

QUICK START GUIDE

EDI Claims Link for Windows® version 3.5

System Requirements

- Operating system: Windows XP or later
- Computer/Processor: Pentium 2, 233 MHz or greater
- Memory: 64MB Ram
- Minimum Screen Resolution: 1024 x 768
- Initial application set up takes up less than 5MB hard drive space. Storage space will increase as you add data to the program
- Internet Explorer 6.0 or later

Windows Vista/7 specifics:

- It is highly recommended that the EDI Claims Link software, or any updates that may be released, be installed and executed using a profile with full administrative rights.
- Windows Vista users may need to install the Microsoft .Net Framework 3.5 onto your computer before installing EDI Claims Link 3.1, available at: <http://www.microsoft.com/downloads/details.aspx?familyid=262D25E3-F589-4842-8157-034D1E7CF3A3&displaylang=en> (ValueOptions is only forwarding this as a reference, and ValueOptions is not responsible for any changes you make to your own computer.)

Installing The Software

- Download the software from <http://www.valueoptions.com/providers/ProCompliance.htm> and save it to your desktop.
- Double click downloaded file on your desktop to install the software.
- Follow the prompts in the installation program to complete the process.

Running the Software

The current version of EDI Claims Link does not create a shortcut on your desktop for the software. You will need to browse manually to the installation directory, and create a shortcut manually:

- Double click on "My Computer" on your desktop
- Double click on "Local Disk C:"
- Double click on the folder "Program Files"
- Double click on the folder "ValueOptions"
- Double click on the folder "EDI Claims Link 3"
- Locate the file called "EDI Claims Link 3"
 - o You can double click the file "EDI Claims Link" to start the software
 - o If you want to create a shortcut on your desktop, use your right mouse button to click and hold on the "EDI Claims Link 3" file, drag it to an empty portion of your desktop, release the right mouse button, then click the left mouse button on "Create Shortcut Here"

To Log in The First Time

The first time you access EDI Claims Link for Windows, the Submitter Maintenance Screen displays with a welcome message. (Refer to *Identifying and Adding the Submitter* section for details.)

The Submitter ID **must match** the ID you have for the ValueOptions ProviderConnect website.



The Warning Icon indicates missing information or incorrect entry. To view message, hover the cursor over the icon.

To Move among Fields

The **<TAB>** key is used to move from field to field. Pressing the **<SHIFT>** and **<TAB>** keys at the same time moves the cursor back to the previous field.

Many of the fields have drop-down reference boxes. Clicking on the arrow at the end of the field displays a list of valid entries. Selecting the appropriate choice by highlighting it places the text in the field.

Clicking the down arrow beside the date field displays a **Calendar** to help you select the correct date, or you can type the date in the date fields using the format **MMDDCCYY**. All date fields require the century in addition to the year (e.g., 01/01/2007).

To Identify and Add a Submitter

From the Main Screen, click **Tools**, and then click **Submitter Data Maintenance**.

On the **Submitter List** screen, double-click **Add Submitter**, or double click an existing submitter name.

On the **Submitter Maintenance** screen, type the **Submitter ID** that matches the ProviderConnect website.

Type the submitter's password, and then type it again in the **Confirm Password** field. Enter the submitter name.

Assign a contact person and enter his/her name and telephone #.

Click **OK**.

The name of the submitter now displays in the **Submitter List** window.

To Add a Provider to the Provider Database

From the Main Screen, click **Tools**, and then click **Provider Data Maintenance**, or click **Add Provider** under the EDI Claims Link Tasks pane to go directly to the Provider Maintenance Screen.

Create a billing record, to indicate the address your claims payment will be sent to:

Demographics

1. Record type: "Billing Provider"
2. Type the Provider's last name or the Organization name
3. Enter the Provider's first name and middle initial.
4. Enter the Billing Provider's address, this address cannot be a PO Box.
5. Type the name of the office contact person.
6. Type the Provider's office phone number.
7. Enter the Provider's fax phone number.

Identification Numbers

1. Select the type of Provider ID number used, Employer Identification Number (or Federal Tax ID number), or the Provider's Security Social Number, from the drop-down menu in the Provider ID box. Type the appropriate ID number in the unlabeled box next to the right of Provider ID
2. Enter your National Provider ID (NPI) number into the NPI field.
3. Type the Taxonomy Code (if applicable)
4. Click **OK**. The name of the Provider displays in the Provider List window.

To Add a Patient to the Patient Database

1. From the Main Screen, click **Tools**, and then click **Patient Data Maintenance** or click **Add Patient** under the EDI Claims Link Tasks to go directly to the Patient Maintenance Screen (Step 3).
2. If you clicked Patient Maintenance located under **Tools**, The Patient List screen displays. Click **Add Patient** located under the Patient List screen or click **ADD Patient** located under the EDI Claims Link Tasks pane.
3. The Patient Maintenance Screen displays.
4. Enter the patient's demographics and **Patient ID #**.

Note: The Date of Birth field must be in MMDDCCYY format (e.g., 01/01/2000).

5. If the patient is also the subscriber (or primary insured), click the box next to "**Subscriber is Patient.**" This will pre-fill most of the lower section.
6. **Payer Responsibility:** Select the appropriate response.
7. Type the **Subscriber's ID Number**. This will most likely be the same as the Patient ID in the upper right. System will prompt for this information on all tabs except **Subscriber/Consumer** tab.
8. Enter **Group Number** if needed by the appropriate carrier requirements.
9. **Payer Name:** Select **ValueOptions, Inc**
10. **Payer ID should be pre-entered. Do not change this value.**
11. Select the appropriate answer from the drop-down box for the **Release of Information**.
12. Select the appropriate answer from the drop-down box for the **Assignment of Benefits**, if necessary to change to **YES**.
13. Select the appropriate statement from the drop-down box for the **Patient Signature Source**, if necessary to change to **On File**.
14. Select the appropriate statement from the drop-down box for the **Claim Filing Indicator**.
15. If there are Secondary and Tertiary subscribers, click on the appropriate tab at the top of the window and complete the required information on each tab.

Note: Remember to complete any other fields that are required for the specific contract.

16. Click **OK**. The name of the Patient displays in the Patient List window.

The Batch Browse Window

The left side of the Batch Browse Window is the **Treeview** showing the hierarchy of claims and batches. The two form types (Institutional and Professional) are the top level, batches for each form are on the next level, and providers are the third level within the hierarchy. Individual claims are listed under each provider. Selecting an item by clicking on it in the **Treeview** opens it and displays all the items under it in the **Listview** on the right side of the window. Double-clicking a claim item in the **Listview** opens the Claim Entry window.

Expanding an item (clicking on the '+' sign in front of it or double-clicking it) in the **Treeview** lists all items under it in the **Treeview** section.

To Create a Claims Batch

1. Click on **Add Batch** link on the **Task Pane** on the right side of the window. The Add Batch Window displays.
2. **Form Type:** Select whether you are creating an Institutional or Professional batch.
3. Type an identifying name for the batch. The Batch Name can be a combination of alpha and numeric characters and should be something that provides easy identification of the batch. A batch consists of any number of claims for any number of providers.
4. **Receiver name:** Select as appropriate for your claims.
5. Click OK.

The **Batch Name** is now displayed at the left of the **Batch Browse** window.

To Enter an 837p Claim

1. Click **File**, then **New Claim** on the menu bar at the top of the window or click the **Add Claim** link on the **Task Pane** at the right of the window. The **Add Claim Wizard** displays.
2. Select the correct form type, select an existing batch name or add a new batch name, select the Receiver Name, and click **Next**.
3. The **Add Claim Wizard** continues; select an existing provider from the drop-down box or add a new provider by clicking the **Add** button.
4. The Add Claim Wizard continues; select an existing provider and patient from the drop down boxes, then click **Next**.
5. The provider tab is automatically populated with information contained in the Provider database. Verify all information is accurate. If it is not, you can close the claim without saving, go to the Provider Maintenance section, and correct the provider record. Then start the Add Claim procedure again.
6. Click on the **Patient** tab to review that information is accurate as well. If it is not, you can close the claim without saving, go to the Patient Maintenance section, and correct the patient record. Then start the Add Claim procedure again.
7. Click on the **Claim** tab. The claim form displays.
8. The **Provider Accept Assignment** field must be completed.
9. The **Claim's Submitter's Identifier**, which should be pre-populated.
10. The **Frequency Type**. **If you are submitting a Corrected or Replacement claim, read Appendix 1 for proper formatting of the Original Reference Number.**
11. At least **1 Diagnosis Code**.
12. Click on the **Claim Details** Tab.
13. Fill in the first (or only) service line of the claim either by filling in the fields as indicated. Select a diagnosis code by selecting the number in the drop down menu that corresponds to the code on the Claim tab.
14. If there are additional claim bill lines, click on the next line and continue entering.
15. When all claim lines have been added to the form, click Save.
16. Click the Close button. The claim is saved and assigned a sequential number displayed in the Batch Browse window.
17. The Add Claim Wizard displays. To add another claim, click Add Another Claim and repeat the above steps; otherwise, click **Finish**.

Important: The above information contains the minimal information necessary for verification and acceptance of the claim into the **ValueOptions** Claims Processing systems. They neither imply nor guarantee payment of the claim. Information on required data elements for a particular contract can be found in the Claims Submission Manual.

To Enter an 837i Claim

1. Click **File**, then **New Claim** on the menu bar at the top of the window or click the **Add Claim** link on the Task Pane at the right of the window. The **Add Claim Wizard** displays.
2. Ensure the correct form type and select an existing batch name or add a new batch name.
3. Click **Next**.
4. The **Add Claim Wizard** continues; select an existing provider from the drop-down box or add a new provider by clicking the **Add** button.
5. Select a Patient from the drop-down box or add a new patient by clicking the Add button.
6. Click **Next**. The **Claim Entry** window displays the Provider information, automatically copied from the Provider database.
7. On the Provider tab verify all information for the Billing Provider is accurate. If any information is incorrect, exit from the claim, and update the information under Provider Data Maintenance.
8. Select the **Service Facility Location** by selecting the address from the drop down menu.
9. Click on the **Patient** tab. If any information is incorrect, exit from the claim, and update the information under Patient Data Maintenance.
10. Click on the **Claim** tab
11. **Statement covers dates:** The entire date range for this claim, covering every service line.
12. **Diagnosis Codes:** The Principal Code is required; the rest are as needed for the claim.
13. **Bill Details:** Select the **Type of Facility, Bill Classification, Frequency, Admission Type Code, Admission Source Code** and **Patient Status Code** for this particular claim.
14. The **Frequency Type**. **If you are submitting a Replacement claim, read Appendix 1 for proper formatting of the Original Reference Number.**
15. **Attending Physician:** Select the name from the dropdown list, or enter the information manually.
16. Click **Claim Details**.
17. Complete the appropriate claim details. If there are additional claim bill lines, click on the next line and continue entering.
18. Click the Close button. The claim is saved and assigned a sequential number displayed in the **Batch Browse** window.
19. The Add Claim Wizard displays. To add another claim, click Add Another Claim and repeat the above steps; otherwise, click Finish.

Important: The above information contains the minimal information necessary for verification and acceptance of the claim into the **ValueOptions** Claims Processing systems. They neither imply nor guarantee payment of the claim. Information on required data elements for a particular contract can be found in the Claims Submission Manual.

To Create and Send an EDI Claim File

When all claims have been entered in the EDI Claims Link for Windows® application, you can create a file to send to *ValueOptions*. You can transmit this file to *ValueOptions* through the internet by accessing www.valueoptions.com and following the instructions on screen.

1. Highlight the Batch Name on the left side of the Batch Browse Window, or double click the batch name in the Batch window on the right hand side:
2. From the File menu, select **Create EDI Claim File** or click the **Generate Claims File** link located at the top of the window.
3. The path where the claims batch files are stored is defaulted by using the **File Name** Link. We recommend keeping the default path and filename, but you can change it if you like.
4. Click **Next**. The Batch Claim File Wizard will calculate the values in the batch.

We recommend writing down the filename, the number of claims and the total dollar amount, as you will need this information again shortly.

To Review and Edit Previously Entered Claims

Highlight the Batch Name on the left side of the Batch Browse Window, or double click the batch name in the Batch window on the right hand side:

If you just need to review and read a claim, you can double click on the provider name and the patient name.

If you need to make any changes to any claims, click on the link that now says **“Reopen Batch”**. **This link will change to “Generate Claim File”**. (Don’t click again on **Generate Claim File** yet!)

You can now go into the batch, make the appropriate changes to existing claims, add new claims, or delete existing claims. You can then generate a new claim file as described in the preceding section.

For Help and Information, Contact:

ValueOptions
EDI Helpdesk
PO Box 1287
Latham, NY 12110
Phone: 888-247-9311
Fax: 866-698-6032

Hours: 8:00 AM to 6:00 PM (EST), Monday through Friday*

Email address: e-supportservices@valueoptions.com

*Not available during the following observed Holidays: New Years Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, the day after Thanksgiving, and Christmas Day.