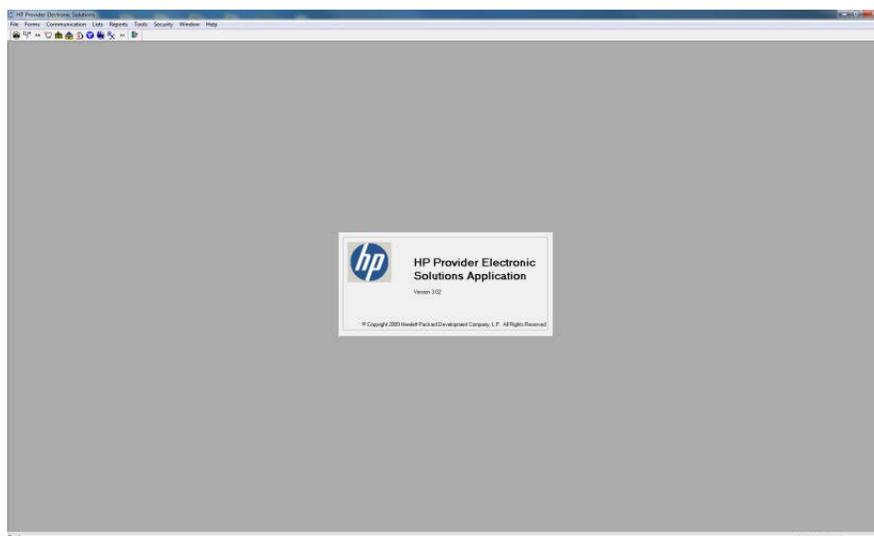
Provider Electronic Solutions software is data entry software used to verify eligibility and transmit claims in the proper format to the web so that they may be processed by the system.

Provider Electronic Solutions software is available free of charge to any provider. HP will mail the software to the provider at no cost, or the provider may download the software from the Internet.

[http://medicaid.alabama.gov/CONTENT/6.0\\_Providers/6.10\\_Provider\\_Electronic\\_Solutions.aspx](http://medicaid.alabama.gov/CONTENT/6.0_Providers/6.10_Provider_Electronic_Solutions.aspx)

Providers use the Provider Electronic Solutions software to submit the following batch transaction types:

- 270 Eligibility Request
- 276 Claim Status Request
- 278 Prior Authorization Request
- 837 Dental
- 837 Institutional Inpatient
- 837 Institutional Nursing Home
- 837 Institutional Outpatient
- 837 Professional
- NCPDP Pharmacy Eligibility
- NCPDP Pharmacy
- NCPDP Pharmacy Reversal



### **B.2.1 Verifying Eligibility**

Providers have access to all available eligibility information on a recipient including but not limited to the following:

- Recipient name on file
- Full recipient number including the check digit (13<sup>th</sup> digit)
- Managed care status – Patient 1<sup>st</sup> or Maternity Care
- Aid category – indicating benefit limitations, for example, SOBRA
- Name and phone number of assigned Primary Medical Provider
- Benefit limits to date, for services such as physician visits, inpatient/outpatient visits, EPSDT screenings, and vision services
- Third party insurance information

#### **NOTE:**

The Provider Electronic Solutions software offers the feature of verifying recipient's eye care benefit limits. Select the eligibility icon and enter the requested information in all of the fields. When inquiring about a recipient's eligibility for eye care services, be sure to check the current year and previous year. For example, to determine if a recipient has met the benefit limit allowed for eye exams services, the provider needs to check the current and previous year service usage by entering the appropriate service year.

Providers have access to the following information about their submissions.

- **Communication Log** - displays information about successful or non-successful communication during transaction submissions
- **View Batch Response** - allows the user to view the response files downloaded from the web. For example claim responses 277 may be viewed after the submission of a 276 – Claim Status.
- **Download Electronic Remittance Advice (ERA)** - allows the user to download the 835 - Electronic Remittance Advice (ERA). The 835 file should be viewed in a text editor as the Provider Electronic Solutions software cannot display the Electronic Remittance Advice file.

### **B.2.2 Using Report and List Features: Managing your Data**

Providers use the Lists feature to store frequently submitted values. These values can then be reused in later claims submissions, shortening data entry time. Provider Electronic Solutions software stores lists of data about the following topics:

- Attending/Operating Provider
- Prescriber
- Provider
- Recipient
- UPIN
- Admission Type
- Carrier
- Condition Code

- Diagnosis ICD-9
- Diagnosis ICD-10
- Modifier
- NDC
- Occurrence
- Patient Status
- Place of Service
- Policy Holder
- Procedure HCPCS
- Procedure ICD-9
- Procedure ICD-10
- Revenue
- Taxonomy
- Type of Bill

Providers can generate reports about these lists, as well as detail and summary reports about the claims they have submitted.

### ***B.2.3 Archive and Connection Tools: Protecting your Data***

Providers use the Get Upgrades option to upgrade their software from any downloaded update through the web. Options allow users to set up their modems, batch and interactive submitter IDs, carrier information (for example, phone number to dial), and to establish their retention settings (sets the number of files to keep before archiving).

The Archive tool allows users to create archives and restore archives. This feature is very useful for space conservation on the provider's computer system. The Database Recovery tool allows users to compact, repair, and unlock their databases. These tools are very useful in correcting database problems, allowing users to correct the problem without HP sending new software.

### ***B.2.4 Additional Information about Provider Electronic Solutions***

Provider Electronic Solutions software does not interface with accounting systems or other databases. This would require claims data to be keyed twice, once when submitting the claim using Provider Electronic Solutions software and again into the provider's database.

However, this software is perfect for providers who do not submit a large number of Medicaid claims, and for providers who want to save the vendor fee.

Provider Electronic Solutions software comes with full installation instructions, a user's guide, and full technical support.

For more information on obtaining Provider Electronic Solutions software, contact the HP Electronic Claims Submission Help Desk.

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(334) 215-0111

### **B.3 Vendor Software**

Providers may prefer to submit claims using vendor software. Providers are recommended to contact HP to determine if their vendor's software is approved for claims submission.

### **B.4 Alabama Medicaid Interactive Web Site**

The Interactive Services web use of online user friendly forms, allows providers to inquire about recipient eligibility, claim status, prior authorization requests and household inquiries. A provider will also be able to enter and submit claims, including online voids and adjustments.

The website is available free of charge to any provider. This site is available 24-hours a day, seven days a week, excluding time for scheduled maintenance.

The Alabama Medicaid Interactive web site address is <https://www.medicaid.alabamaservices.org/ALPortal> . For additional information regarding the features or sign-up procedures, refer to the Alabama Medicaid Interactive Web Site User Manual, found on the site's AL Links page under the Information menu.

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