



# Claim Research Tool

The Claim Research Tool (CRT) can save you money, improve your accounts receivable and allow you to work more efficiently while reducing your time and expense. Using this tool will help you improve your financials, often without picking up the phone. The CRT will help you manage account receivables by viewing the status of multiple claims in one view. It will allow you to view claims for a particular date or date range and, if desired, with a selected status that indicates paid, pending, or denied claims.

Please note this document is intended to provide general guidance for using the CRT to access enhanced claim status information. Blue Cross and Blue Shield of Illinois (BCBSIL) has made this supplemental information available through the CRT, in addition to the standard HIPAA data, to assist you in resolving your BCBSIL claims.

## Sign On

To get started, access Availity at the following URL: [www.Availity.com](http://www.Availity.com)

Next, key your user ID and password. Click Login\*.

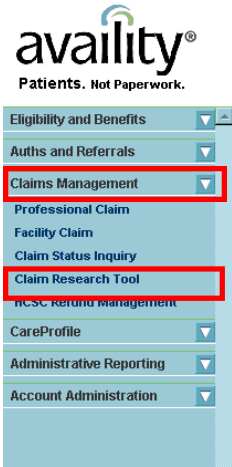
\*To access CRT, you must be a registered Availity user.

To get started, enter your user ID and password.

User ID: [XXXXXXXXXX]  
 Password: [XXXXXXXXXX]  
 [Login] [Reset]  
 I forgot my password

## Accessing the Tool

Once you log into Availity, click Claims Management, then Claim Research Tool.



## Selecting a Payer

Next, you need to select a payer. Select BCBSIL from the Payer drop-down menu. Click the Organization you are associated to (if applicable) from the Organization drop-down menu and click Next.

Claim Research Tool  
 ▶ Show Me Demo  
 \* Required Fields  
 \* Payer: ? [BCBSIL]  
 \* Organization: [HCSC]  
 [Next] [Clear]



The information in this tip sheet provides direction for several topics. Please review this information thoroughly prior to contacting Blue Cross and Blue Shield Provider Customer Service.

## Member-ID Search

From this page, you can conduct a search by either the Member ID or Claim # (DCN). To conduct a claim search by Member ID, key the *Billing Provider NPI*, *Member ID*, *Group Number* and the *Service Period* and click **Search**.

The screenshot shows the 'Claim Research Tool' interface. Under the 'Member ID Search' section, there are several input fields: 'Express Entry Provider' (Optional) with a dropdown menu and an 'Add Provider' button; 'Billing Provider NPI' with a text box and a question mark; 'Member ID' with 'Alpha Prefix (optional)' and 'Member ID' sub-labels and two text boxes; 'Group Number' with a text box; and 'Service Period' with 'From' and 'To' date pickers. A red box highlights the 'Billing Provider NPI', 'Member ID', 'Group Number', and 'Service Period' fields. At the bottom, there are 'Search' and 'Clear' buttons, with the 'Search' button also highlighted by a red box.

## Claim Number Search

To conduct a Claim Number search, key the alpha-numeric Claim # (DCN) into the *Claim # (DCN)* field and click **Search**. This will take you directly to the Claim Details page.

The screenshot shows the 'Claim Number Search' section of the interface. It features a single text input field labeled 'Claim # (DCN):' containing a masked value '#####'. Below the field are 'Search' and 'Clear' buttons, with the 'Search' button highlighted by a red box.



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## Search Results Page

All claims matching the search criteria keyed will return on the Search Results page. Click the appropriate *Claim Number* to access the Claim Details page.

Claim Research Tool > Search Results

[Return To Search](#) [Print](#)

**Payer:** BCBSIL      **Provider NPI:**  
**Group Number:**      **Service Period:**  
**Member ID:**



From Service Date	Processed Date	Claim Number	Billed Amount	Status
04/22/2009	07/01/2009	912420442050C00	\$185.00	Paid
02/25/2009	04/24/2009	912420442050X00	\$185.00	Paid
01/28/2009	03/19/2009	915245874520X00	\$185.00	Paid
01/14/2009	01/30/2009	924242424420C00	\$240.00	Issued - No payment
01/07/2009	01/30/2009	915478522420X00	\$185.00	Issued - No payment
12/15/2008	01/30/2009	932512495211X00	\$370.00	Issued - No payment

Export options: [CSV](#) | [Excel](#) | [XML](#)

[Return To Search](#) [Print](#)



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## Claim Details Page

Here you can view the overall claim status as well as the details for each line of service.

Claim Research Tool > Claim Details

Return To Search Print

**Claim Detail**

<b>Patient Name:</b>	<b>Subscriber Name:</b>
<b>Member ID:</b>	<b>Relationship to Subscriber:</b>
<b>Alpha Prefix:</b>	<b>Patient Account #:</b>
<b>Gender:</b>	<b>Group Number:</b>
<b>Date of Birth:</b>	

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<b>Claim Number:</b>	<b>Billed Amount:</b>
<b>Received Date:</b>	<b>Co-Pay/Deductible Amount:</b>
<b>Processed Date:</b>	<b>Coinurance:</b>
<b>Claim Status:</b>	<b>Ineligible Amount:</b>
<b>Status Details:</b>	<b>Hospital Payment Indicator:</b>
<b>DRG Code:</b>	<b>DRG Version:</b>
<b>DRG Weight:</b>	<b>Approved Length of Stay:</b>

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<b>Paid Amount:</b>	<b>From Service Date:</b>
<b>Check/EFT/Voucher:</b>	<b>To Service Date:</b>
<b>Check Date:</b>	<b>Provider ID:</b>
<b>Payee Name:</b>	<b>Provider Name:</b>
<b>Prior Paid AMT:</b>	<b>Additional Pay:</b>
<b>Prior Notification Deductible: ?</b>	<b>Prior Notification Coinurance: ?</b>
<b>Health Care Account Amount:</b>	<b>Out of Network Deductible:</b>
<b>Other Carrier Paid:</b>	<b>Out of Network Coinurance:</b>
<b>Medicare Paid Amount:</b>	<b>Patient Share Amount:</b>

From Service Date	To Service Date	Revenue /Procedure Code	Billed Amount	Paid Amount	Ineligible Amount	Ineligible Reason Code	Interim Discount	HCPCS Code	Modifier

Export options: CSV | Excel | XML

**Ineligible Reason Codes**

Reason Code	Description

Return To Search Print



# Online Transaction Tips

The information in this tip sheet provides direction for several topics. Please review this information thoroughly prior to contacting Blue Cross and Blue Shield Provider Customer Service.

## Claim Not Found

If you receive the *Claim Not Found* response, verify the following has been entered correctly:

- Billing NPI (10 digits) matches NPI submitted on claim,
- For out-of-state policies, the 3 letter alpha prefix is included in the optional field,
- Member ID excludes the 3 character Alpha Prefix (Exception: For Federal Plan members, continue using the preceding 'R'),
- Group number is keyed as an alpha-numeric entity that matches the member's ID card, and
- *Service Period From and To* includes the date(s) of service.



## Institutional Claims

- Monies paid are applied according to the provider contract (*i.e.* Per Diem, DRG, etc.).
- This detailed line level information is offered exclusively through the Claim Research Tool. The total monies equal those listed on your Provider Claim Summary (PCS)/ Electronic Remittance Advice (ERA)/ Electronic Payment Summary (EPS).

## Adjusted Claims

- To search for an adjusted claim using the Claim Number Search, key the corresponding 2-digit suffix after the claim number (i.e. the 1<sup>st</sup> adjustment = 01, 2<sup>nd</sup> adjustment = 02).
- The *Paid Amount* field will display the total claim payment amount.
- The *Prior Paid Amt* field will display the total of all payments made on prior adjustments.
- The *Additional Pay* field will display the payment amount for the adjustment being viewed.

## If . . .

- you know your claim number, you may perform a search using that Document Control Number (DCN).
- all claim service lines are not displaying, click *More Results*.
- you are receiving a *Claim Not Found* message, please reference the *Claim Not Found* topic above.
- information was missing when the Claim Details were printed, change the Page Orientation to landscape.
- the check number is not present on a finalized claim, please allow additional time as the system issues check information based on the payment schedule of the provider.

<b>Paid Amount:</b>	\$273.00
<b>Check/EFT/Voucher:</b>	
<b>Check Date:</b>	
<b>Payee Name:</b>	JOHN DOE MDPA