



A handy reference for the S.C. Medicaid Web-based Claims Submission Tool:

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Updated 06/11/2012

Lists

The *Lists* feature allows you to create lists of useful claims information used repeatedly when entering data on the Claims Entry screen. Using the lists feature will both shorten the time it takes to enter a claim and increases accuracy of claims entry.

All lists work basically the same way: Choose a provider to work with from the drop-down box at the top of the screen and click **Select**. Click **Lists** on the Menu and select a list type (e.g., Beneficiary, Provider, Diagnosis Codes, etc.) from the submenu. An example of a Beneficiary List is shown at the right. *(Note: A provider must be chosen from the drop-down box or the Web Tool functions will not be accessible.)*

View List

The lower portion of the *Lists* screen displays current active entries on the list.

- To view the full list, click the **Show All** button.
- To view only active entries, click the **Show Active** button.

Add to List

1. Type the beneficiary's information in the fields provided in the top half of the screen.
2. Click **Add**.

Edit List

1. Click the **Edit** button to the far right of the entry you wish to edit. The next screen will allow you to modify that entry.
2. Make your changes in the fields provided.
3. Click **Update**. This will return you to the **Add/View** Screen.

Delete from List

1. Click the **Delete** button in the last column if you would like to delete an entry from your list.
2. A warning window will appear asking if you are sure you want to delete the entry.
3. Click **OK** to delete the entry.
4. Click **Cancel** to return to the list.

Claims Entry

From the Menu, click **Claims Entry** and then select the type of claim, CMS-1500 (Professional) or UB-04 (Hospital), from the submenu that will appear. The upper portion of the *Pending Claims* screen lists all drafts (incomplete) claims. The lower portion allows lists all completed claims waiting to be submitted.

Claims Entry works the same for CMS-1500 and UB-04 claims. The CMS-1500 claim type is used as an example in the information below.

Add a Claim

1. Click the **Enter New Claim** button to open the claim form.
2. Type in your data as you would any other claim. You will encounter drop-down menus, *Get from List* links, navigation and **Copy** buttons in some fields as described below.
3. Click the **Finish Claim** button on the *Other Coverage* tab to save the claim.

Copy a Claim

1. Click the **Radio** button next to the claim to be copied.
2. Choose the **Copy Sel.** button. (Note: Once the claim is copied, there will be a duplicate claim in your list. Be sure to edit the duplicate claim in order to avoid sending a duplicate.)

Delete a Claim

1. Click the **Radio** button next to the claim you wish to delete.
2. Click the **Delete Sel.** button. The claim will be deleted.

View/Edit a Claim

1. Click the **Radio** button next to the claim you wish to view.
2. Click the **View Sel.** button. The claim will be displayed on your screen.

Remember - A data purge will run the first day of each month to delete all pending claims that are more than three months old (as determined from the date in the *Last Changed* field).

Search by Name

1. Enter the first or last name of the beneficiary's claim you wish to view into the field next to the **Search Name** button.
2. Click the **Search Name** button. Claims associated with the name search will appear.

CMS-1500 Pending Claims

Buttons: Enter New Claim, Copy Sel., Delete Sel., View Sel. Search Name

Draft (Incomplete) Claims

Claim ID	Name	Acct Num	Medicaid ID	Total Chrg	Last Changed
<input type="checkbox"/> 333679	Carter,	778			2011-07-11
<input type="checkbox"/> 333689	Carter,	778			2011-07-15
<input type="checkbox"/> 333791	Carter,	778			2011-07-15
<input type="checkbox"/> 333959	Porter,				2011-07-22

Completed Claims

Claim ID	Name	Acct Num	Medicaid ID	Total Chrg	Last Changed
<input type="checkbox"/> 334033	Hinson,			100.00	2011-07-27
<input type="checkbox"/> 333670	Porter,			79.00	2011-07-11
<input type="checkbox"/> 333671	Rogers,			78.00	2011-08-05
<input type="checkbox"/> 334032	Rogers,			1000.00	2011-07-27

SOUTH CAROLINA Healthy Connections MEDICAID

Please select a provider to work with: <Select One> Select

Logout Home

Change PWD Reports CMS-1500 Claim Entry Lists History

Beneficiary Info Provider Info Misc Diagnosis Codes Detail Lines Other Coverage

Beneficiary Information [Get from List]

*Medicaid Num. *Date of Birth First Name MI *Last Name Gender

Street Addr. City State Zip Code

Medical Record Number Patient Account

Go to Provider Info

Callouts:

- Get from List link: Click to choose from lists you created.
- Drop-down: Click to choose from predefined system lists.
- Navigation buttons: Click to advance to the next tab to add more claim information.

Claim Submission

The Claim Submission feature allows you to transmit the claims you have entered to South Carolina Medicaid.

Claim Submission works the same way for CMS-1500 and UB-04 claims.

1. From the Menu, click on **Claims Submission**. This will take you to the *Claims Submission* screen.
2. Type your Contact Information in the fields provided or select from Lists by clicking on the *Get from List* link.
3. In the Claims Submission Information section, click on the **Radio** button next to the type of claims you want to submit. (Note: To submit only specific claims within a claim type, click the **Edit** button to bring up the full list of claims. From there, you can select the desired claims to submit by clicking on the **Claim Link ID**.)
4. Click the **Submit** button. A popup screen will ask if you are sure you want to send the claims.
5. Click **Yes**. A screen displaying the batch ID will appear.

Select Contact Information from LISTS.

- A Claim Type selection is required.
- Enter digits only for the Area Code (i.e. 803) for the area code, and 1231234 for the local part.
- The Phone Number may be entered as either 1231234 or formatted as 123-1344.
- The Phone Extension is optional but may contain up to 6 digits.

Select Claim Type	Claim Type	Number Of Claims	Total Of Claims
<input type="radio"/>	CMS 1500	4	\$1,257.00
<input type="radio"/>	UB-04	2	\$200.00

History

The History feature allows you to see all submitted batches, including the batch ID, date submitted, name of the submitter, the number of claims that were sent, and the total dollar value of the claims. This information will remain for three months before it is automatically purged (deleted). You can view the specific claims in the batch, and you can either print them or copy them for reuse in a new claim.

From the Menu, click **History**. A submenu will appear. Click the desired claim type (example: *CMS-1500 Submitted Batches*).

View Claims

1. Click the **Claim Link ID** for to the desired batch under the *View Batch Detail* column.
 2. A *Batch Details* screen will appear that lists all claims in that batch.
 3. To view a specific claim, select the **Claim Link ID** of the desired claim under the *View Claim Detail* column. (Note: To view the detail on all of the displayed claims, click the **View All** button.)
- Note: All submitted claims and submitted batches that are more than three months old will automatically purge (delete) based on the date listed in the *Date Submitted* field.

Copy All Claims in the Batch	View Batch Detail	Date Submitted	Number Of Claims	Total Amount Of All Claims	Old Batch ID	User Created
Copy	30168	2010-04-29 21:24:54.0	20	\$3,100.00	W110045C10001119	W110045C1
Copy	30167	2010-04-25 08:42:24.0	4	\$440.00	W110045C10001115	W110045C1
Copy	30166	2010-04-24 17:35:43.0	11	\$2,310.00	W110045C10001114	W110045C1
Copy	30165	2010-04-21 20:08:35.0	8	\$880.00	W110045C10001111	W110045C1
Copy	30164	2010-04-19 18:02:57.0	9	\$990.00	W110045C10001109	W110045C1
Copy	30163	2010-04-17 15:48:04.0	5	\$1,050.00	W110045C10001107	W110045C1
Copy	30162	2010-04-15 19:30:44.0	6	\$660.00	W110045C10001105	W110045C1
Copy	30161	2010-04-10 21:06:14.0	7	\$1,170.00	W110045C10001100	W110045C1
Copy	30160	2010-04-08 22:02:11.0	11	\$1,229.95	W110045C10001098	W110045C1
Copy	30159	2010-04-06 20:05:46.0	3	\$530.00	W110045C10001096	W110045C1
Copy	30158	2010-04-04 18:22:00.0	60	\$1,197.00	W110045C10001094	W110045C1
Copy	30157	2010-04-01 20:17:37.0	9	\$990.00	W110045C10001091	W110045C1

Copy Claim

1. Select the **Claim Link ID** of the batch containing your desired claim. The *Batch Details* screen will appear with a list of the claims from the selected batch.
2. Click the **Copy** button beside the desired claim. The list of claims on the *Pending Claims* screen will be updated with a copy of the selected claim. You may then select and edit the claim as desired.

Status

The Status feature allows you to check the status for CMS-1500, UB-04, Premium Payment, and the associated adjustments for these claim types regardless of the submission method of the claim. This information will remain available to search for six months (from the processing/check date) before it is automatically purged (deleted). You can view the status of specific claims, or you can enter search criteria to see a range of claims.

From the Menu, click **Status**.

Search for Claims Status

1. Narrow your search by placing a check mark in the **Show/Hide Additional Search Options** box. You may then enter a beneficiary's Medicaid ID number, a CCN, a Dates of Service range, an Amount Billed range, or a combination of the Dates of Service and the Amount Billed. (Note: If you choose to use the Amount Billed criterion for your search, it **MUST** be in that range or the system will not find a match.)
2. Click the **Search** button to view the status of all claims that satisfy your search criteria. (Note: A warning message will display if no matching claims are found.)
3. Click the **Clear** button to clear all of your search criteria. You can now enter new criteria.

Sort Search Results

1. Click on a hyperlinked column heading to re-sort your search results by category.

Print Search Results

1. Open the **File** menu on your browser bar and select **Print** to print the search results.

Note: You must set your printer to Landscape to view all columns on the *Claims Status* screen.

Completing additional search fields will narrow your search.

CCN	Beneficiary Name	Medicaid ID	Amount Billed	Date of Service	Check Date	Check Num	Payment Type	Total	Claim Status	Claim Status Date	Original CCN
			\$150.20	05/19/2011 to 05/19/2011				50.00	Denied	06/29/2011	
			\$559.80	12/29/2010 to 12/29/2010				50.00	Denied	06/29/2011	

Reasons May Include:

- Claim is older than six months from the processing/check date.
- Claim has not been adjudicated.
- Invalid data was entered (i.e., incorrect Medicaid ID).
- The search criteria are too narrow.

Show/Hide Additional Search Options

CCN	Beneficiary Name	Medicaid ID	Amount Billed	Date of Service	Check Date	Check Num	Payment Type	Total	Claim Status	Claim Status Date	Original CCN
140000Z	BURGESS		\$6,974.70	06/16/2011 to 06/18/2011	07/01/2011		ACH	\$4,895.48	Paid	06/27/2011	
140000Z	CORJO		\$11,036.10	06/15/2011 to 06/18/2011	07/01/2011		ACH	\$3,500.70	Paid	06/27/2011	
140000Z	DAVIS		\$53,699.50	06/10/2011 to 06/18/2011	07/01/2011		ACH	\$10,284.40	Paid	06/27/2011	
140000Z	SNYDER		\$6,877.50	06/16/2011 to 06/18/2011	07/01/2011		ACH	\$3,500.70	Paid	06/27/2011	
140000Z	TURNER		\$25,213.90	06/13/2011 to 06/18/2011	07/01/2011		ACH	\$6,197.83	Paid	06/27/2011	
140000Z	V		\$14,701.00	06/15/2011 to 06/18/2011	07/01/2011		ACH	\$9,666.45	Paid	06/27/2011	
140000Z	KESECKE		\$5,088.10	06/16/2011 to 06/17/2011	07/01/2011		ACH	\$3,500.70	Paid	06/27/2011	

Claims Status Results

Claims Status results will reflect one of the following five options:

1. **Paid** – Claim payment has been made. The claim has gone through both the adjudication and the payment cycles.
2. **Approved** – Claim has processed and payment is scheduled. The claim has only gone through the adjudication cycle and is pending going through the payment cycle.
3. **Rejected** – Claim has processed through the payment cycle and an
4. **Denied** – Claim has been adjudicated, edit code(s) has been assigned, and approval was denied. The claim has gone through the adjudication cycle, been denied for payment, but still must complete the payment cycle.
5. **Suspended** – Claim is in process. The claim attempted to complete the adjudication cycle, but has been suspended. It has been referred to SC Medicaid for resolution.

CLAIMS STATUS	CCN	Amount Billed	Dates of Service	Check Date	Check Number	Payment Type	Total Payment	Claim Status Date
PAID	✓	✓	✓	✓	✓	✓	✓	BLANK
APPROVED	✓	✓	✓	BLANK	BLANK	BLANK	✓	✓
REJECTED	✓	✓	✓	✓	BLANK	BLANK	BLANK	BLANK
DENIED	✓	✓	✓	BLANK	BLANK	BLANK	BLANK	✓
SUSPENDED	✓	✓	✓	BLANK	BLANK	BLANK	BLANK	✓

Eligibility

Checking eligibility is fast and efficient with the Web Tool. You may check eligibility individually, or as a batch for multiple recipients.

Verify One Recipient

From the Menu, click **Eligibility**, and from the submenu choose **Single Query**, to retrieve the *Eligibility Verification Inquiry* screen.

1. Enter the one of the following in the fields indicated: Medicaid I.D.; SSN and Date of Birth; or Name and Date of Birth along with the Date of Service (auto populates with today's date).

Note: The Web Tool will return SSN information only if you search eligibility using SSN.

2. Click the **Check Eligibility** button. The *Eligibility Verification Inquiry: Selection Summary* screen will appear. Place a check mark in the box beside the beneficiary' Medicaid ID number.

3. Click the **Display** button. The *Eligibility Verification Results* screen will appear that contains the eligibility information of the beneficiary in question.

- If you wish to check eligibility for another recipient, click the **Back** link. This will return you to the original screen.
- If you wish to add this individual to your Beneficiary List, click the **Add Beneficiary** link.

Verify Multiple Recipients

From the Menu, click **Eligibility**, and then click **Multiple Queries** to retrieve the *Eligibility Verification Inquiry Results* screen.

1. Search by SC Medicaid ID, Beneficiary List, Name and DOB, or SSN and DOB. (Note: You are able to select from the Beneficiary List to populate the Medicaid ID.)
 - Click on the **Beneficiary List** button to display your Beneficiary List. Select up to 50 beneficiaries and click the **Populate Query** button to add the beneficiaries to the *Selection Criteria* screen.
 - Each time you select from the Beneficiary List, the system overwrites the previous entries.
 - To add a new beneficiary to the selection screen, type the Medicaid ID in the next available space.

Note: For more accurate results, enter the Date of Service (DOS) in the search criteria to receive eligibility verification for a specific DOS.

2. Click the **Submit** button. The *Eligibility Verification Inquiry: Selection Summary* screen will appear and display eligibility information for the entire batch of beneficiaries.
3. Click the **Radio** button next to individual beneficiary name(s).
 - Click the **Display** button to view a complete list of eligibility information for an individual.
 - Click **Display All** to view eligibility information provided for every beneficiary shown.

Eligibility Verification Inquiry

Please enter a valid SC Medicaid ID or SSN and DOB or Name and DOB.

Selection Criteria

Date of Service: 06/30/2011 **Beneficiary List** Change Dates Submit Clear

Date of Service	Key Type	Key Value	Birth Date	Date of Service	Key Type	Key Value	Birth Date
06/30/2011	Medicaid	1451105905		06/30/2011	Medicaid		
06/30/2011	Medicaid			06/30/2011	Medicaid		
06/30/2011	SSN			06/30/2011	Medicaid		
06/30/2011	Name			06/30/2011	Medicaid		
06/30/2011	Medicaid			06/30/2011	Medicaid		
06/30/2011	Medicaid			06/30/2011	Medicaid		

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Please select a provider to work with: <Select One> Select

Logout Home

Change PWD Reports Eligibility Claims Entry Claim Submission Lists History

Eligibility Verification Inquiry: Selection Summary

There are several ways to view individual or multiple query details. Individual details may be displayed by clicking on the hyperlink within the Medicaid ID box or by clicking on one of the checkboxes and then click the 'Display' button. Multiple details may be selected by clicking multiple checkboxes and then click the 'Display' Button or to see all details, click the 'Display All' button.

Selection Criteria

Date of Service: 06/30/2011 Provider ID: 1689624900 Display Display All Select All

Set	MID	Name	DOB	Status	Gender	DOS	Set	MID	Name	Status	Gender	DOS	
<input type="checkbox"/>		GRAYSON	1022	INELIGIBLE	FEMALE	06/30/2011	<input type="checkbox"/>		PORTER	ELIGIBLE	FEMALE	06/30/2011	
<input type="checkbox"/>		1. The Subscriber entered was not found in our database. 2. Medicaid ID:					06/30/2011	<input type="checkbox"/>		1. The Subscriber entered was not found in our database. 2. Medicaid ID:			06/30/2011
<input type="checkbox"/>		ROVERS	1946	ELIGIBLE	MALE	06/30/2011	<input type="checkbox"/>		HINSON	INELIGIBLE	MALE	06/30/2011	

Display Display All Select All Clear Back

This beneficiary is "eligible."

SOUTH CAROLINA **Healthy Connections** MEDICAID

Please select a provider to work with: <Select One> Select

Logout Home

Change PWD Reports Eligibility Claims Entry Claim Submission Lists History

e-Remit

The purpose of an Electronic Remittance Package (e-Remit) is to show all payments, denials, and any accompanying claims data submitted to South Carolina Medicaid. Remittance advices are available for viewing, saving, and printing on the Web Tool.

Viewing e-Remits

From the Menu, click **e-Remit** to retrieve the *Payment Remit* screen.

Note: Remember to choose a provider from the drop-down menu at the top of the screen and click **Select**.

1. Click the hyperlink for your desired Remit. A File Download box will appear.

Payment Remit

Available Remits for:

07-01-2011	03-25-2011
06-24-2011	03-18-2011
06-17-2011	03-11-2011
06-10-2011	03-04-2011
06-03-2011	02-25-2011
05-27-2011	02-18-2011
05-20-2011	02-11-2011
05-13-2011	02-04-2011
05-06-2011	01-28-2011
04-29-2011	01-21-2011
04-22-2011	01-14-2011
04-15-2011	01-07-2011
04-08-2011	
04-01-2011	

Select the e-Remit you wish to view/print/download from the list.

File Download

Do you want to open or save this file?

Name: REMIT_07012011
Type: Adobe Acrobat Document
From: 130.127.160.44

Open Save Cancel

While files from the Internet can be useful, some files can potentially harm your computer. If you do not trust the source, do not open or save this file. [What's the risk?](#)

2. Click **Open** to display your selected e-Remit. The Remit will appear in PDF format.

Printing e-Remits

1. Select **File** from the browser bar.
2. Select **Print** from the **File** menu.

Remember to set page scaling to **“Shrink to Printable Area”** to ensure all content is visible.

Saving e-Remits

1. After clicking the desired e-Remit, click **Save** from the File Download box.
2. Choose your desired drive or save destination.
3. Click **Save**.

PROVIDER ID	DEPT OF HEALTH AND HUMAN SERVICES	PROFESSIONAL SERVICES	PAYMENT DATE	PAGE
140109220	010300A	060110 58340	07/08/2011	1
G11078213	018900A	090810 99214		
G11023583	019000A	082610 43760		
140112397	810400A	101810 99214		
140112599	810600A	102210 99213		
140113409	811000A	110910 99214		
140114609	812100A	110710 99214		
G1138207	005000A	110910 99213		
140115196	812300A	121610 99245		
140115495	810700A			

