

# Turquoise Claims System

## Institutional Claims

### Participant User Guide

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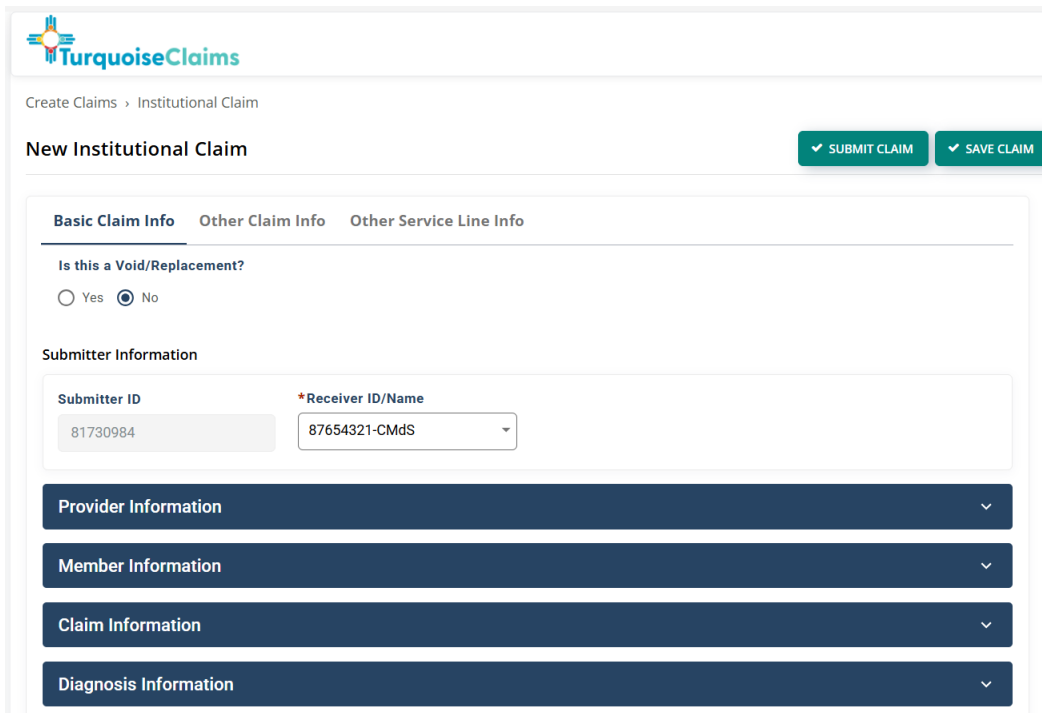
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## 1 Introduction

Users have the option to complete and submit institutional claim forms securely through the Turquoise Claims system. An institutional claim, in the context of Medicaid Provider Services, is the specific HIPAA-compliant 837I form that contains:

- The day, month, and year the service was provided
- The name, identification number, and location of the provider rendering the service
- The description of the service rendered using the universal identifying procedure code, as designated by the CMS Commissioner; includes substantiation of medical necessity, appropriateness of service and an applicable authorization number, if required
- Member’s identification number, name, address, and date of birth

Once a claim is submitted, it is routed through a HIPAA-compliant transaction process and is processed and adjudicated. The system displays a confirmation screen. This screen shows claim information and adjudication results, as well as any explanation of benefits (EOB) codes that may have been posted to the claim. If the claim was denied, you can quickly and easily correct and resubmit a new claim. Once a claim has been created, make sure to save your progress if the claim is not ready to submit or you may lose your data.



The screenshot shows the 'TurquoiseClaims' web interface for creating a new institutional claim. The page title is 'New Institutional Claim' and it includes 'SUBMIT CLAIM' and 'SAVE CLAIM' buttons. The form is divided into sections: 'Basic Claim Info' (with sub-sections 'Other Claim Info' and 'Other Service Line Info'), 'Submitter Information', and several expandable sections for 'Provider Information', 'Member Information', 'Claim Information', and 'Diagnosis Information'. The 'Basic Claim Info' section contains a question 'Is this a Void/Replacement?' with radio buttons for 'Yes' and 'No' (selected). The 'Submitter Information' section has a 'Submitter ID' field with the value '81730984' and a '\*Receiver ID/Name' dropdown menu with the value '87654321-CMds'.

## 2 Claim Entry Page

The Claim Entry page will display all the fields required as per HIPAA. Field names marked with a red asterisk (\*) on the Claim Entry page are required fields.

The Claim Entry page has three tabs:

The **Basic Claim Info** tab provides a comprehensive overview of essential claim details, including information about the healthcare provider, the member (patient), the claim itself, and related clinical and billing data. This includes diagnosis codes, procedure codes, and basic line item information that outlines the specific services rendered and charges associated with each.

The **Other Claim Info** tab contains additional claim details that go beyond the basics, including specialized services, pricing and repricing information, contract details, and Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) referrals. It also captures data about various providers involved in the patient's care, such as the service facility, primary care provider, and supervising provider, as well as coordination of benefits with other insurers.

The **Other Service Line Info** tab provides detailed information for each individual service line item on the claim, going beyond the basics captured elsewhere. It includes specific provider details as well as service line-level data from other payers, offering a more granular view of how each service was processed and reimbursed.

### 2.1 Guidelines for Completing the Information on the Tabs

Remember the following when completing information on the tabs:

- Enter dates in the format, MM/DD/YYYY.
- If an amount includes cents, you must enter the decimal point.
- Some panels or sections on a tab are closed by default. Fields in these panels are optional.
- However, if you do open a closed panel and enter data in a field, then all required (\*) fields in that panel must be completed.
- In some panels, existing information is displayed in a table. To update existing information, click the appropriate table row. To add information to a table, click the applicable **Add** button.
- Answer questions 'Yes' or 'No' where indicated to display or hide additional fields, as needed.

- Use the **Reset** button instead of the **ESC** button or **Backspace** button when clearing data.

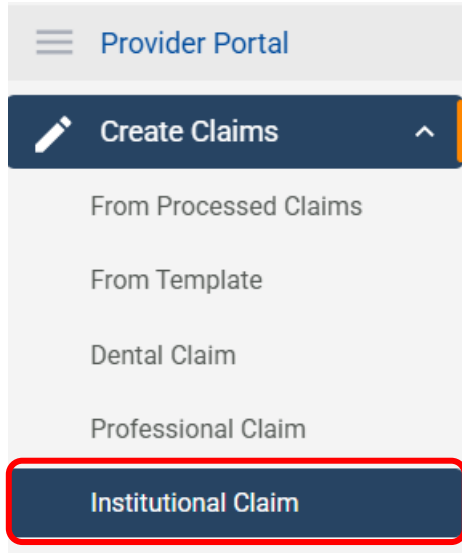
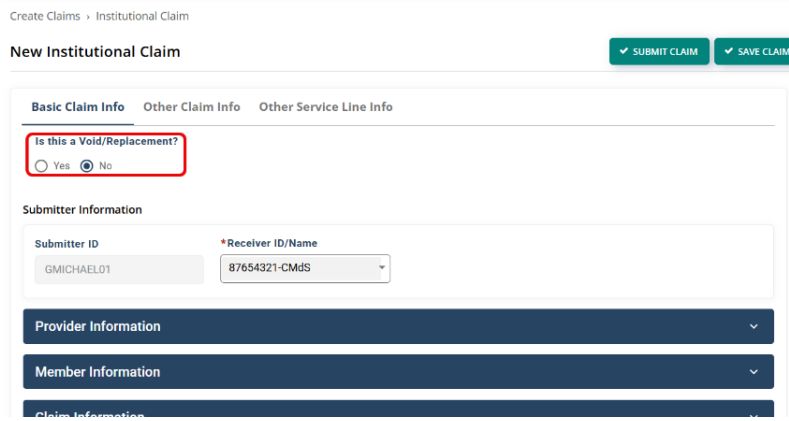
### 3 Creating an Institutional Claim

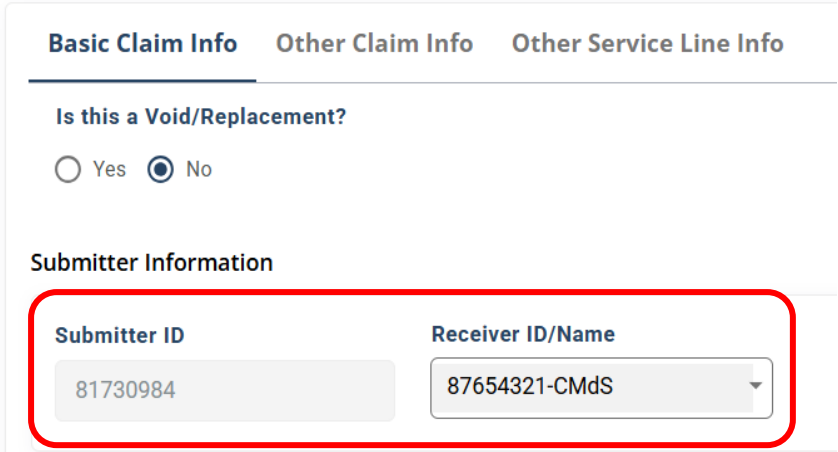
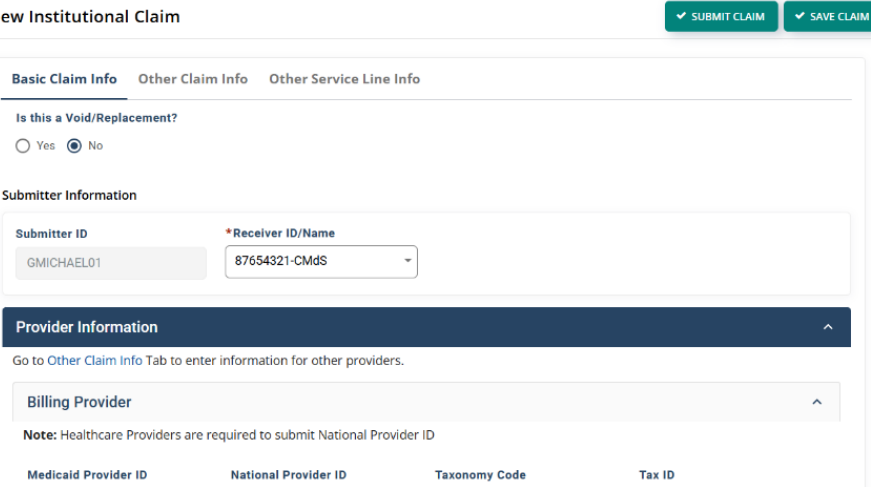
You can submit institutional claims in the following ways:


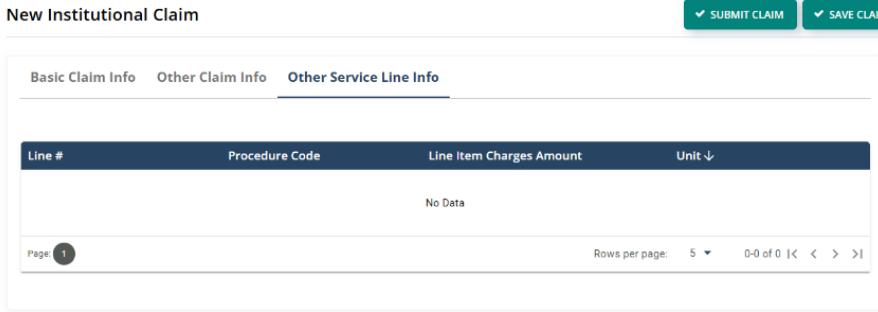
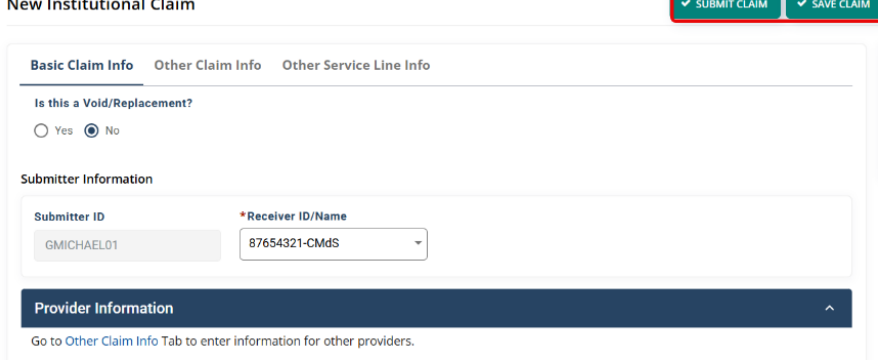
1. Creating a New Claim
2. Creating a New Claim from a Processed Claim
3. Creating a New Claim from an Existing Template

#### 3.1 Creating a New Institutional Claim

To create a new Institutional Claim, complete the following steps:

Step	Screenshot
<p>1. From the <b>Create Claims</b> menu, select the <b>Institutional Claim</b> type.</p>	
<p>2. On the <b>New Institutional Claim</b> page, under the <b>Basic Claim Info</b> tab, the system defaults to 'No' for <i>"Is this a Void/Replacement?"</i>.</p>	

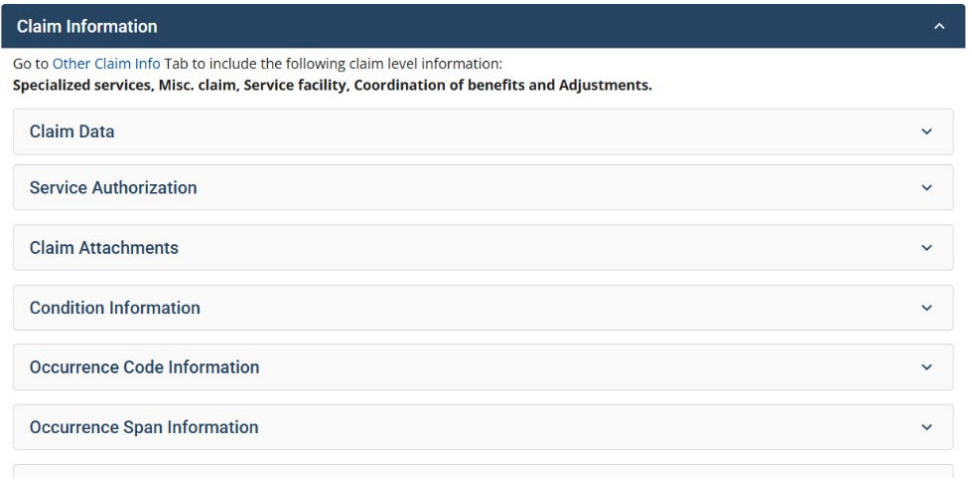

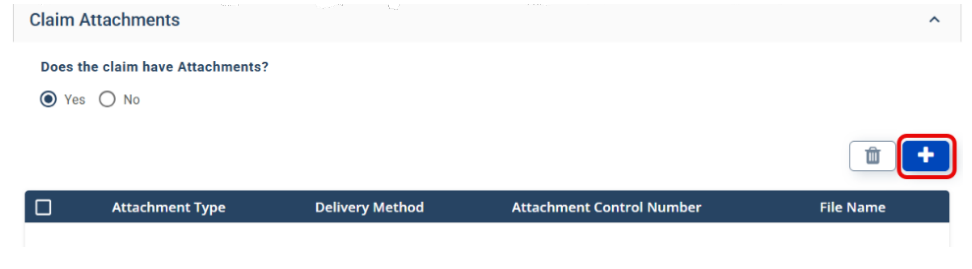
Step	Screenshot
<p>3. The <b>Submitter ID</b> and the <b>Receiver ID/Name</b> fields are automatically populated by the system.</p> <p>The <b>Submitter ID</b> is the Medicaid ID of the entity submitting the claim.</p> <p>The <b>Receiver ID/Name</b> field identifies the entity receiving the submitted claim.</p>	 <p>The screenshot shows the 'Basic Claim Info' tab selected. Under the heading 'Is this a Void/Replacement?', the 'No' radio button is selected. Below this, the 'Submitter Information' section contains two fields: 'Submitter ID' with the value '81730984' and 'Receiver ID/Name' with a dropdown menu showing '87654321-CMds'. A red rectangular box highlights these two fields.</p>
<p>4. Complete the required fields on the <b>Basic Claim Info</b> tab. These fields would be tagged with a red asterisk (*). Certain services require additional information to be entered on the <b>Other Claim Info</b> tab.</p>	 <p>The screenshot shows the 'New Institutional Claim' form. At the top right are 'SUBMIT CLAIM' and 'SAVE CLAIM' buttons. The 'Basic Claim Info' tab is selected. Under 'Is this a Void/Replacement?', the 'No' radio button is selected. The 'Submitter Information' section shows 'Submitter ID' as 'GMICHAEL01' and '*Receiver ID/Name' as '87654321-CMds'. Below this is a 'Provider Information' section with a dark blue header and an upward arrow. A note says 'Go to Other Claim Info Tab to enter information for other providers.' Underneath is a 'Billing Provider' section with an upward arrow and a note: 'Note: Healthcare Providers are required to submit National Provider ID'. At the bottom, there are four input fields: 'Medicaid Provider ID', 'National Provider ID', 'Taxonomy Code', and 'Tax ID'.</p>

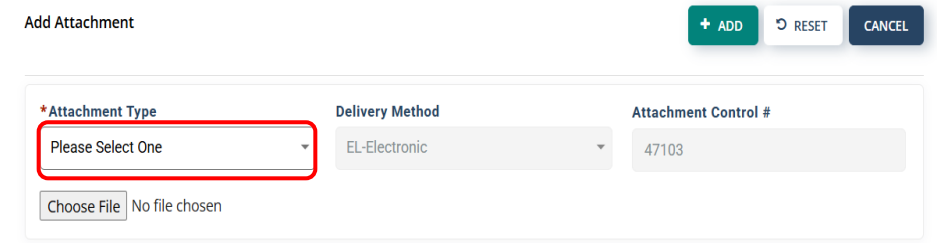
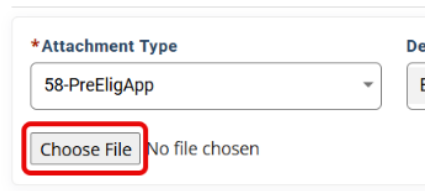
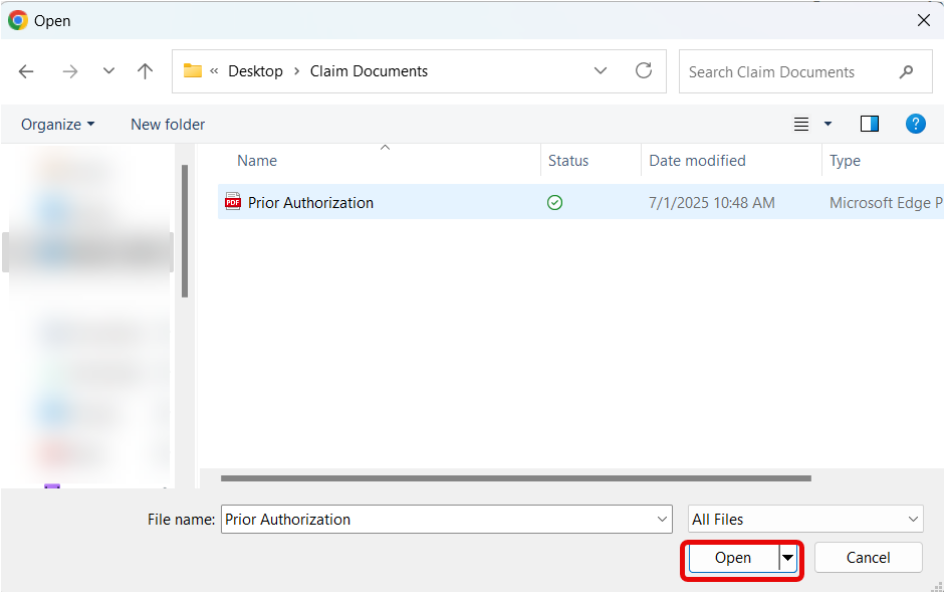
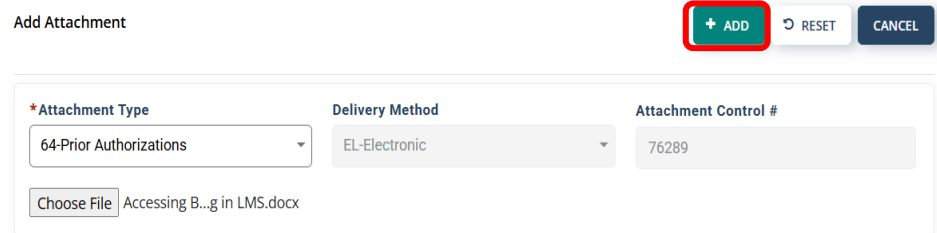
Step	Screenshot
<p>5. Complete the required fields on the <b>Other Claim Info</b> tab, as applicable.</p> <p><b>Notes:</b> <i>Contract Information and File Information are not currently being utilized.</i></p> <p><i>Claims Pricing and Repricing will be filled out only when pricing/repricing information needs to be reported on the claim that a third-party insurance company has provided. This is only used for reporting on a third-party adjudicated claim if needed.</i></p>	
<p>6. The <b>Other Services Line Info</b> tab returns the line information entered and is for viewing only. Any edits need to be made on the <b>Basic Claim Info</b> page.</p>	
<p>7. Select the <b>Save Claim</b> or <b>Submit Claim</b> button, depending on if you want to save an incomplete claim or submit a completed claim. Saved claims are stored for 30 days from the date of the last save.</p>	

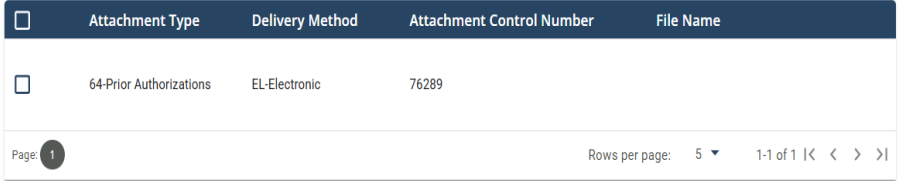
### 3.1.1 Attaching a Document During Claim Entry

You can attach documents stored on your local computer to a claim form. While entering claim information on the Basic Claim Info tab, you will have the option to add attachments. There is a 10MB attachment size limit and a maximum of 10 attachments can be added at a time. If more attachments are needed, save and exit the claim, then reopen it to add additional files.

To attach a document during claim entry, complete the following steps:

Step	Screenshot
<p>1. On the <b>Basic Claim Info</b> tab, expand the <b>Claim Information</b> panel.</p>	
<p>2. In the <b>Claim Attachments</b> panel, select 'Yes' in response to the "Does the claim have attachments?" question.</p>	
<p>3. Select the <b>Add</b> icon to add an attachment.</p>	

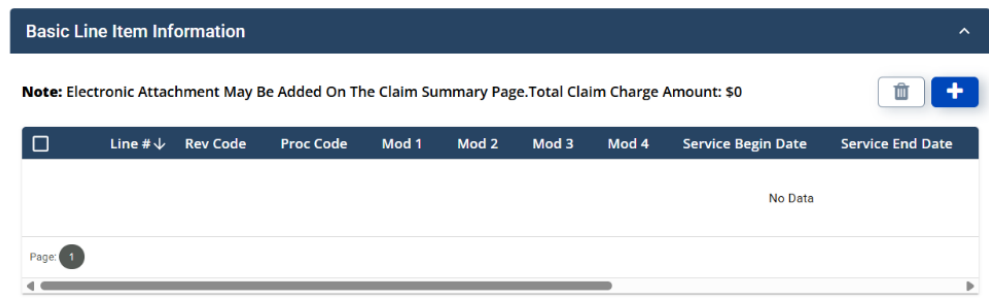
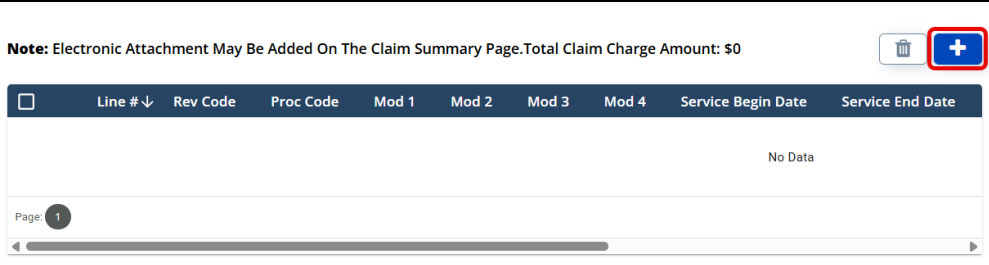
Step	Screenshot
<p>4. Select the appropriate <b>Attachment Type</b> from the dropdown menu.</p> <p><b>Note:</b> <i>Delivery Method defaults to EL-Electronic and cannot be changed.</i></p>	
<p>5. Select <b>Choose File</b> button, then select the desired file from your local computer. The selected file name will be displayed.</p>	
<p>6. Select the desired file from your local computer and then select the <b>Open</b> button.</p>	
<p>7. Click the <b>+ADD</b> button to attach the file to the claim.</p>	

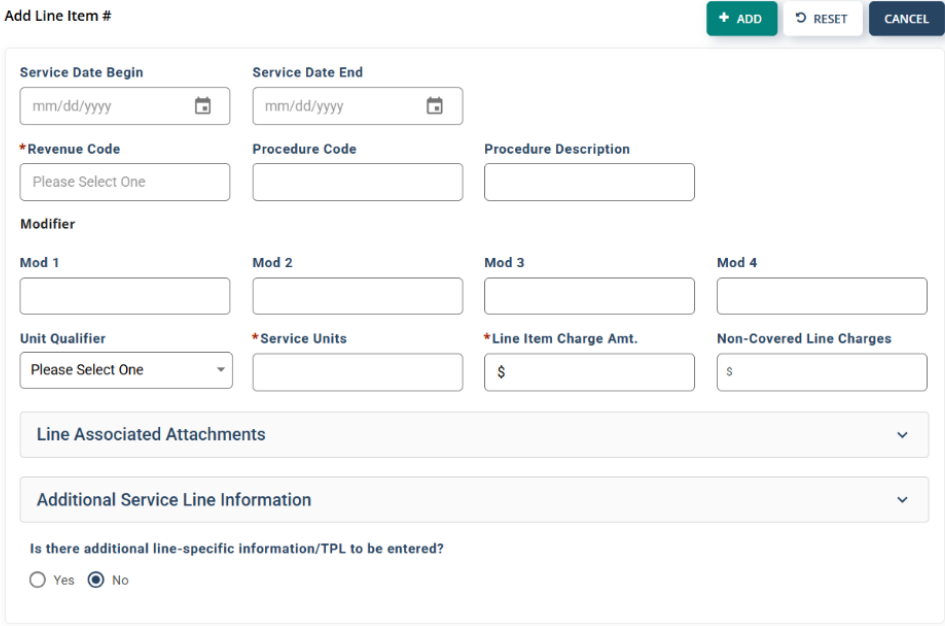
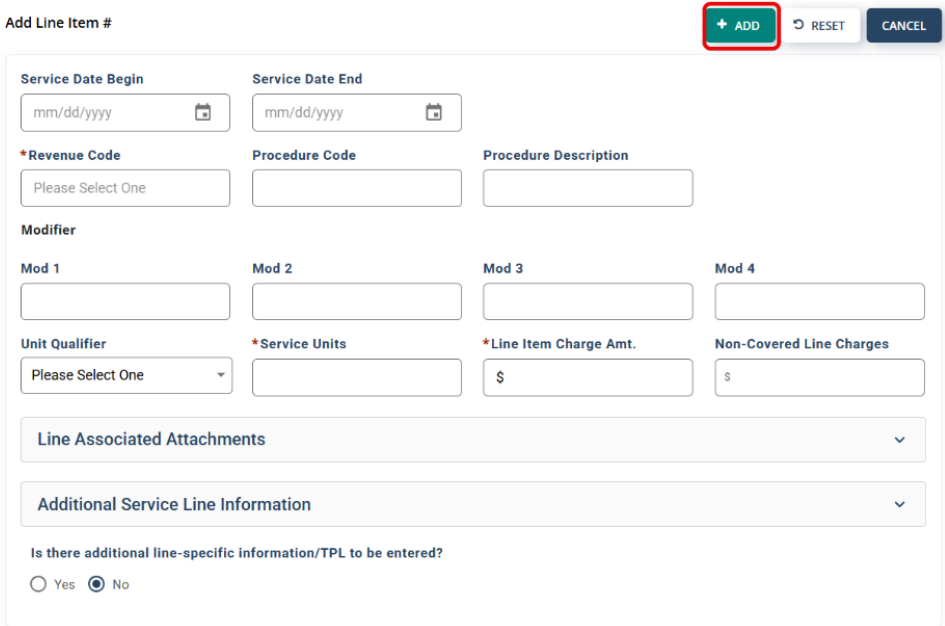
Step	Screenshot
<p>8. The file attachment information displays below.</p>	

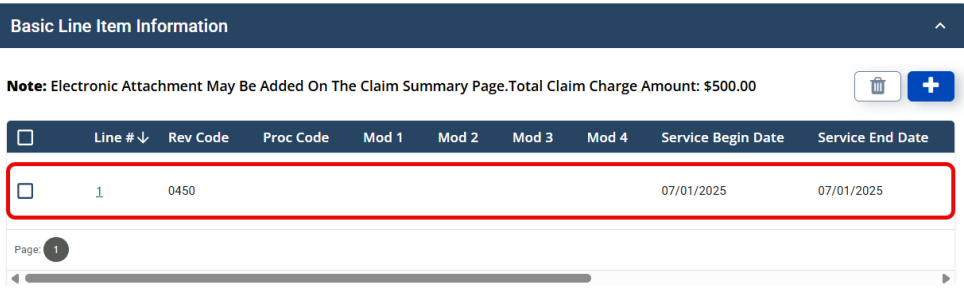
### 3.1.2 Adding and Removing Basic Line Item Information During Claim Entry

The **Basic Line Item Info** tab provides specific details about the services or items being billed for each individual visit, each associated with a particular procedure or service provided.

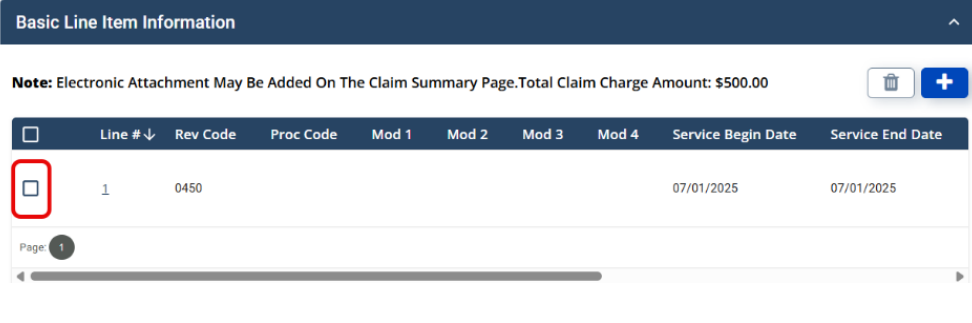
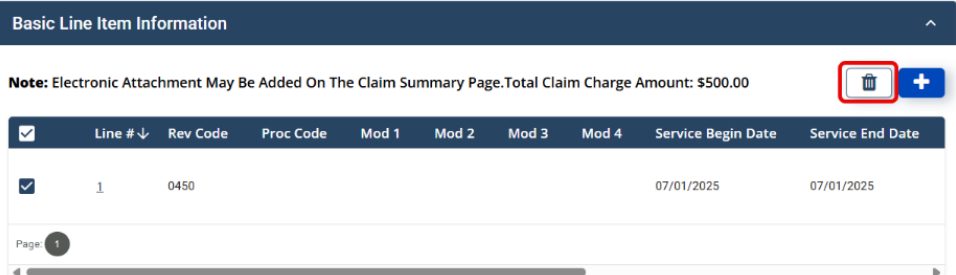
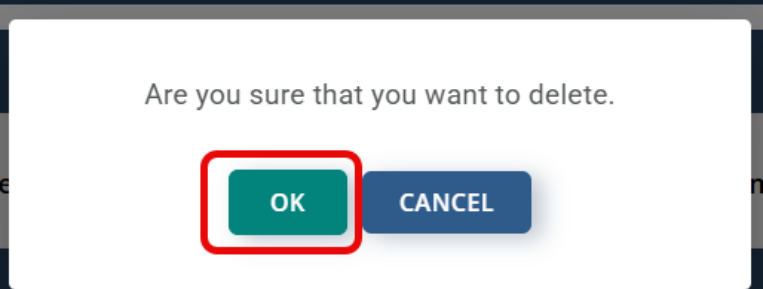
To add basic line information, complete the following steps:

Step	Screenshot
<p>1. On the <b>Basic Claim Info</b> tab, open the <b>Basic Line Item Information</b> panel.</p>	
<p>2. Select the <b>Add</b> icon to add a line item.</p>	

Step	Screenshot
<p>3. Complete the required fields with a red asterisk (*) and other appropriate information.</p>	 <p>The screenshot shows the 'Add Line Item #' form. At the top right, there are three buttons: '+ ADD' (green), 'RESET' (grey), and 'CANCEL' (dark blue). The form contains several input fields: 'Service Date Begin' and 'Service Date End' (both with date pickers), '*Revenue Code' (a dropdown menu with 'Please Select One'), 'Procedure Code', and 'Procedure Description'. Below these are four 'Modifier' fields (Mod 1, Mod 2, Mod 3, Mod 4). Further down are 'Unit Qualifier' (dropdown), '*Service Units', '*Line Item Charge Amt.' (with a '\$' symbol), and 'Non-Covered Line Charges' (with a '\$' symbol). At the bottom, there are two expandable sections: 'Line Associated Attachments' and 'Additional Service Line Information'. A question 'Is there additional line-specific information/TPL to be entered?' is followed by radio buttons for 'Yes' and 'No' (selected).</p>
<p>4. Select the +ADD button.</p>	 <p>This screenshot is identical to the one above, but the '+ ADD' button is highlighted with a red rectangular box to indicate it should be selected.</p>

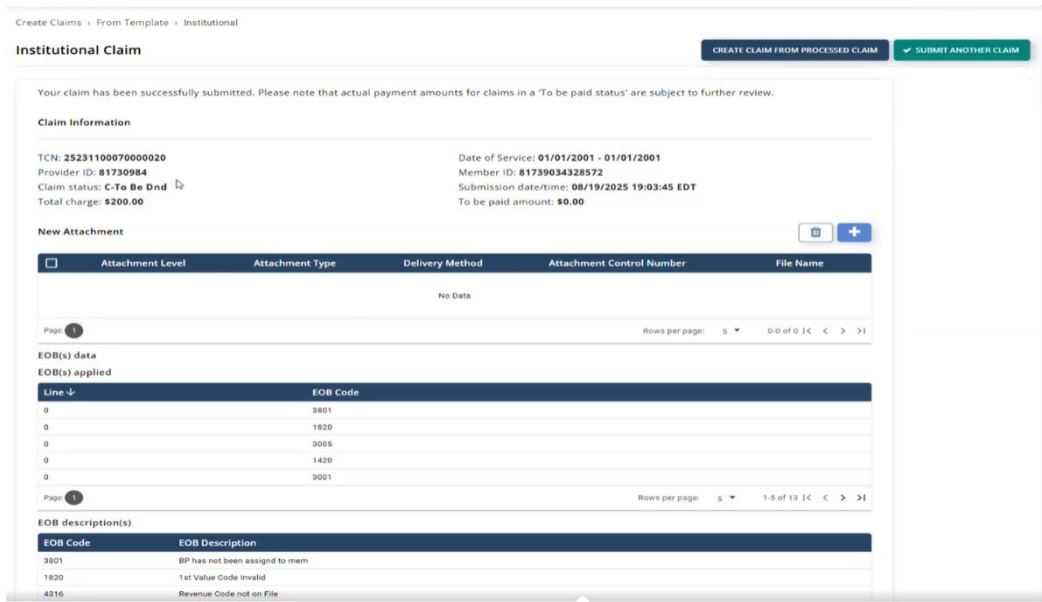
Step	Screenshot
<p>5. The line item is displayed in the table.</p>	 <p>The screenshot shows a table titled "Basic Line Item Information". A note above the table states: "Note: Electronic Attachment May Be Added On The Claim Summary Page.Total Claim Charge Amount: \$500.00". The table has columns: Line #, Rev Code, Proc Code, Mod 1, Mod 2, Mod 3, Mod 4, Service Begin Date, and Service End Date. A single row is visible with Line # 1, Rev Code 0450, and Service dates of 07/01/2025. A red box highlights the entire row.</p>

To remove basic line information, complete the following steps:

Step	Screenshot
<p>1. On the <b>Basic Claim Info</b> tab, select the line item you want to remove by checking the box next to its line number.</p>	 <p>The screenshot shows the same table as above. The checkbox in the first column of the first row is now checked and highlighted with a red box.</p>
<p>2. Select the <b>Trash Can</b> icon.</p>	 <p>The screenshot shows the table with the checkbox checked. The trash can icon in the top right corner of the table area is highlighted with a red box.</p>
<p>3. When prompted with "Are you sure you want to delete?", click the <b>OK</b> button.</p>	 <p>The screenshot shows a confirmation dialog box with the text "Are you sure that you want to delete." and two buttons: "OK" and "CANCEL". The "OK" button is highlighted with a red box.</p>

### 3.1.3 Claim Submission Confirmation Page

The Claim Submission Confirmation page is displayed with information that is unique to the claim. The confirmation page is automatically generated once the claim is submitted.



The Claim Submission Confirmation page contains the following information:

**Claim Information** – Provides information on the claim, including the TCN, Date of Service, Provider Number, Member ID, Claim Status, Total Charge, amount to be paid, and the date and time the claim was submitted.

**New Attachment** – Provides the ability to add a missing attachment, identified by an error code, and can be added to the submitted claim. To view the steps to add an attachment, see 3.1.1.

**EOB(s) Data** – Provides the Explanation of Benefit (EOB) code, the line number to which the EOB code applies, and the EOB code description.

### 3.1.4 Claim Status Result

The claim status directly determines the next steps a provider or billing professional should take to ensure the successful processing and payment of a Medicaid claim.

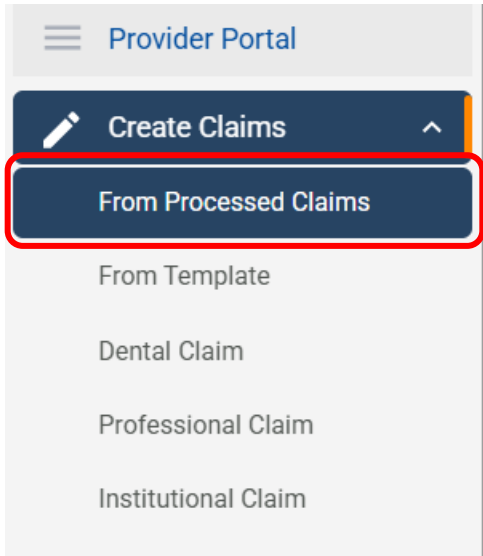
Claim Status Result	Next Steps
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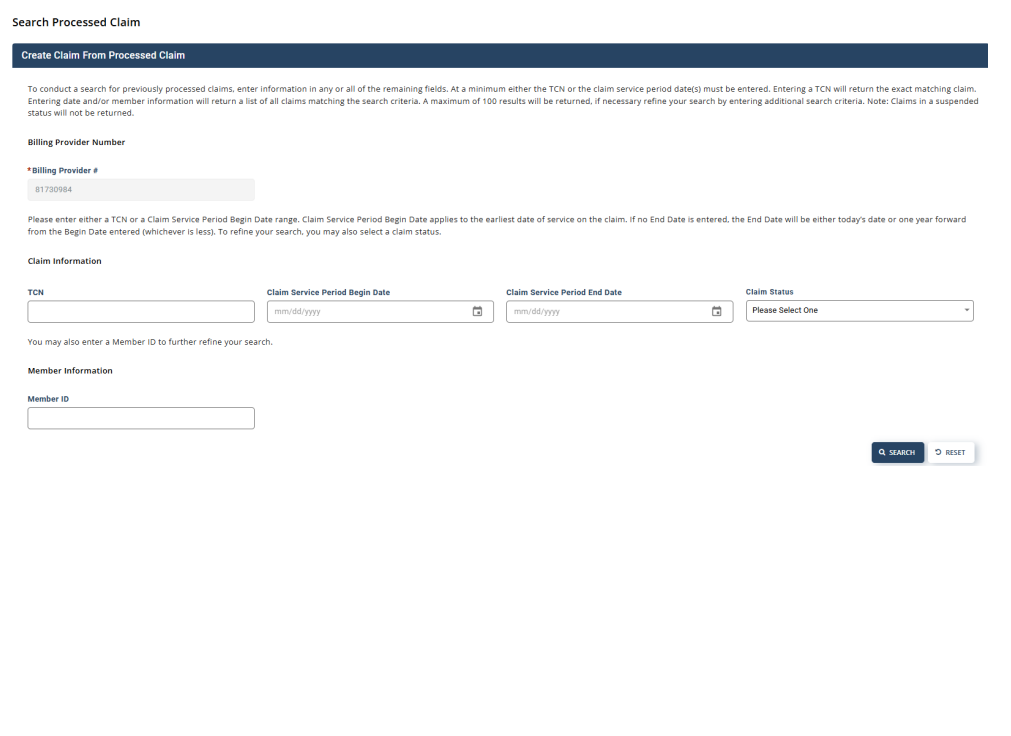
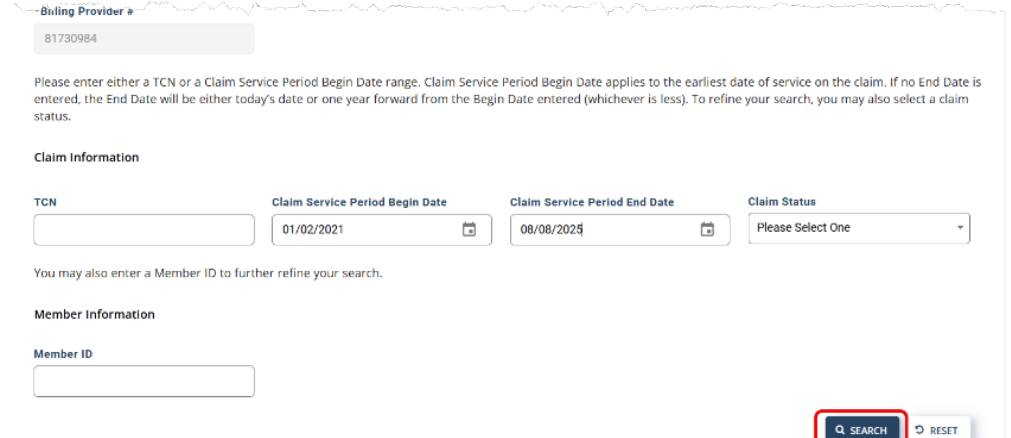
<b>To Be Paid</b>	The claim was submitted successfully. No further action is needed. The actual payment amount for a claim in a <b>'To Be Paid'</b> status is subject to further review. Further review during the payment cycle determines whether any amounts owed must be recouped from the claim.
<b>To be Denied</b>	<p>To re-submit the corrected claim, complete the following steps:</p> <ol style="list-style-type: none"> <li>1. Review the errors.</li> <li>2. Copy the TCN from the denied claim.</li> <li>3. Select <b>Create Claim From Processed Claim</b> on the <b>Claim Submission Confirmation</b> page.</li> <li>4. On the <b>Search Processed Claim</b> page, enter the <b>TCN</b> and click <b>Search</b>.</li> <li>5. Select the claim from the search results.</li> <li>6. On the <b>New Institutional Claim</b> page, correct the errors on the new claim.</li> <li>7. Submit the new claim.</li> <li>8. A new TCN is assigned to the new claim.</li> </ol>
<b>Suspended</b>	Suspended claims cannot be corrected via the portal. The suspended claim will be processed by the Conduent Operations team.

### 3.2 Creating a New Institutional Claim from a Processed Claim

You can create a new claim by copying the data from a previously processed claim to a new claim. Retrieve the processed claim by entering the original Transaction Control Number (TCN) or other search criteria. The original claim is displayed, and you can correct and update any field, and then submit the new claim. This claim is considered a new claim and given a new TCN.

To create a claim from a previously processed claim, complete the following steps:

Step	Screenshot
<p>1. From the <b>Create Claims</b> menu, select <b>From Processed Claims</b>.</p>	 <p>The screenshot shows a 'Provider Portal' header with a hamburger menu icon. Below it is a 'Create Claims' button with a pencil icon and an upward arrow. A dropdown menu is open, listing several options: 'From Processed Claims' (highlighted with a red box), 'From Template', 'Dental Claim', 'Professional Claim', and 'Institutional Claim'.</p>

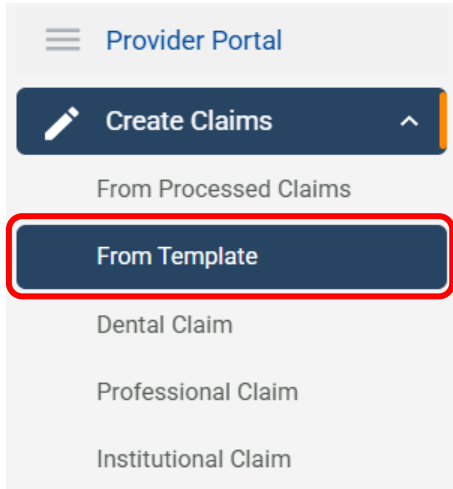
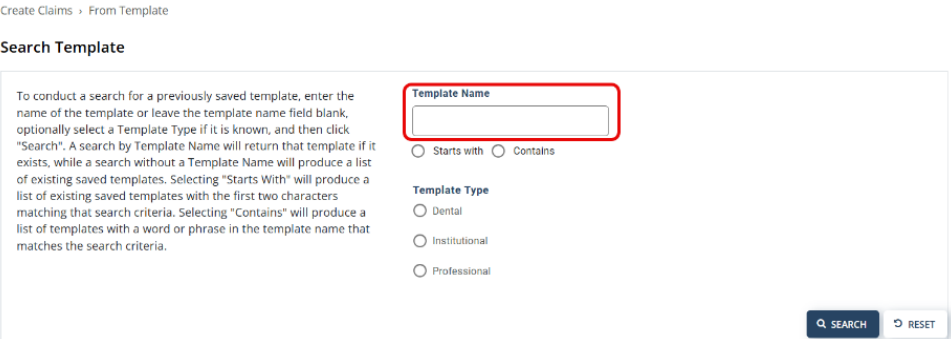
Step	Screenshot
<p>2. On the <b>Search Processed Claim</b> page, enter the search criteria for the processed claim.</p> <p><b>Note:</b> <i>Entering a TCN will return the exact matching claim. Entering the claim service period dates or member information will return a list of all claims matching the search criteria. Claims in a suspended status will not be returned.</i></p>	
<p>3. Select the <b>Search</b> button.</p>	

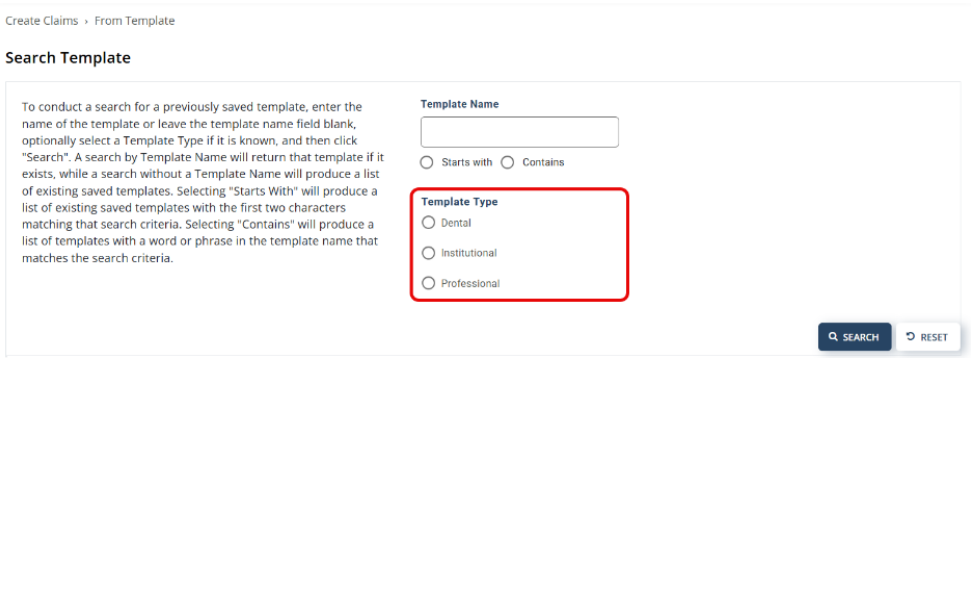
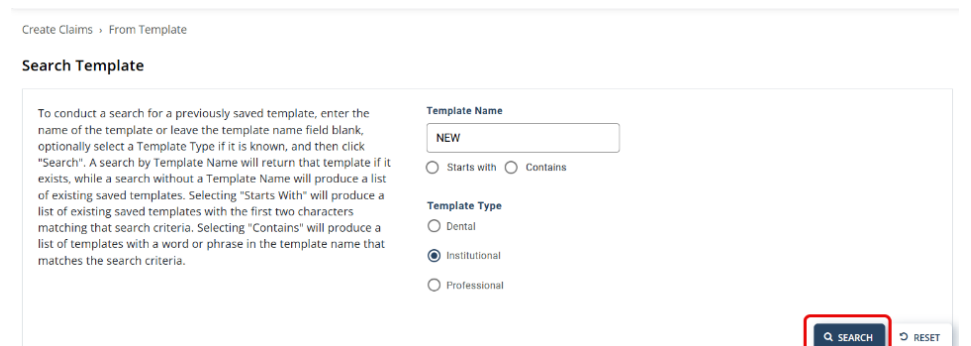
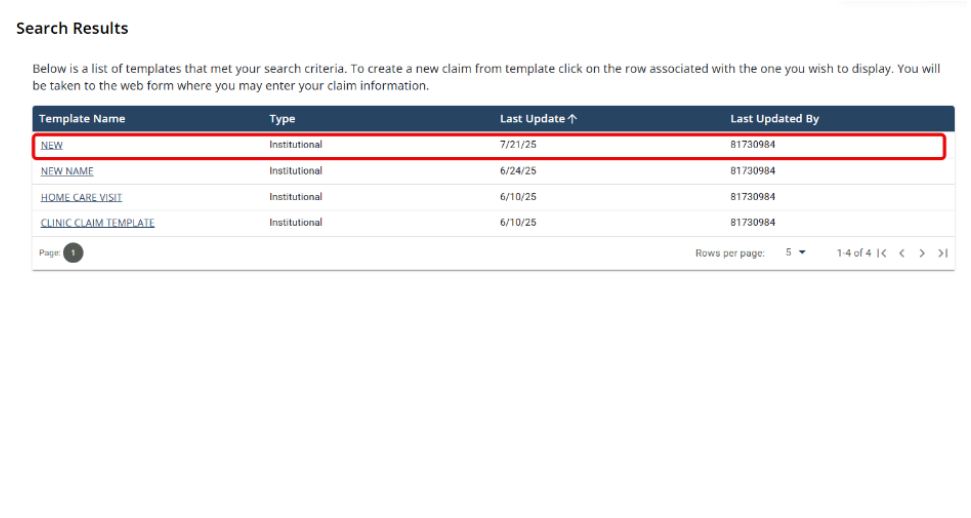
Step	Screenshot																																										
<p>4. A list of results that meet the search criteria will display. Select the row for the processed claim you wish to open.</p>	<p>Search Results</p> <p>Below is a list of claims that met your search criteria. To create a claim from an already processed claim, click on the row associated with the claim you wish to display. You will be taken to the web form where you may make necessary changes before submitting the new claim</p> <p style="text-align: center;">Provider ID: 81730984</p> <table border="1"> <thead> <tr> <th>TCN</th> <th>Service Period</th> <th>Claim Status</th> <th>Claim Type</th> <th>Claim Payment Amount</th> <th>Member Name</th> <th>Member ID</th> </tr> </thead> <tbody> <tr> <td>25189100040000010</td> <td>05/01/2025 - 05/01/2025</td> <td>C</td> <td>Medical</td> <td>\$250.00</td> <td>Terroll, Zollo</td> <td>81739034829332</td> </tr> <tr> <td>25171100040000020</td> <td>05/01/2025 - 05/01/2025</td> <td>C</td> <td>Medical</td> <td>\$250.00</td> <td>Terroll, Zollo</td> <td>81739034829332</td> </tr> <tr> <td>25171100040000010</td> <td>05/01/2025 - 05/01/2025</td> <td>C</td> <td>Medical</td> <td>\$250.00</td> <td>Terroll, Zollo</td> <td>81739034829332</td> </tr> <tr> <td>25163100040000010</td> <td>05/01/2025 - 05/01/2025</td> <td>C</td> <td>Medical</td> <td>\$250.00</td> <td>Terroll, Zollo</td> <td>81739034829332</td> </tr> <tr style="border: 2px solid red;"> <td>25149100070000020</td> <td>01/01/2025 - 01/01/2025</td> <td>C</td> <td>Institutional</td> <td>\$100.00</td> <td>ENEDINA, MACKLE</td> <td>81732439445884</td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 1-5 of 6  &lt; &gt;  </p>	TCN	Service Period	Claim Status	Claim Type	Claim Payment Amount	Member Name	Member ID	25189100040000010	05/01/2025 - 05/01/2025	C	Medical	\$250.00	Terroll, Zollo	81739034829332	25171100040000020	05/01/2025 - 05/01/2025	C	Medical	\$250.00	Terroll, Zollo	81739034829332	25171100040000010	05/01/2025 - 05/01/2025	C	Medical	\$250.00	Terroll, Zollo	81739034829332	25163100040000010	05/01/2025 - 05/01/2025	C	Medical	\$250.00	Terroll, Zollo	81739034829332	25149100070000020	01/01/2025 - 01/01/2025	C	Institutional	\$100.00	ENEDINA, MACKLE	81732439445884
TCN	Service Period	Claim Status	Claim Type	Claim Payment Amount	Member Name	Member ID																																					
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<p>5. The <b>New Institutional Claim</b> page will be displayed.</p> <p><b>Note:</b> <i>This would be the procedure to edit denied processed claims. Keep in mind that timely filing limits apply. If you submit a claim after the 90-day time frame, a delay reason will be required on the re-submission.</i></p>	<p>New Institutional Claim <span style="float: right;">SUBMIT CLAIM SAVE CLAIM</span></p> <p>Basic Claim Info Other Claim Info Other Service Line Info</p> <p>Is this a Void/Replacement?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Submitter Information</p> <p>Submitter ID: HVALERIE01 *Receiver ID/Name: 87654321-CMds</p> <p>Provider Information</p> <p>Member Information</p> <p>Claim Information</p> <p>Diagnosis Information</p> <p>Procedure Information</p>																																										

### 3.3 Creating a New Institutional Claim from an Existing Template

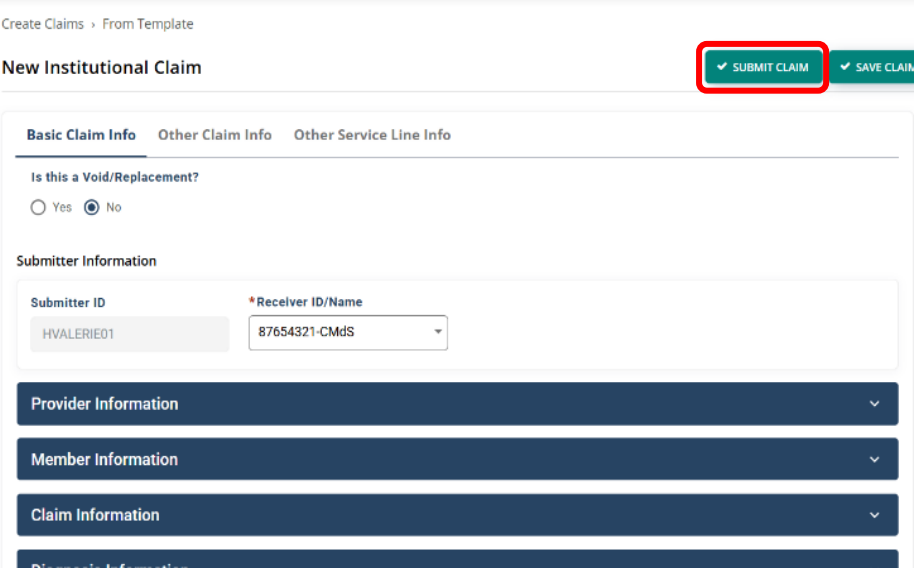
You can create a new claim from an existing template. Users can begin with a current template, customize it as needed, and save it as a new claim.

To create a claim from an existing claim template, complete the following steps:

Step	Screenshot
<p>1. From the <b>Create Claims</b> menu, select <b>From Template</b>.</p>	
<p>2. On the <b>Search Template</b> page, enter the template name of the saved template or the template type.</p> <p><b>Notes:</b> <i>Selecting "Starts With" will produce a list of existing saved templates with the first two characters matching that search criteria.</i></p> <p><i>Selecting "Contains" will produce a list of templates with a word or phrase in the template name that matches the search criteria.</i></p>	

Step	Screenshot																				
<p>3. Select the <b>Template Type</b> if the name is not known or the user is looking to see what templates exist. Selecting a template type is not a mandatory step in the process. The system allows users to proceed with or without selecting, and the functionality remains unaffected.</p>																					
<p>4. Select the <b>Search</b> button.</p>																					
<p>5. A list of results matching your search criteria will be displayed. When only one template is created, the system automatically navigates to the claims page. However, if multiple templates exist, the user is prompted to select from the available</p>	 <p><b>Search Results</b></p> <p>Below is a list of templates that met your search criteria. To create a new claim from template click on the row associated with the one you wish to display. You will be taken to the web form where you may enter your claim information.</p> <table border="1"> <thead> <tr> <th>Template Name</th> <th>Type</th> <th>Last Update ↑</th> <th>Last Updated By</th> </tr> </thead> <tbody> <tr> <td><a href="#">NEW</a></td> <td>Institutional</td> <td>7/21/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">NEW NAME</a></td> <td>Institutional</td> <td>6/24/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">HOME CARE VISIT</a></td> <td>Institutional</td> <td>6/10/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">CLINIC CLAIM TEMPLATE</a></td> <td>Institutional</td> <td>6/10/25</td> <td>81730984</td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 1-4 of 4  &lt; &gt;  </p>	Template Name	Type	Last Update ↑	Last Updated By	<a href="#">NEW</a>	Institutional	7/21/25	81730984	<a href="#">NEW NAME</a>	Institutional	6/24/25	81730984	<a href="#">HOME CARE VISIT</a>	Institutional	6/10/25	81730984	<a href="#">CLINIC CLAIM TEMPLATE</a>	Institutional	6/10/25	81730984
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Step	Screenshot																								
options before proceeding.																									
6. Click on the row associated with the template you wish to display.	<p><b>Search Results</b></p> <p>Below is a list of templates that met your search criteria. To create a new claim from template click on the row associated with the one you wish to display. You will be taken to the web form where you may enter your claim information.</p> <table border="1"> <thead> <tr> <th>Template Name</th> <th>Type</th> <th>Last Update ↑</th> <th>Last Updated By</th> </tr> </thead> <tbody> <tr> <td><a href="#">COPY OF TEMPLATE</a></td> <td>Professional</td> <td>6/24/25</td> <td>81730984</td> </tr> <tr style="border: 2px solid red;"> <td><a href="#">PROFESSIONAL IN OFFICE</a></td> <td>Professional</td> <td>6/12/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">PROFESSIONAL</a></td> <td>Professional</td> <td>6/12/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">OFFICE VISIT TEMPLATE</a></td> <td>Professional</td> <td>6/10/25</td> <td>81730984</td> </tr> <tr> <td><a href="#">INITIAL HOSPITAL VISIT TEMPLATE</a></td> <td>Professional</td> <td>6/10/25</td> <td>81730984</td> </tr> </tbody> </table> <p>Page 1 Rows per page: 5 1-5 of 7 1C &gt; &gt;&gt;</p>	Template Name	Type	Last Update ↑	Last Updated By	<a href="#">COPY OF TEMPLATE</a>	Professional	6/24/25	81730984	<a href="#">PROFESSIONAL IN OFFICE</a>	Professional	6/12/25	81730984	<a href="#">PROFESSIONAL</a>	Professional	6/12/25	81730984	<a href="#">OFFICE VISIT TEMPLATE</a>	Professional	6/10/25	81730984	<a href="#">INITIAL HOSPITAL VISIT TEMPLATE</a>	Professional	6/10/25	81730984
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7. The <b>New Institutional Claim</b> page will be displayed.	<p>Create Claims &gt; From Template</p> <p><b>New Institutional Claim</b> <span style="float: right;">✔ SUBMIT CLAIM ✔ SAVE CLAIM</span></p> <p><b>Basic Claim Info</b> Other Claim Info Other Service Line Info</p> <p>Is this a Void/Replacement?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Submitter Information</p> <p>Submitter ID: HVALERIE01 *Receiver ID/Name: 87654321-CMds</p> <p>Provider Information</p> <p>Member Information</p> <p>Claim Information</p>																								

Step	Screenshot
<p>8. Fill in the applicable claim information and select the <b>Submit Claim</b> button.</p>	 <p>The screenshot shows a web interface for creating a claim. At the top, it says 'Create Claims &gt; From Template' and 'New Institutional Claim'. There are two buttons: 'SUBMIT CLAIM' (highlighted with a red box) and 'SAVE CLAIM'. Below this are tabs for 'Basic Claim Info', 'Other Claim Info', and 'Other Service Line Info'. Under 'Basic Claim Info', there is a question 'Is this a Void/Replacement?' with radio buttons for 'Yes' and 'No' (selected). Below that is a 'Submitter Information' section with a 'Submitter ID' field containing 'HVALERIE01' and a '*Receiver ID/Name' dropdown menu containing '87654321-CMds'. At the bottom, there are expandable sections for 'Provider Information', 'Member Information', 'Claim Information', and 'Diagnosis Information'.</p>

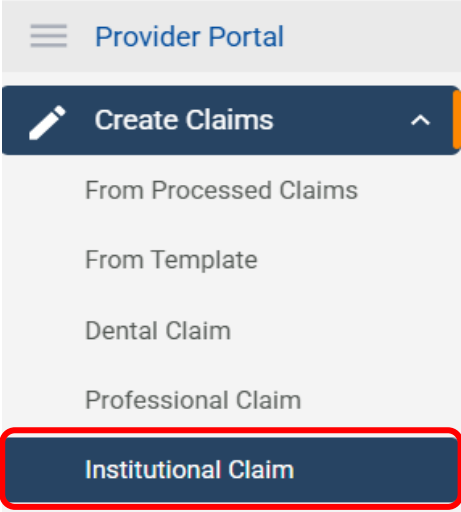
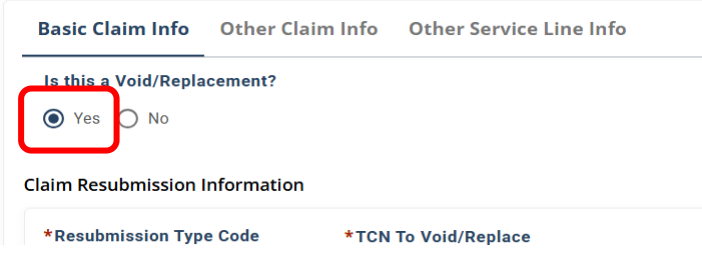
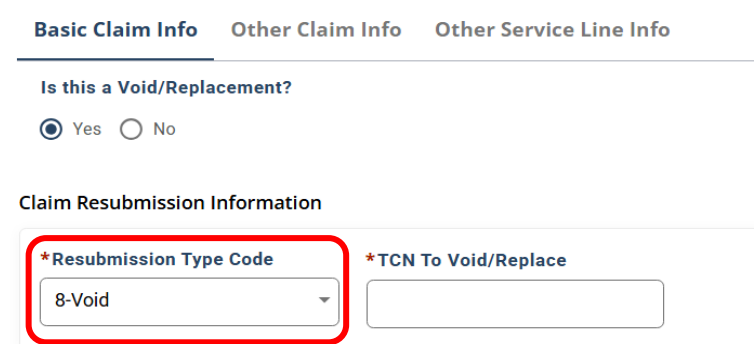
## 4 Creating a Void or Replacement Claim

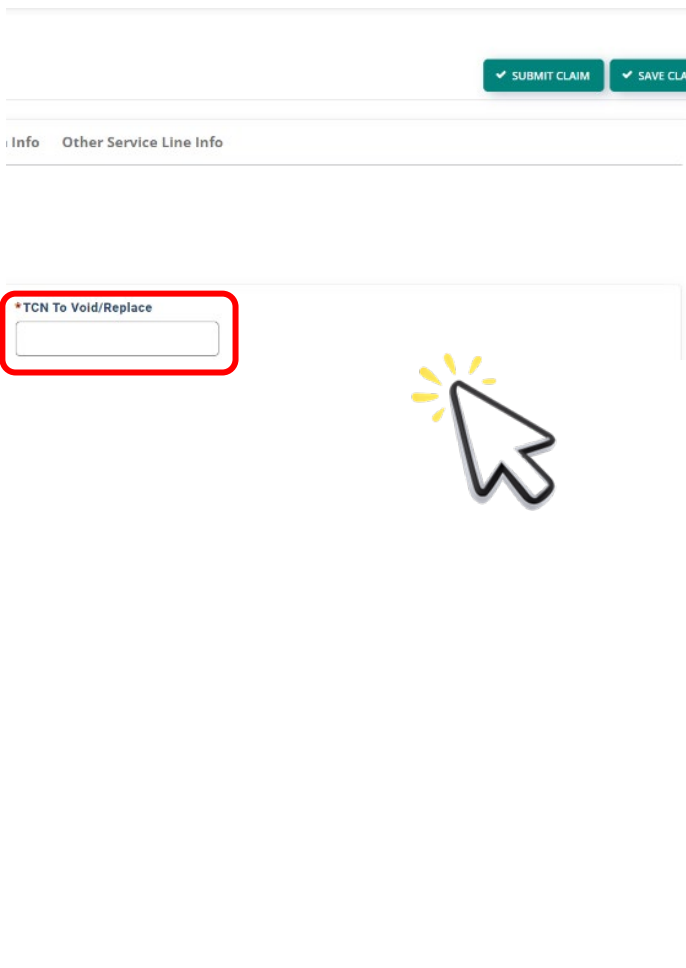
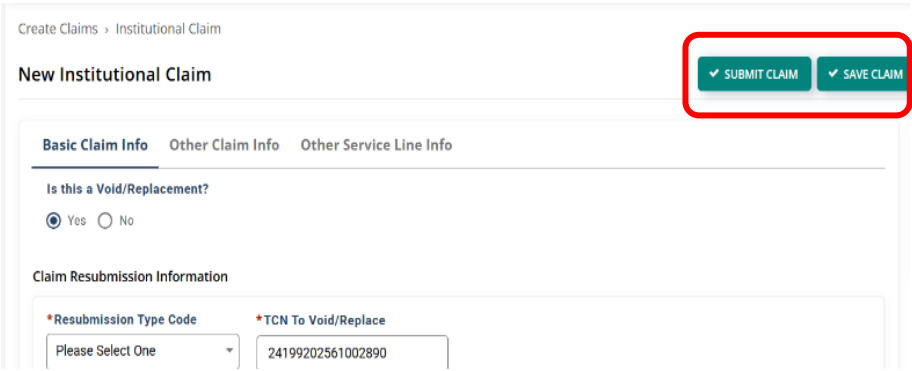
A previously processed paid claim can be replaced or voided due to reasons such as duplicates, new information, or other exceptions. The last digit of the TCN is the transaction type number which indicates whether it’s an original claim (0), void (1), credit adjustment (2), debit adjustment (3) and denied provider submitted replacement (4).

### 4.1 Void a Paid Claim

A replacement claim changes the original claim’s payment amount or corrects information on the original claim. A replacement request creates a copy of the claim and assigns a unique TCN. The replaced claim is then considered for future adjudication, and the original claim cannot be altered, replaced, or voided in the future. The new replacement claim could, however, be altered, replaced, or voided in the future.

To replace a paid claim, complete the following steps:

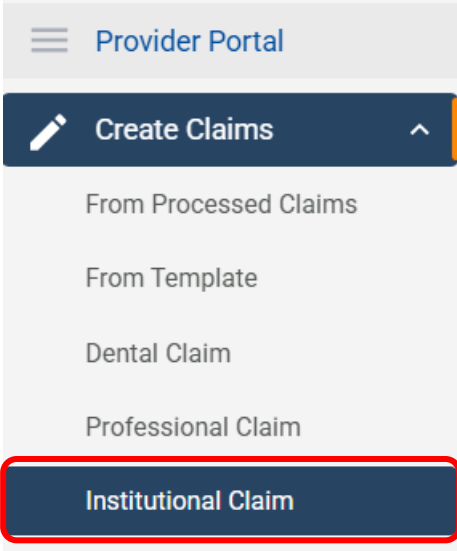
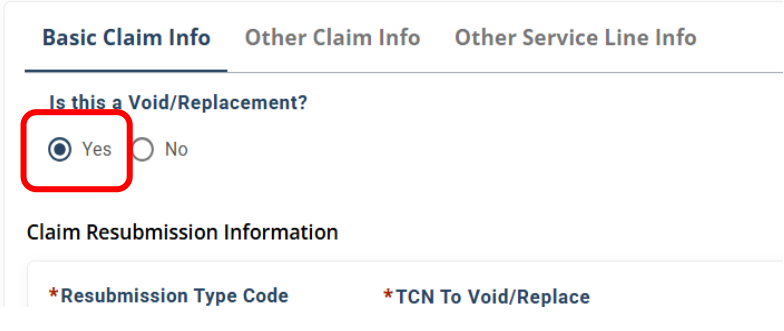
Step	Screenshot
<p>1. From the <b>Create Claims</b> menu, select <b>Institutional Claim</b>.</p>	
<p>2. On the <b>New Institutional Claim</b> page, under the <b>Basic Claim Info</b> tab, select 'Yes' for the "Is this a Void/Replacement?" question.</p>	
<p>3. Select <b>Void</b> for the <b>Resubmission Type Code</b>.</p>	

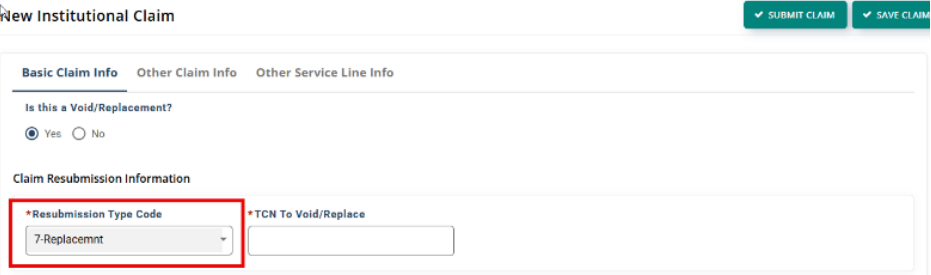

Step	Screenshot
<p>4. Enter the <b>TCN</b> of the paid claim to be replaced, then select anywhere to the right of the TCN field on the page. This copies the data from the paid claim to the new claim.</p> <p><i><b>Notes:</b> A void is a complete reversal or offsetting of a previously paid claim. A voided claim is not considered for future adjudication and cannot be altered or replaced.</i></p> <p><i>When a claim is voided, the system generates a new voided TCN with Transaction Type 1 – Void. All amounts on the voided TCN appear as negative values, effectively reversing the original claim.</i></p>	
<p>5. Select either the <b>Submit Claim</b> or the <b>Save Claim</b> button, depending on whether you want to submit a completed claim or save an in-progress claim.</p>	

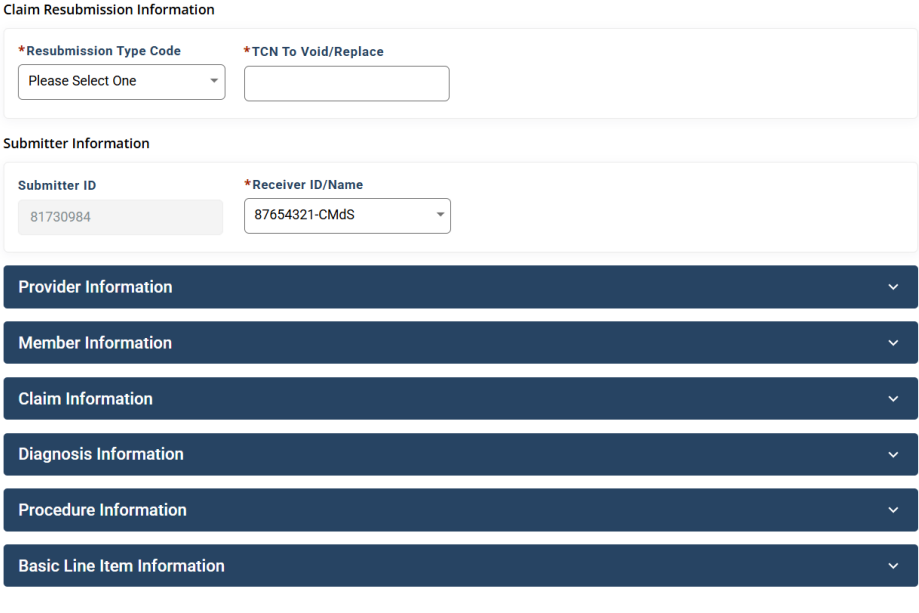
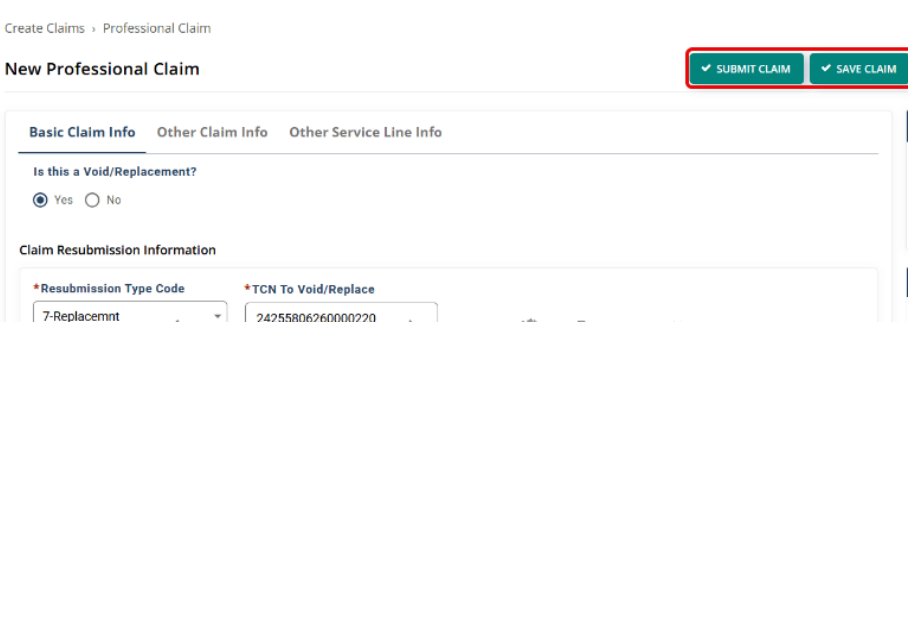
#### 4.2 Replace a Paid Claim

A replacement claim changes the original claim’s payment amount or corrects information on the original claim. A replacement request creates a copy of the claim and assigns a unique TCN. The replaced claim is then considered for future adjudication, and the original claim cannot be altered, replaced, or voided in the future. The new replacement claim could, however, be altered, replaced, or voided in the future.

To replace a paid claim, complete the following steps:

Step	Screenshot
<p>1. From the <b>Create Claims</b> menu, select <b>Institutional Claim</b>.</p>	
<p>2. On the <b>New Institutional Claim</b> page, under the <b>Basic Claim Info</b> tab, select 'Yes' for the “<i>Is this a Void/Replacement?</i>” question.</p>	

Step	Screenshot
<p>3. Select <b>Replacement</b> for the <b>Resubmission Type Code</b>.</p>	
<p>4. Enter the <b>TCN</b> of the paid claim to be replaced, then select anywhere to the right of the TCN field on the page. This copies the data from the paid claim to the new claim.</p> <p><b>Note:</b> When a paid claim is replaced, adjustments to the original claim create two additional TCNs for the replacement transaction: a credit adjustment TCN with Transaction Type 2, and a debit adjustment TCN with Transaction Type 3.</p>	

Step	Screenshot
<p>5. Apply the necessary corrections or updates to the claim.</p>	 <p>The screenshot shows a form titled "Claim Resubmission Information". It contains two main sections: "Claim Resubmission Information" and "Submitter Information".</p> <ul style="list-style-type: none"> <li><b>Claim Resubmission Information:</b> <ul style="list-style-type: none"> <li>*Resubmission Type Code: A dropdown menu with "Please Select One" selected.</li> <li>*TCN To Void/Replace: An empty text input field.</li> </ul> </li> <li><b>Submitter Information:</b> <ul style="list-style-type: none"> <li>Submitter ID: A text input field containing "81730984".</li> <li>*Receiver ID/Name: A dropdown menu with "87654321-CMds" selected.</li> </ul> </li> </ul> <p>Below these sections are seven dark blue expandable tabs, each with a downward arrow:</p> <ul style="list-style-type: none"> <li>Provider Information</li> <li>Member Information</li> <li>Claim Information</li> <li>Diagnosis Information</li> <li>Procedure Information</li> <li>Basic Line Item Information</li> </ul>
<p>6. Select either the <b>Submit Claim</b> or the <b>Save Claim</b> button, depending on whether you want to submit a completed claim or save an in-progress claim for 30 days from save date. If it is saved, then the original claim is used and has the void/replacement option completed. It does not generate a new TCN until submitted.</p>	 <p>The screenshot shows the "New Professional Claim" form. At the top right, there are two buttons: "SUBMIT CLAIM" and "SAVE CLAIM", both highlighted with a red border.</p> <p>The form has three tabs: "Basic Claim Info", "Other Claim Info", and "Other Service Line Info". The "Basic Claim Info" tab is active.</p> <p>Under "Basic Claim Info", there is a question: "Is this a Void/Replacement?" with radio buttons for "Yes" (selected) and "No".</p> <p>Below this is the "Claim Resubmission Information" section, which contains the same fields as in the previous screenshot:</p> <ul style="list-style-type: none"> <li>*Resubmission Type Code: A dropdown menu with "7-Replacemnt" selected.</li> <li>*TCN To Void/Replace: A text input field containing "24255806260000220".</li> </ul>

## 5 Managing Claims

The claims management feature allows users to efficiently correct, update, and resubmit claims. Users can work with claims that were previously submitted or saved. Claims are available for up to 30 days from the date of the last save or from the date of submission.

From the **Manage Claims** screen, users can access two key functions:

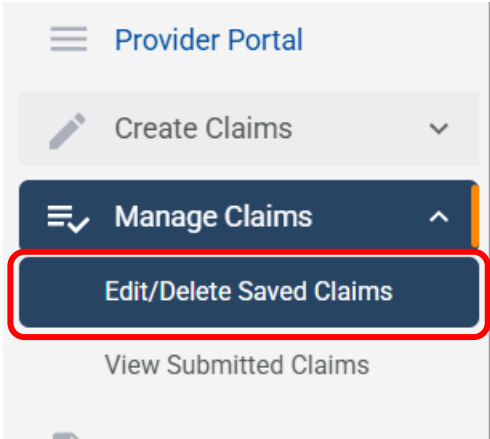
**Edit/Delete Saved Claims** – Allows users to view claims that were saved but not yet submitted. A saved claim can be edited, deleted, or submitted for up to 30 days after its most recent save.

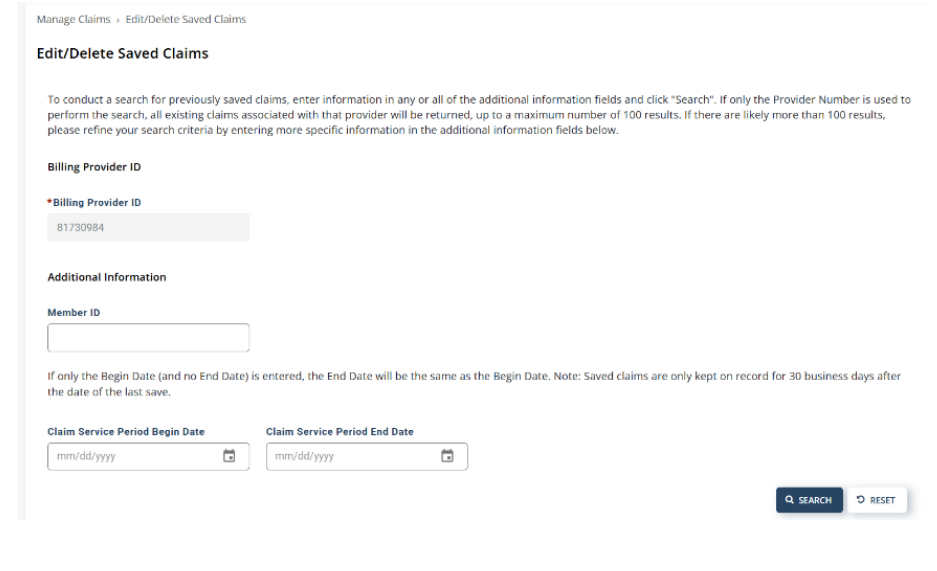
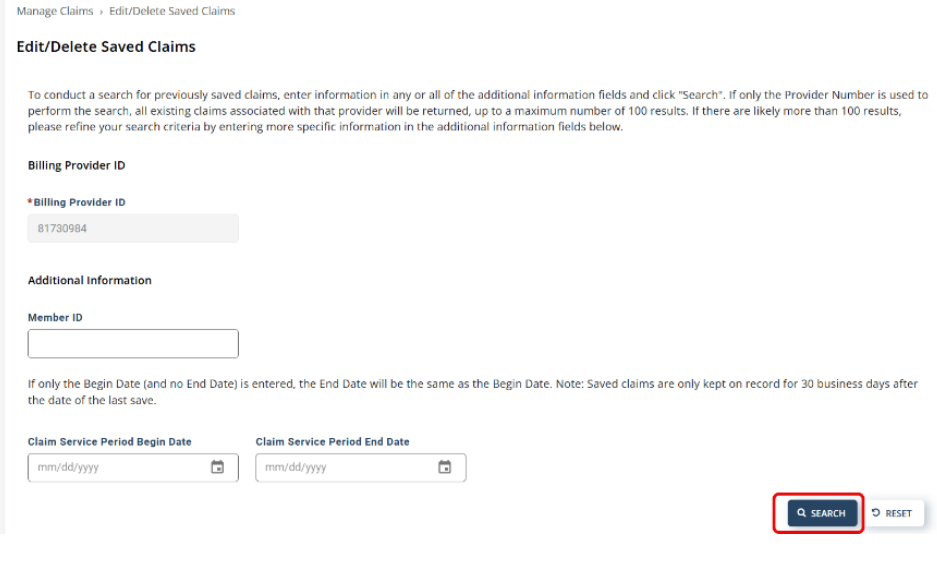
**View Submitted Claim** – Allows users to review claim data for 30 days from the date of submission, including those that are paid, denied, or suspended. The View Submitted Claim screen will not provide any status. After the 30-day window, the detailed keyed claim data is no longer available for viewing. However, users can still check the claim’s status through the Claim Status Inquiry screen.

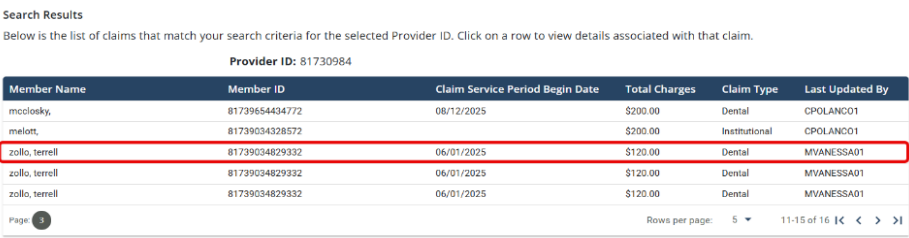
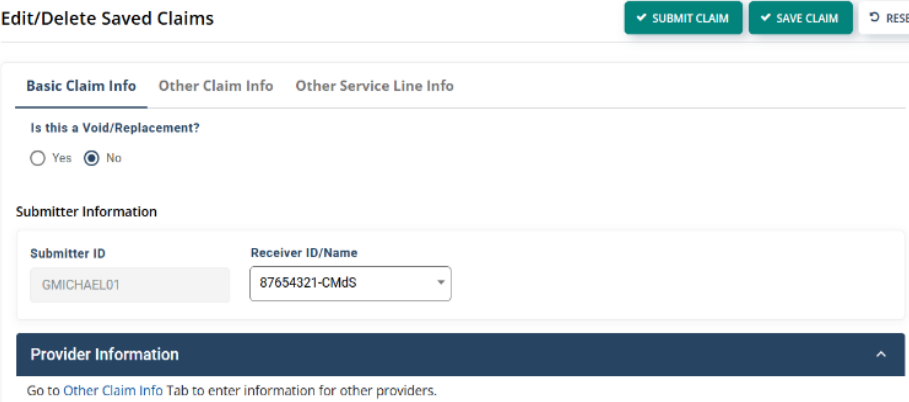
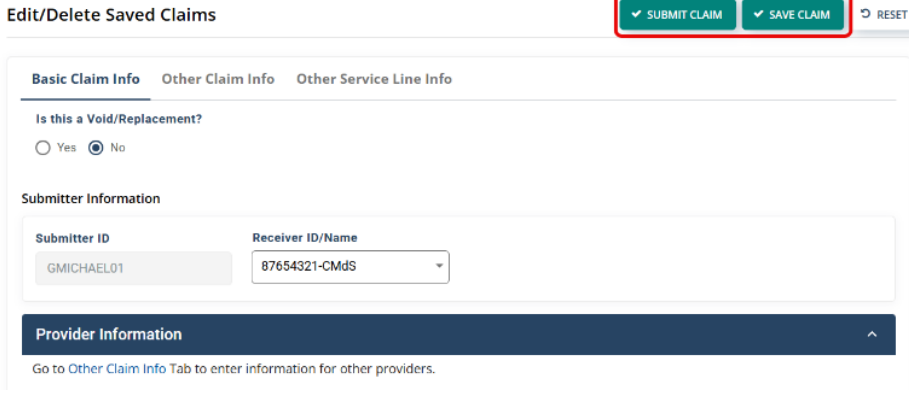
### 5.1 Edit a Saved Claim

You can edit a saved claim online for up to 30 days after it was last saved.

To edit a saved claim, complete the following steps:

Step	Screenshot
<p>1. On the <b>Manage Claims</b> menu, select <b>Edit/Delete Saved Claims</b>.</p>	 <p>The screenshot shows a mobile application interface for the 'Provider Portal'. At the top, there is a hamburger menu icon followed by the text 'Provider Portal'. Below this, there is a list of menu items: 'Create Claims' with a pencil icon and a downward arrow, 'Manage Claims' with a hamburger icon and an upward arrow, 'Edit/Delete Saved Claims' (which is highlighted with a red rectangular box), and 'View Submitted Claims'.</p>

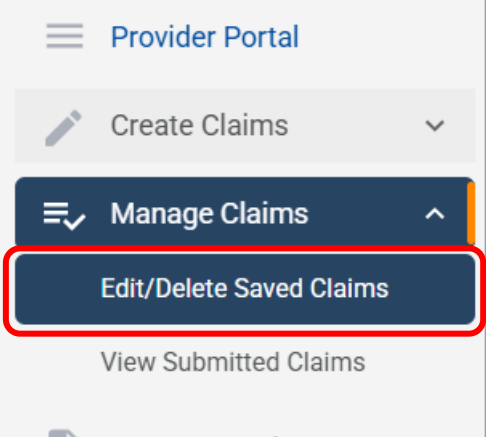
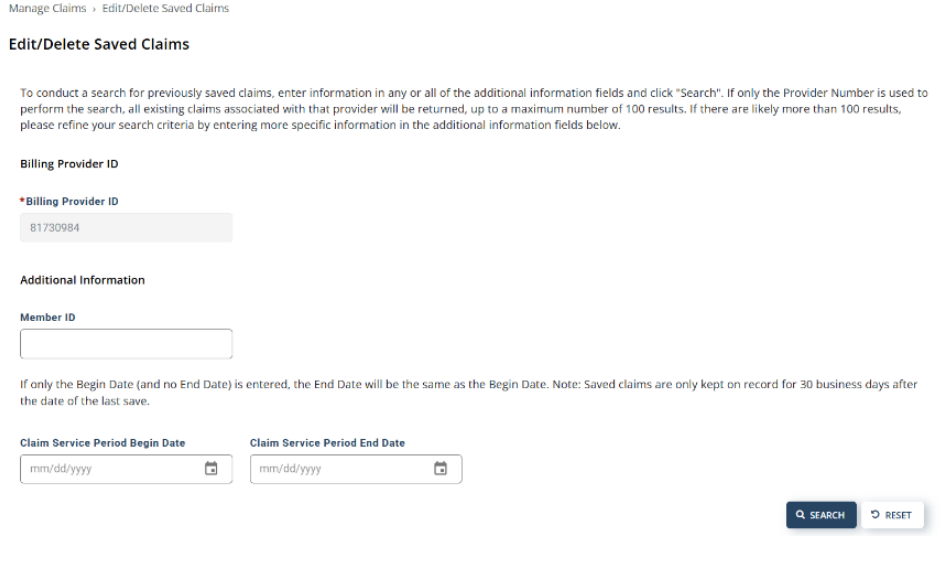
Step	Screenshot
<p>2. On the <b>Edit/Delete Claims</b> page, enter your search criteria.</p> <p><b>Note:</b> <i>If only the Provider Number is used to perform the search, all existing claims associated with that provider will be returned, up to a maximum number of 100 results.</i></p>	 <p>The screenshot shows the 'Edit/Delete Saved Claims' page. It includes a breadcrumb 'Manage Claims &gt; Edit/Delete Saved Claims', a title 'Edit/Delete Saved Claims', and a paragraph of instructions. Below the instructions are several input fields: 'Billing Provider ID' (with a value of 81730984), 'Additional Information' (with a 'Member ID' field), and two date pickers for 'Claim Service Period Begin Date' and 'Claim Service Period End Date'. At the bottom right, there are 'SEARCH' and 'RESET' buttons. The 'SEARCH' button is not highlighted in this screenshot.</p>
<p>3. Select the <b>Search</b> button.</p>	 <p>This screenshot is identical to the one above, showing the 'Edit/Delete Saved Claims' page. However, in this version, the 'SEARCH' button at the bottom right is highlighted with a red rectangular box to indicate it should be selected.</p>

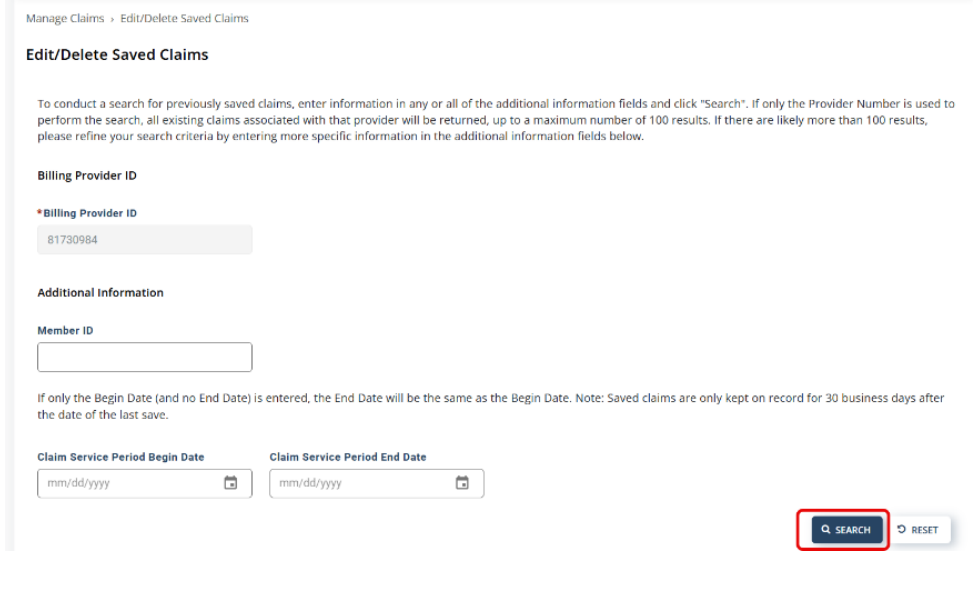
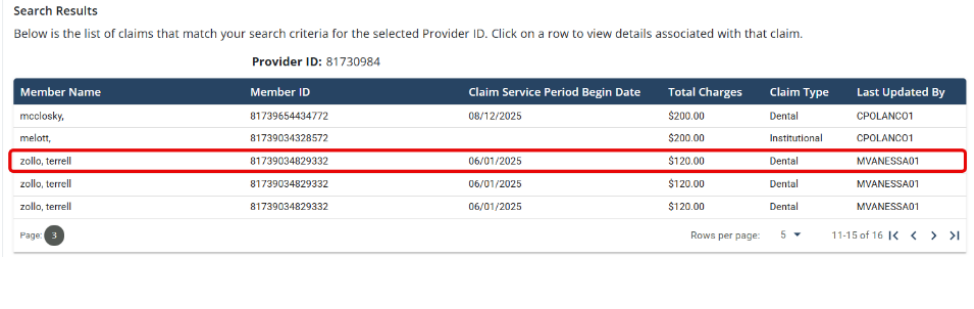
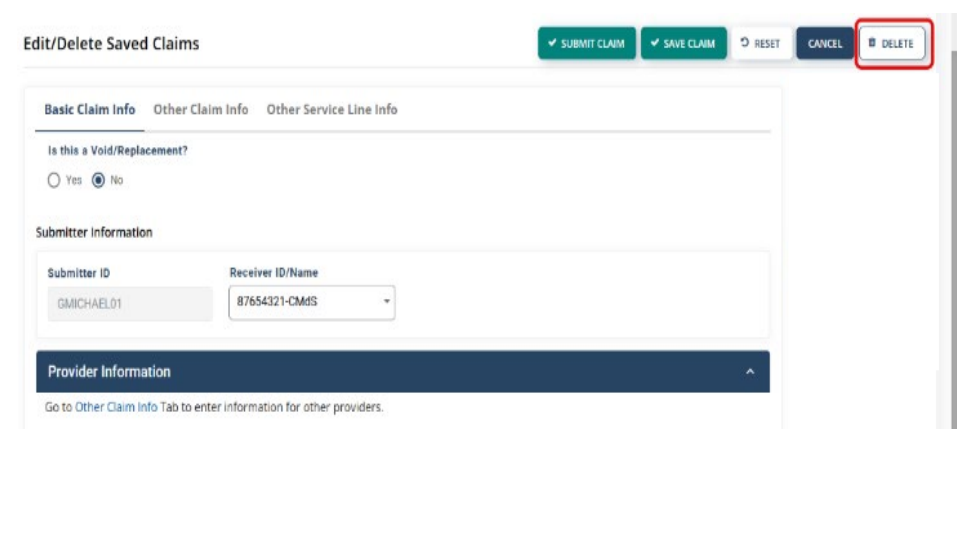
Step	Screenshot																																				
<p>4. A list of claims that meet the search criteria will display. Select the row for the saved claim you wish to edit.</p>	 <p><b>Search Results</b> Below is the list of claims that match your search criteria for the selected Provider ID. Click on a row to view details associated with that claim.</p> <p>Provider ID: 81730984</p> <table border="1"> <thead> <tr> <th>Member Name</th> <th>Member ID</th> <th>Claim Service Period Begin Date</th> <th>Total Charges</th> <th>Claim Type</th> <th>Last Updated By</th> </tr> </thead> <tbody> <tr> <td>mccllosky,</td> <td>81739654434772</td> <td>08/12/2025</td> <td>\$200.00</td> <td>Dental</td> <td>CPOLANCO1</td> </tr> <tr> <td>melott,</td> <td>81739034328572</td> <td></td> <td>\$200.00</td> <td>Institutional</td> <td>CPOLANCO1</td> </tr> <tr style="border: 2px solid red;"> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 11-15 of 16</p>	Member Name	Member ID	Claim Service Period Begin Date	Total Charges	Claim Type	Last Updated By	mccllosky,	81739654434772	08/12/2025	\$200.00	Dental	CPOLANCO1	melott,	81739034328572		\$200.00	Institutional	CPOLANCO1	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01
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<p>5. On the <b>Edit/Delete Saved Claims</b> page, edit the claim information as needed.</p>	 <p><b>Edit/Delete Saved Claims</b> <span style="float: right;">✓ SUBMIT CLAIM ✓ SAVE CLAIM ↻ RESET</span></p> <p>Basic Claim Info Other Claim Info Other Service Line Info</p> <p>Is this a Void/Replacement?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Submitter Information</p> <p>Submitter ID: GMICHAEL01 Receiver ID/Name: 87654321-CMds</p> <p>Provider Information</p> <p>Go to Other Claim Info Tab to enter information for other providers.</p>																																				
<p>6. Select the <b>Submit Claim</b> or the <b>Save Claim</b> button, depending on if you wish to submit a completed claim or save an in-progress claim for 30 days from the save date.</p>	 <p><b>Edit/Delete Saved Claims</b> <span style="float: right;">✓ SUBMIT CLAIM ✓ SAVE CLAIM ↻ RESET</span></p> <p>Basic Claim Info Other Claim Info Other Service Line Info</p> <p>Is this a Void/Replacement?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>Submitter Information</p> <p>Submitter ID: GMICHAEL01 Receiver ID/Name: 87654321-CMds</p> <p>Provider Information</p> <p>Go to Other Claim Info Tab to enter information for other providers.</p>																																				

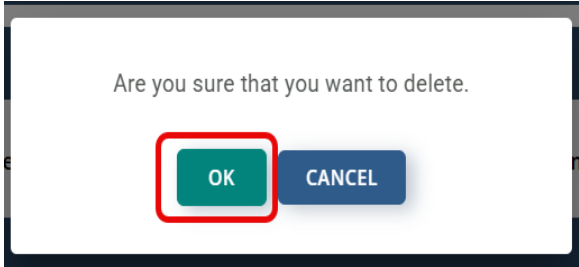
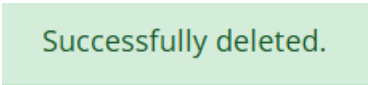
### 5.2 Delete a Saved Claim

You can delete a saved claim online for up to 30 days after it was last saved.

To delete a saved claim, complete the following steps:

Step	Screenshot
<p>1. On the <b>Manage Claims</b> menu, select <b>Edit/Delete Saved Claims</b>.</p>	
<p>2. On the <b>Edit/Delete Saved Claims</b> page, enter your search criteria.</p> <p><b>Note:</b> <i>If only the Provider Number is used to perform the search, all existing claims associated with that provider will be returned, up to a maximum number of 100 results.</i></p>	

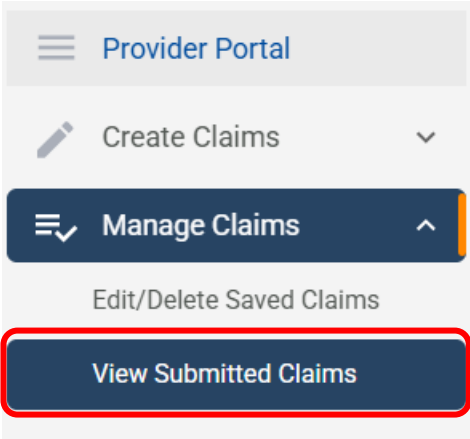
Step	Screenshot																																				
<p>3. Select the <b>Search</b> button.</p>	 <p>Manage Claims &gt; Edit/Delete Saved Claims</p> <p><b>Edit/Delete Saved Claims</b></p> <p>To conduct a search for previously saved claims, enter information in any or all of the additional information fields and click "Search". If only the Provider Number is used to perform the search, all existing claims associated with that provider will be returned, up to a maximum number of 100 results. If there are likely more than 100 results, please refine your search criteria by entering more specific information in the additional information fields below.</p> <p><b>Billing Provider ID</b></p> <p>*Billing Provider ID 81730984</p> <p><b>Additional Information</b></p> <p>Member ID <input type="text"/></p> <p>If only the Begin Date (and no End Date) is entered, the End Date will be the same as the Begin Date. Note: Saved claims are only kept on record for 30 business days after the date of the last save.</p> <p>Claim Service Period Begin Date <input type="text" value="mm/dd/yyyy"/> <input type="calendar"/></p> <p>Claim Service Period End Date <input type="text" value="mm/dd/yyyy"/> <input type="calendar"/></p> <p><b>SEARCH</b> <b>RESET</b></p>																																				
<p>4. A list of claims that meet the search criteria will display. Select the row for the desired claim to continue.</p>	 <p>Search Results</p> <p>Below is the list of claims that match your search criteria for the selected Provider ID. Click on a row to view details associated with that claim.</p> <p><b>Provider ID: 81730984</b></p> <table border="1"> <thead> <tr> <th>Member Name</th> <th>Member ID</th> <th>Claim Service Period Begin Date</th> <th>Total Charges</th> <th>Claim Type</th> <th>Last Updated By</th> </tr> </thead> <tbody> <tr> <td>mcclosky,</td> <td>81739654434772</td> <td>08/12/2025</td> <td>\$200.00</td> <td>Dental</td> <td>CPOLANCO1</td> </tr> <tr> <td>melott,</td> <td>81739034328572</td> <td></td> <td>\$200.00</td> <td>Institutional</td> <td>CPOLANCO1</td> </tr> <tr style="border: 2px solid red;"> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> </tbody> </table> <p>Page 1 Rows per page: 5 11-15 of 16 &lt; &gt; &gt;&gt;</p>	Member Name	Member ID	Claim Service Period Begin Date	Total Charges	Claim Type	Last Updated By	mcclosky,	81739654434772	08/12/2025	\$200.00	Dental	CPOLANCO1	melott,	81739034328572		\$200.00	Institutional	CPOLANCO1	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01
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<p>5. On the <b>Edit/Delete Saved Claims</b> page, select the <b>Delete</b> button.</p>	 <p><b>Edit/Delete Saved Claims</b> <b>SUBMIT CLAIM</b> <b>SAVE CLAIM</b> <b>RESET</b> <b>CANCEL</b> <b>DELETE</b></p> <p><b>Basic Claim Info</b> <b>Other Claim Info</b> <b>Other Service Line Info</b></p> <p>Is this a Void/Replacement?  <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><b>Submitter Information</b></p> <p>Submitter ID: GMICHAEL01 Receiver ID/Name: 87654321-CMMS</p> <p><b>Provider Information</b></p> <p>Go to Other Claim Info Tab to enter information for other providers.</p>																																				

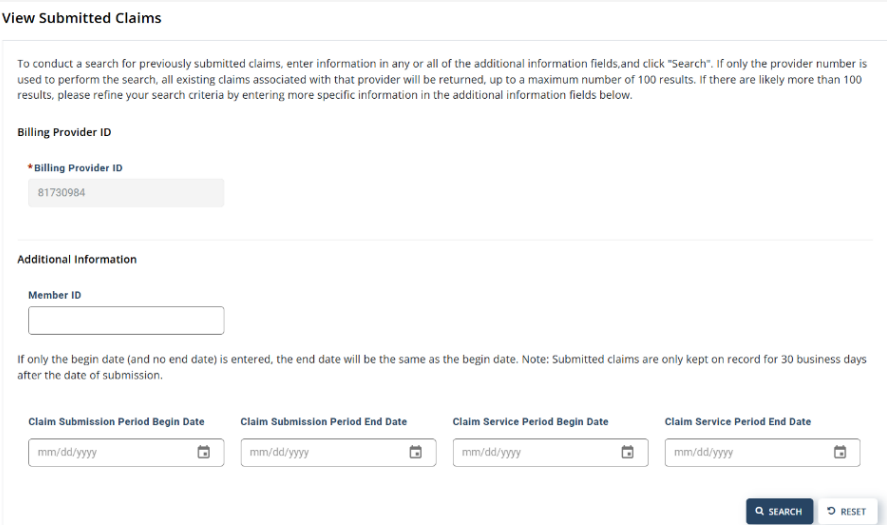
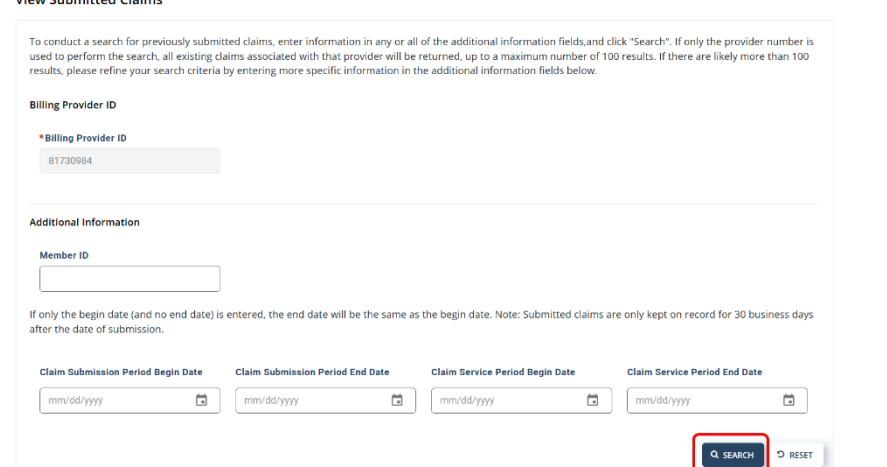
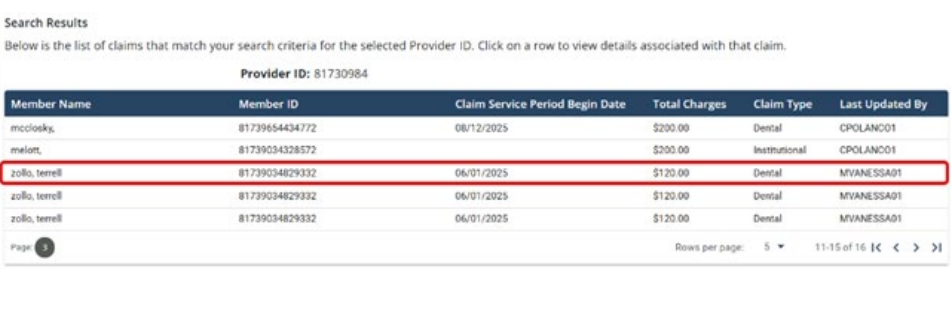
Step	Screenshot
<p>6. When prompted with <i>“Are you sure you want to delete?”</i> select the <b>OK</b> button.</p>	
<p>7. The system displays a <i>“Successfully deleted”</i> message.</p>	

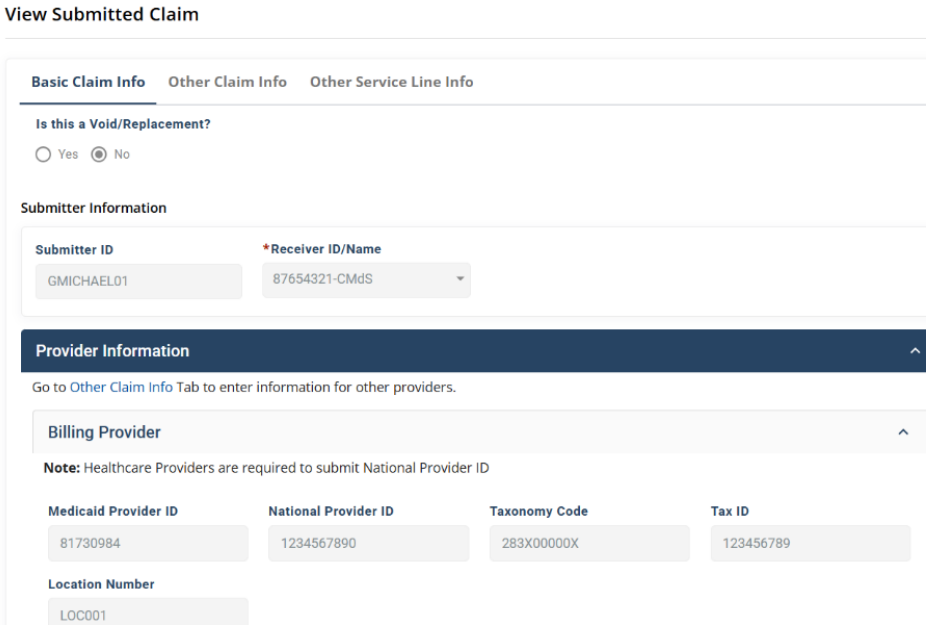
### 5.3 View a Submitted Claim

You can view submitted claims and their attachments online in read-only mode for up to 30 days from the date the claim was submitted.

To view a submitted claim, complete the following steps:

Step	Screenshot
<p>1. On the <b>Manage Claims</b> menu, select <b>View Submitted Claims</b>.</p>	

Step	Screenshot																																				
<p>2. On the <b>View Submitted Claims</b> page, enter your search criteria.</p> <p><b>Note:</b> <i>If only the Provider Number is used to perform the search, all existing claims associated with that provider will be returned, up to a maximum number of 100 results.</i></p>																																					
<p>3. Select the <b>Search</b> button.</p>																																					
<p>4. A list of claims that meet the search criteria will display. Select the row for the claim you wish to view.</p>	 <p><b>Search Results</b> Below is the list of claims that match your search criteria for the selected Provider ID. Click on a row to view details associated with that claim.</p> <p style="text-align: center;"><b>Provider ID: 81730984</b></p> <table border="1"> <thead> <tr> <th>Member Name</th> <th>Member ID</th> <th>Claim Service Period Begin Date</th> <th>Total Charges</th> <th>Claim Type</th> <th>Last Updated By</th> </tr> </thead> <tbody> <tr> <td>mclosky,</td> <td>81739654434772</td> <td>08/12/2025</td> <td>\$200.00</td> <td>Dental</td> <td>CPOLANCO1</td> </tr> <tr> <td>melott,</td> <td>81739034328572</td> <td></td> <td>\$200.00</td> <td>Institutional</td> <td>CPOLANCO1</td> </tr> <tr style="border: 2px solid red;"> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> <tr> <td>zollo, terrell</td> <td>81739034829332</td> <td>06/01/2025</td> <td>\$120.00</td> <td>Dental</td> <td>MVANESSA01</td> </tr> </tbody> </table> <p>Page 1 Rows per page: 5 11-15 of 16</p>	Member Name	Member ID	Claim Service Period Begin Date	Total Charges	Claim Type	Last Updated By	mclosky,	81739654434772	08/12/2025	\$200.00	Dental	CPOLANCO1	melott,	81739034328572		\$200.00	Institutional	CPOLANCO1	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01	zollo, terrell	81739034829332	06/01/2025	\$120.00	Dental	MVANESSA01
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Step	Screenshot
<p>5. The <b>View Submitted Claim</b> page displays. All fields will be read-only.</p>	

## 6 Claim Status Inquiry

A Claim Status Inquiry can be performed as long as the TCN remains valid in Turquoise Claims, even if the claim was originally submitted up to two years ago. The Inquiry screen retrieves the current claim status along with limited claim data, which remains accessible after the 30-day period has passed.

To review the claim status, enter the search criteria and the portal displays the matching claims list, excluding Encounter claims.

At a minimum, either the TCN or the claim service period date(s) must be entered. Entering a TCN will return the exact matching claim. Entering the date and/or member information will return a list of all the claims matching the search criteria. If no End Date is entered, the End Date will either be today's date or one year forward from the Begin Date entered (whichever is less). A maximum of 100 results will be returned; if necessary, refine your search by entering additional search criteria.

The Claims Status Inquiry page has three main panels:

The **Billing Provider ID** section contains information about the billing provider responsible for submitting the claim. The provider ID is a primary field for identification purposes throughout the portal.

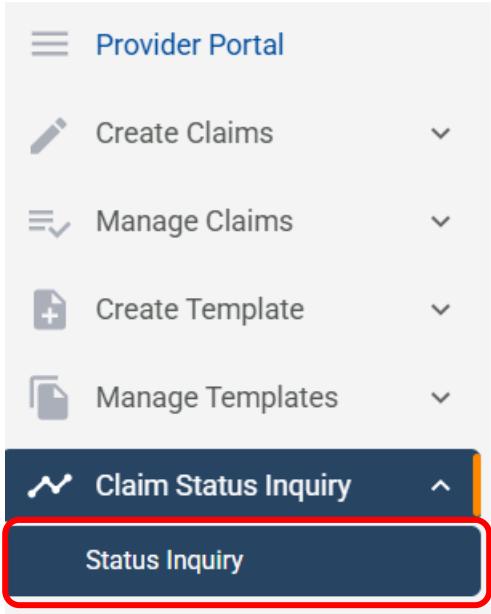
The **Claim Information** section contains details about the specific claim, including service dates, patient account number, prescription number, type of bill, total claim charge amount, and claim status. Additionally, the Service Line Information section provides details about the services rendered. Four fields are required in this section: Procedure Qualifier Code, Line Item Charge Amount, Service Units, and Service Line From Date.

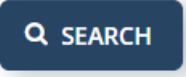
The **Member Information** section provides demographic data for the member.

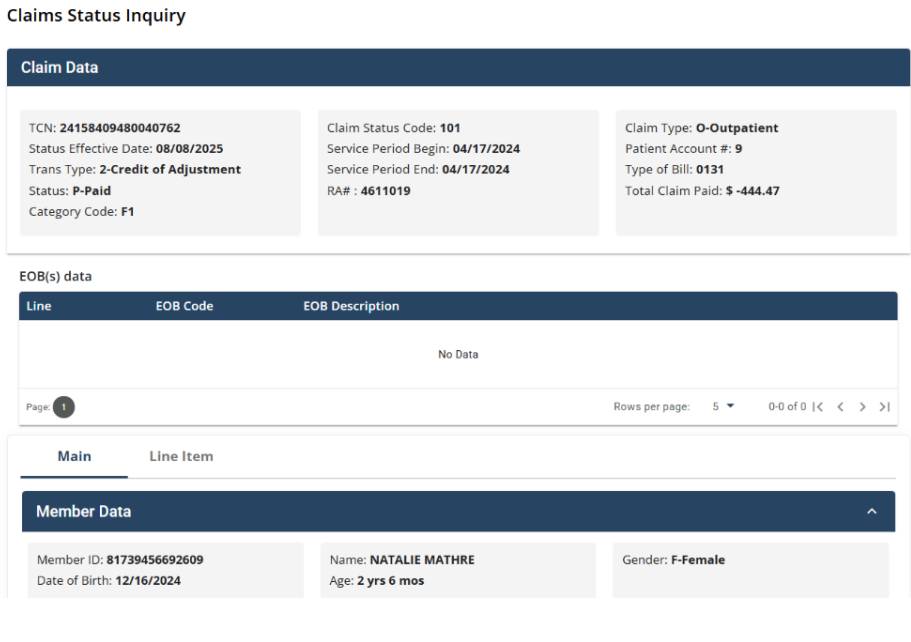
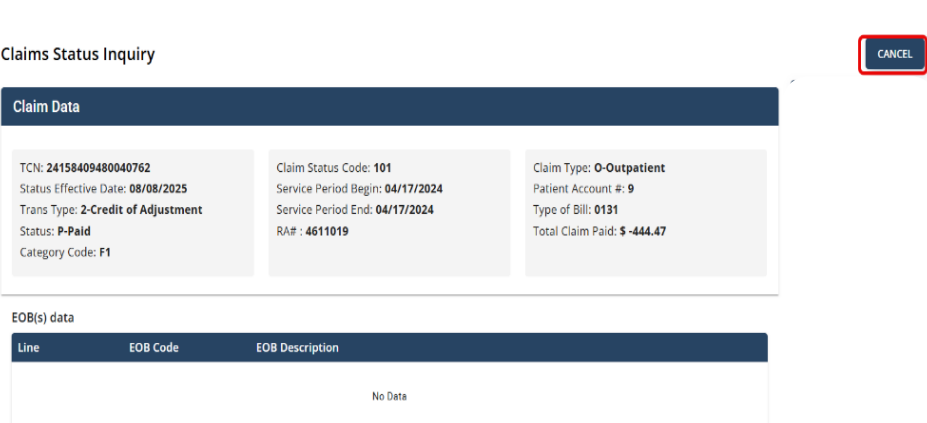
### 6.1 View the Status of a Claim

You can check the status of a previously processed claim online.

To view the status of a claim, complete the following steps:

Step	Screenshot
<p>1. On the <b>Claim Status Inquiry</b> menu, select <b>Status Inquiry</b>.</p>	 <p>The screenshot shows a vertical menu titled 'Provider Portal'. The menu items are: 'Create Claims', 'Manage Claims', 'Create Template', 'Manage Templates', 'Claim Status Inquiry', and 'Status Inquiry'. The 'Claim Status Inquiry' item is highlighted with a dark blue background and a white arrow pointing up. The 'Status Inquiry' sub-item is highlighted with a red rectangular border.</p>

Step	Screenshot																												
<p>2. On the <b>Claims Status Inquiry</b> page, enter your search criteria.</p>	<p><b>Claims Status Inquiry</b></p> <p>To conduct a claim inquiry, please enter the TCN or the following combination of Member ID, Member Last Name, and Member Date of Birth and Dates of Services. Entering date range with Member information criteria will return a list of all the claims matching the search criteria. A maximum of 100 results will be returned; if necessary, refine your search by entering additional search criteria.</p> <p><b>Billing Provider ID</b> <input type="text"/></p> <p>Please enter either a TCN or a Claim Service Period Begin Date range with Member information criteria. Claim Service Period Begin Date applies to the earliest date of service on the claim. If no End Date is entered, the End Date will be either today's date or one year forward from the Begin Date entered (whichever is less).</p> <p><b>Claim Information</b></p> <p>TCN <input type="text"/> Claim Service Period Begin Date <input type="text"/> Claim Service Period End Date <input type="text"/> Patient Account Number <input type="text"/> Prescription Number <input type="text"/></p> <p>Type Of Bill <input type="text"/> Total Claim Charge Amount <input type="text"/> Claim Status <input type="text"/></p> <p><b>Service Line Information</b> <input type="text"/></p> <p><b>Member Information</b> <input type="text"/></p>																												
<p>3. Select the <b>Search</b> button.</p>																													
<p>4. A list of claims that meet the search criteria will display. Select the row for the claim you wish to view.</p>	<p><b>Search Results</b></p> <p>Below is a list of claims that met your search criteria for the selected provider ID. Click on a row to view details associated with that claim. Please note that actual payment amounts for claims in a "To Be Paid Status" are subjected to further review, and may change based on adjustments, recoupments, or other necessary updates.</p> <p>Provider ID: 81730984</p> <table border="1"> <thead> <tr> <th>TCN</th> <th>Service Period</th> <th>Claim Status</th> <th>Total Charge Amount</th> <th>Payment Amount</th> <th>Member Name</th> <th>Member ID</th> </tr> </thead> <tbody> <tr> <td>24158409480040762</td> <td>04/17/2024 - 04/17/2024</td> <td>P-Paid</td> <td>\$ 0</td> <td>\$ -444.47</td> <td>NATALIE, MATHRE</td> <td>81739456692609</td> </tr> <tr> <td>24158409480040763</td> <td>04/17/2024 - 04/17/2024</td> <td>P-Paid</td> <td>\$ 0</td> <td>\$ 463.32</td> <td>NATALIE, MATHRE</td> <td>81739456692609</td> </tr> <tr> <td>24115300951000040</td> <td>04/17/2024 - 04/17/2024</td> <td>P-Paid</td> <td>\$ 0</td> <td>\$ 444.47</td> <td>NATALIE, MATHRE</td> <td>81739456692609</td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 1-3 of 3   &lt; &gt;  </p>	TCN	Service Period	Claim Status	Total Charge Amount	Payment Amount	Member Name	Member ID	24158409480040762	04/17/2024 - 04/17/2024	P-Paid	\$ 0	\$ -444.47	NATALIE, MATHRE	81739456692609	24158409480040763	04/17/2024 - 04/17/2024	P-Paid	\$ 0	\$ 463.32	NATALIE, MATHRE	81739456692609	24115300951000040	04/17/2024 - 04/17/2024	P-Paid	\$ 0	\$ 444.47	NATALIE, MATHRE	81739456692609
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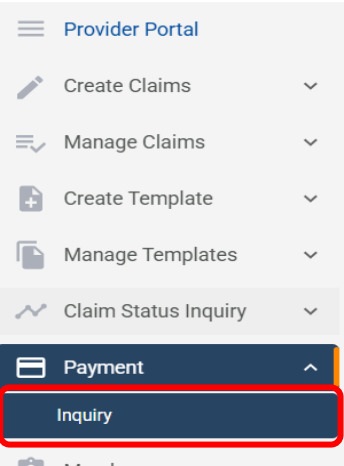
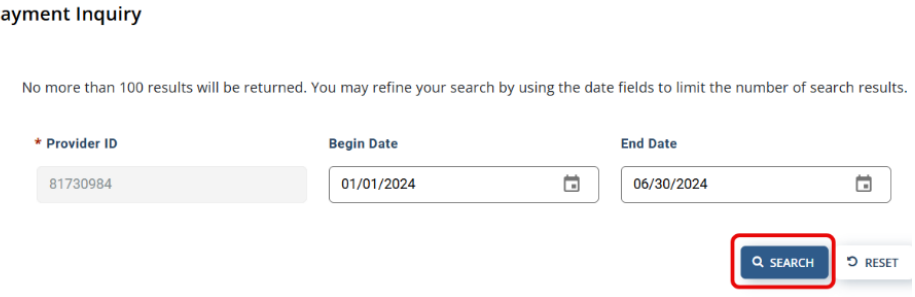
Step	Screenshot
<p>5. On the <b>Claim Status Inquiry</b> page, review the claim information. This information cannot be edited.</p>	 <p>The screenshot shows the 'Claims Status Inquiry' page. It features a 'Claim Data' section with the following information:</p> <ul style="list-style-type: none"> <li>TCN: 24158409480040762</li> <li>Status Effective Date: 08/08/2025</li> <li>Trans Type: 2-Credit of Adjustment</li> <li>Status: P-Paid</li> <li>Category Code: F1</li> <li>Claim Status Code: 101</li> <li>Service Period Begin: 04/17/2024</li> <li>Service Period End: 04/17/2024</li> <li>RA#: 4611019</li> <li>Claim Type: O-Outpatient</li> <li>Patient Account #: 9</li> <li>Type of Bill: 0131</li> <li>Total Claim Paid: \$ -444.47</li> </ul> <p>Below this is an 'EOB(s) data' table with columns for Line, EOB Code, and EOB Description. The table is currently empty, showing 'No Data'. At the bottom, there is a 'Member Data' section with the following information:</p> <ul style="list-style-type: none"> <li>Member ID: 81739456692609</li> <li>Date of Birth: 12/16/2024</li> <li>Name: NATALIE MATHRE</li> <li>Age: 2 yrs 6 mos</li> <li>Gender: F-Female</li> </ul>
<p>6. Select the <b>Cancel</b> button to return to the <b>Claim Status Inquiry</b> page.</p> <p><b>Note:</b> <i>If a list of search results is displayed, selecting Cancel returns to the inquiry page with that list.</i></p>	 <p>This screenshot is identical to the one above, but it includes a red rectangular box highlighting the 'CANCEL' button located in the top right corner of the page.</p>

## 7. Payment Information

Users may view information on payments that have been received. The payment cycle is weekly. To review payment information, enter the search criteria and the portal displays the matching payment list. You can also view the Print Image Remittance Advice (RA) which is available in a PDF format. The remittance advice will provide detailed information on each claim.

### 7.1 Viewing Payment Information

To view payment Information, complete the following steps:

Step	Screenshot
<p>1. On the <b>Payment</b> menu, select <b>Inquiry</b>.</p>	 <p>The screenshot shows a vertical menu titled 'Provider Portal'. The menu items are: 'Create Claims', 'Manage Claims', 'Create Template', 'Manage Templates', 'Claim Status Inquiry', 'Payment', and 'Inquiry'. The 'Payment' item is highlighted with a dark blue background and a white arrow pointing up. The 'Inquiry' item is highlighted with a dark blue background and a white arrow pointing down. A red rectangular box is drawn around the 'Inquiry' item.</p>
<p>2. On the <b>Payment Inquiry</b> page, enter the search criteria and select the <b>Search</b> button.</p>	 <p>The screenshot shows the 'Payment Inquiry' page. At the top, it says 'No more than 100 results will be returned. You may refine your search by using the date fields to limit the number of search results.' Below this are three input fields: 'Provider ID' (with a red asterisk), 'Begin Date', and 'End Date'. The 'Provider ID' field contains the value '81730984'. The 'Begin Date' field contains '01/01/2024' and the 'End Date' field contains '06/30/2024'. At the bottom right, there is a blue 'SEARCH' button with a magnifying glass icon and a grey 'RESET' button with a circular arrow icon. A red rectangular box is drawn around the 'SEARCH' button.</p>

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<p>3. A list of payments that meet the search criteria for the selected Provider ID are displayed in the Search Results section.</p> <p><b>Note:</b> <i>No more than 100 results will be displayed. You can refine your search by using the date fields to limit the number of search results.</i></p>	<p>Search Results</p> <p>Below is a list of payments that met your search criteria for the selected provider ID. Print image RAS are available in PDF format. PDF format files can be read using the free Adobe Acrobat Reader from Adobe.</p> <p style="text-align: center;"><b>Provider ID: 81730984</b></p> <table border="1"> <thead> <tr> <th>Paid Date</th> <th>Check / EFT Number</th> <th>Reimbursement Amount</th> <th>Print Image RA</th> </tr> </thead> <tbody> <tr> <td>06/28/2024</td> <td></td> <td>\$16,384.43</td> <td><a href="#">4615688</a></td> </tr> <tr> <td>06/24/2024</td> <td></td> <td>\$13,146.32</td> <td><a href="#">4613320</a></td> </tr> <tr> <td>06/17/2024</td> <td></td> <td>\$10,867.06</td> <td><a href="#">4611019</a></td> </tr> <tr> <td>06/10/2024</td> <td></td> <td>\$21,825.19</td> <td><a href="#">4608437</a></td> </tr> <tr> <td>05/31/2024</td> <td></td> <td>\$14,904.82</td> <td><a href="#">4605772</a></td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 1-5 of 26 &lt; &gt;  </p>	Paid Date	Check / EFT Number	Reimbursement Amount	Print Image RA	06/28/2024		\$16,384.43	<a href="#">4615688</a>	06/24/2024		\$13,146.32	<a href="#">4613320</a>	06/17/2024		\$10,867.06	<a href="#">4611019</a>	06/10/2024		\$21,825.19	<a href="#">4608437</a>	05/31/2024		\$14,904.82	<a href="#">4605772</a>
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<p>4. To view the Remittance Advice, select the <b>Print Image RA</b> link. The Remittance Advice will be displayed as a PDF in Adobe Reader.</p>	<p>Search Results</p> <p>Below is a list of payments that met your search criteria for the selected provider ID. Print image RAS are available in PDF format. PDF format files can be read using the free Adobe Acrobat Reader from Adobe.</p> <p style="text-align: center;"><b>Provider ID: 81730984</b></p> <table border="1"> <thead> <tr> <th>Paid Date</th> <th>Check / EFT Number</th> <th>Reimbursement Amount</th> <th>Print Image RA</th> </tr> </thead> <tbody> <tr> <td>12/16/2024</td> <td></td> <td>\$29,255.52</td> <td><a href="#">4672841</a></td> </tr> <tr> <td>12/09/2024</td> <td></td> <td>\$166,772.48</td> <td><a href="#">4670422</a></td> </tr> <tr> <td>11/29/2024</td> <td></td> <td>\$14,922.44</td> <td><a href="#">4668070</a></td> </tr> <tr> <td>11/25/2024</td> <td></td> <td>\$16,552.81</td> <td><a href="#">4665686</a></td> </tr> <tr> <td>11/18/2024</td> <td></td> <td>\$17,743.51</td> <td><a href="#">4663298</a></td> </tr> </tbody> </table> <p>Page: 1 Rows per page: 5 1-5 of 59 &lt; &gt;  </p>	Paid Date	Check / EFT Number	Reimbursement Amount	Print Image RA	12/16/2024		\$29,255.52	<a href="#">4672841</a>	12/09/2024		\$166,772.48	<a href="#">4670422</a>	11/29/2024		\$14,922.44	<a href="#">4668070</a>	11/25/2024		\$16,552.81	<a href="#">4665686</a>	11/18/2024		\$17,743.51	<a href="#">4663298</a>
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