



Provider Analytics

Objective

- As a result of this session, you should:
 - Be familiar with of Harvard Pilgrim's Provider Analytics reports
 - Be able to access the reports and navigate through them
 - Be prepared to begin using them to manage your Harvard Pilgrim Claims activity

Agenda

- Overview of Provider Analytics
- How to Access the tool
- How to Use the tool to
 - View reports
 - Submit a data download request
 - Retrieve download requests



Overview

What is Provider Analytics

- A tool provided by Harvard Pilgrim Health Care to help providers monitor and manage the claims activity at their practices
- Available to registered users of *HPHConnect*
- Produced monthly and available the Monday on or following the 10th of the month
- Monthly view refreshed each month

What Data is Included

- Provides claim, EDI and provider demographic data for those practitioners, groups or both associated to an authorized *HPHConnect* access list
- Contains data for members enrolled in Harvard Pilgrim core products
 - 13 months of adjudicated claims data
 - 13 months of EDI transaction submission records
 - Associated provider demographic data
- Does not contain claim or EDI data for members enrolled in:
 - Products jointly offered by Harvard Pilgrim and UnitedHealthcare
 - First Seniority Freedom
 - Products offered by Health Plans Inc.

System Requirements

- A valid *HPHConnect* User ID
- Internet Explorer 6.0 or higher with 128-bit encryption
- High speed connection (T1, DSL, Cable, etc.)
- Adobe® Acrobat® Reader® to view and print reports
- Microsoft Excel or Access 97 (or higher version) to download the detailed claim or EDI data

If You Have Questions

- For help understanding the reports, contact the Harvard Pilgrim Health Care Provider Relations Department at (800) 708-4414
- For help using MS Access or other data analysis software program, refer to your software manual or contact your IT department



How to Access Provider Analytics

HPHConnect Office Management

Harvard Pilgrim Health Care

Home | Log Out

Logged in: Susie Smith

Message Center (0 New)

Role: Office Manager

Patient Management

Current Patient:
(None)
[Search Patients](#)

Office Management

[Eligibility](#)

[Claims](#)

[Referrals/Auths](#)

[Provider Directory](#)

[Formulary](#)

[Code Lookup](#)

[Reports](#)

[File Transfer Agent](#)

[HPHC Pharmacy](#)

[Provider Analytics](#)

Administration

[User Preferences](#)

[Data Load Monitor](#)

References

[HPHC Resources](#)

[Medical Links](#)

Search Help Files:

Clinicians/Clinician Designees: Get access to important patient health data - FAST!

With the Personal Health Record (PHR) tool available on *HPHConnect*, you can access important health information that can enable you to make better-informed decisions aimed at improving patient health. Please click [here](#) to view detailed information regarding these features. posted 20090211

New Harvard Pilgrim e-newsletter, *Network Matters*, now available. Subscribe today!

Harvard Pilgrim has merged its previous *News to Use* and *Network Leader* provider publications into one new e-newsletter, *Network Matters*, available monthly via e-mail and online to the entire Harvard Pilgrim provider network. If you do not already receive *Network Matters* by e-mail, please register at www.harvardpilgrim.org via the "Register for Network Matters" link on the right hand side of the page.

Provider Analytics Link

The screenshot displays the Harvard Pilgrim Health Care web application interface. At the top left is the Harvard Pilgrim Health Care logo. At the top right, there are links for [Home](#) and [Log Out](#), along with user information: "Logged in: Susie Smith" and a message center notification: "Message Center (0 New)". Below this, the user's role is listed as "Office Manager".

The main navigation menu is on the left side, organized into several sections:

- Patient Management**: Includes a "Current Patient:" dropdown menu set to "(None)", a "Search Patients" button, and a link to [Provider Analytics](#) (highlighted with a red box).
- Office Management**: Includes links for [Eligibility](#), [Claims](#), [Referrals/Auths](#), [Provider Directory](#), [Formulary](#), [Code Lookup](#), [Reports](#), [File Transfer Agent](#), [HPHC Pharmacy](#), and [Provider Analytics](#) (highlighted with a red box).
- Administration**: Includes links for [User Preferences](#) and [Data Load Monitor](#).
- References**: Includes links for [HPHC Resources](#) and [Medical Links](#).

At the bottom of the navigation menu, there is a "Search Help Files:" section with a search input field and a "Go" button.

Provider Analytics – Landing Page



Provider Analytics

Provider Access List – can select “all” or specific providers listed

Select Provider and Group Practice Value(s)

Select provider numbers and/or group practice values to be included in the requested report or download

All
A123 - ABC Medical Group
1234 - John Smith MD

Include adjusted service lines in processing time summary

Yes No

Report options – select one at a time; return to this page to select a different one

- [Begin viewing reports](#)
- [Submit a request for Claim, EDI or Provider demographic data download](#)

[Check Status Summary Report](#)

Report Archive

- [Retrieve available download requests](#)

Time period of report data

Data is Limited by the following conditions
Includes Paid Dates between 01/01/2008 and 02/28/2009
Report reflects data updated through 02/28/2009

Report Options

Select	To access
Begin viewing reports	The main dashboard page with Claims Summary, Processing Time Summary, & EDI Summary <ul style="list-style-type: none">–Multiple “drill-down” options to filter data–Viewing options: online, PDF, Excel spreadsheet, or download
Submit a request for Claim, EDI or Provider demographic data download	“Input Report Request Criteria” screen to enter the parameters for the desired report and submit the request to be downloaded
Check Status Summary Report	A summary report of checks paid to the provider(s) selected
Retrieve available download request	The list of all download requests submitted within the past 15 days, from which the file can be downloaded to open and/or save it



Begin Viewing Reports

Report Selection Criteria

1. Select “All” or specific provider(s) from the access list to include in the reports
2. Determine whether to exclude or include adjusted service lines in processing time
 - *Adjusted service lines are claims previously paid or denied that are readjudicated typically because of an appeal*
3. Click on “Begin viewing reports” to launch the dashboard
4. A new window will open to the Provider Dashboard (disable any popup blocker)

Select Provider and Group Practice Value(s)

Select provider numbers and/or group practice values to be included in the requested report or download

All
A123 - ABC Medical Group
1234 - John Smith MD

Include adjusted service lines in processing time summary Yes No ←

[Begin viewing reports](#)

[Submit a request for Claim, EDI or Provider demographic data download](#)

[Check Status Summary Report](#)

Report Archive

[Retrieve available download requests](#)

Data is Limited by the following conditions
Includes Paid Dates between 01/01/2008 and 02/28/2009
Report reflects data updated through 02/28/2009

Dashboard



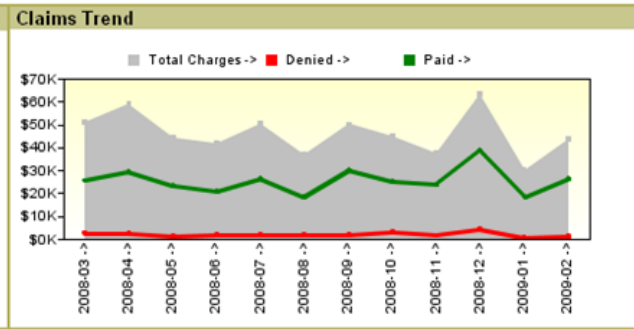
Provider Analytics

Provider(s): All
 Include Adjustments? No

[View in PDF](#)

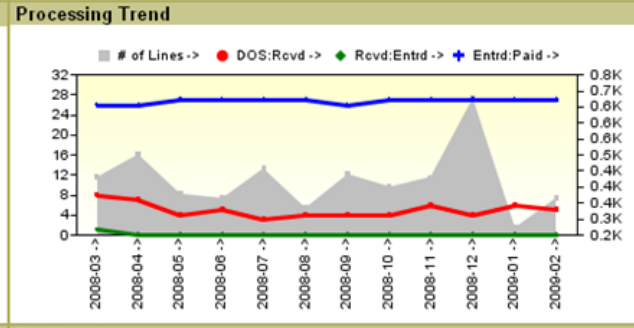
Claims Summary

	# Claim Lines	Charges	Denied	Paid
Current Month	370	\$43,625.00	\$1,465.00	\$26,351.91
12 Month Min	274	\$30,146.00	\$655.00	\$18,359.45
12 Month Max	679	\$63,311.00	\$4,195.00	\$38,628.63
12 Month Avg	424	\$46,100.50	\$2,064.17	\$25,543.27



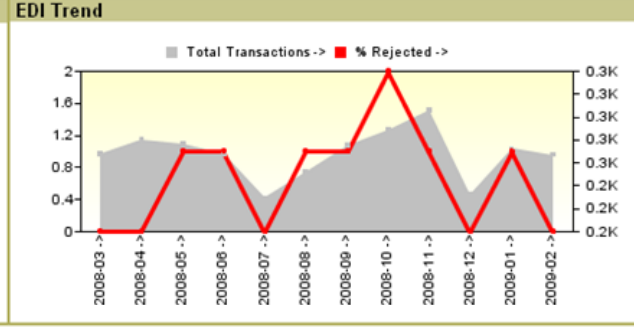
Processing Time in Days

	# Claim Lines	DOS to Receive	Received to Entered	Entered to Paid
Current Month	364	5	0	27
12 Month Min	272	3	0	26
12 Month Max	677	8	1	27
12 Month Avg	420	5	0	27



EDI Transaction Summary

	Total Trans	% Accepted	% Rejected
Current Month	267	100%	0%
12 Month Min	229	98%	0%
12 Month Max	306	100%	2%
12 Month Avg	268	99%	1%



Claim Summary

- Compares the # of claim lines for the current month against
 - Maximums and minimum values within 12 month period*
 - Average of claim activity for the past 12 months

**values may occur in different months*

Claims Summary

	# Claim Lines	Charges	Denied	Paid
<u>Current Month</u>	370	\$43,625.00	\$1,465.00	\$26,351.91
12 Month Min	274	\$30,146.00	\$655.00	\$18,359.45
12 Month Max	679	\$63,311.00	\$4,195.00	\$38,628.63
12 Month Avg	424	\$46,100.50	\$2,064.17	\$25,543.27

Processing Time in Days

- Summarizes 12 months of data and calculates the timeframes for # of claim lines represented (non-adjusted or adjusted, depending on initial preferences selected) from:
 - Date of service to date received at Harvard Pilgrim
 - Date received to date claim is entered into the Claim system
 - Date entered into Claim system to the date a remittance is issued to the provider


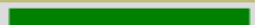


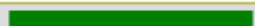
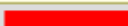
Processing Time in Days

	# Claim Lines	DOS to Receive	Received to Entered	Entered to Paid
<u>Current Month</u>	364	5	0	27
12 Month Min	272	3	0	26
12 Month Max	677	8	1	27
12 Month Avg	420	5	0	27

EDI Transaction Summary

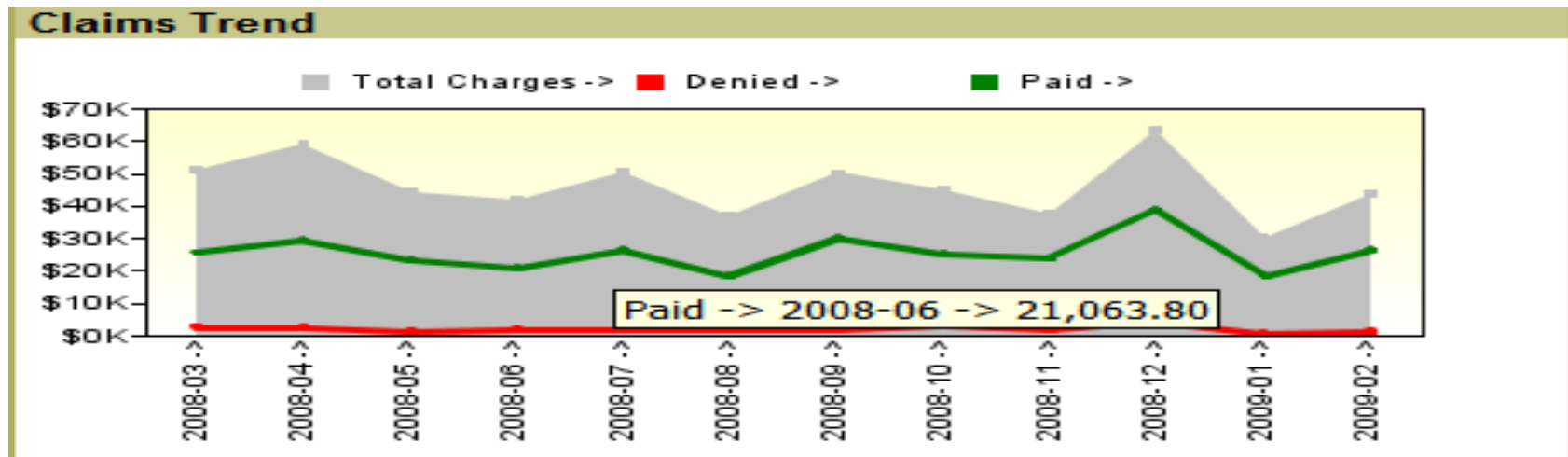
- Summarizes EDI claims activity for the month:
 - The total number of EDI claim transactions
 - The percentage of EDI claims, accepted and rejected

EDI Transaction Summary

	Total Trans	% Accepted		% Rejected	
<u>Current Month</u>	267	100%		0%	
12 Month Min	229	98%		0%	
12 Month Max	306	100%		2%	
12 Month Avg	268	99%		1%	

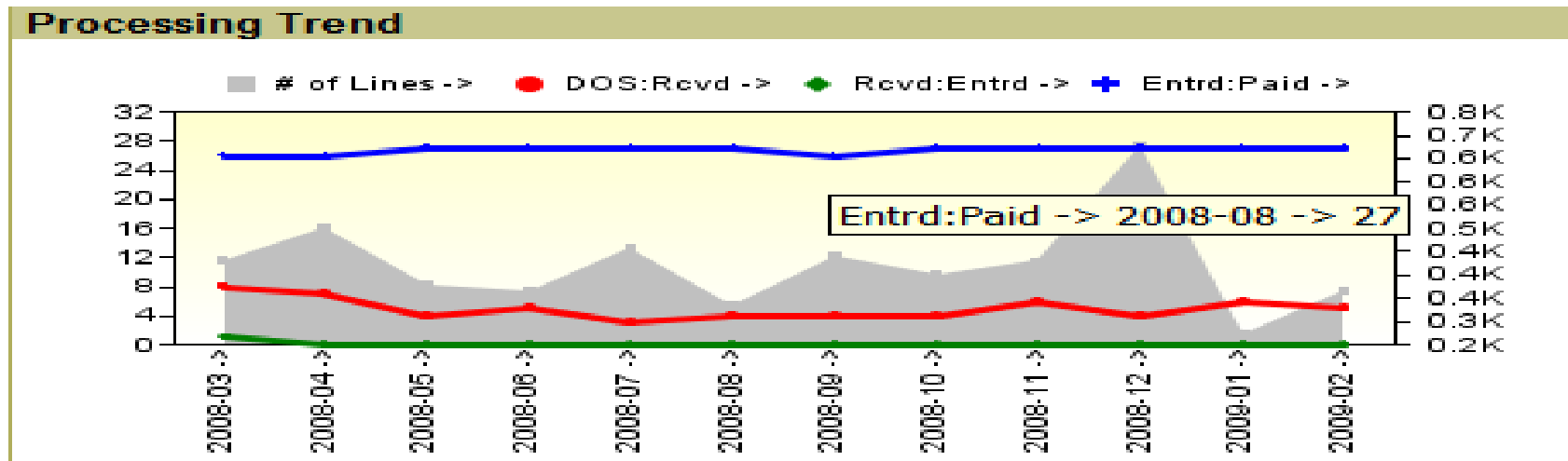
Claims Trend

- A 12 month graphical representation of the relationship of total charges to denied charges to paid amount
- Hover over “pop ups” that reveal type, month and value for the period selected
- 36 selectable data points that reveal the Total Charges, Denied and Paid values for preceding 12 months from which to launch into detailed views



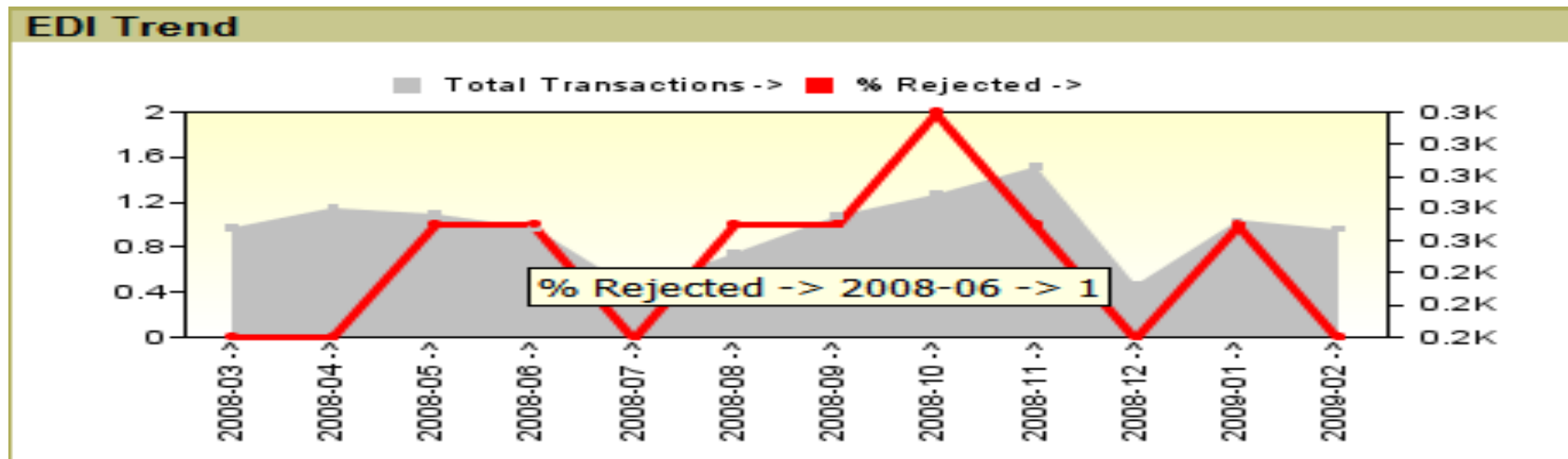
Processing Trend

- 12 month graphical representation of the relationship of:
 - DOS to receipt, Receipt to Entered, Entered to Paid
- Axis:
 - X-axis represents month and year
 - Left Y-axis represents number of days
 - Right Y-axis represents number of claim lines (in thousands)
- 36 hover over “pop ups” that reveal type, month and value of period selected from which to launch into detailed views



EDI Trend

- A 12 month graphical representation of the relationship of:
 - Total number of EDI transactions and total number of rejected EDI transactions
- Axis:
 - X-axis represents month and year
 - Left Y-axis represents rejection percentage
 - Right Y-axis represents number of claims (in thousands)
- 24 hover over “pop ups” that reveal type, month and value of period selected from which to launch into detailed views

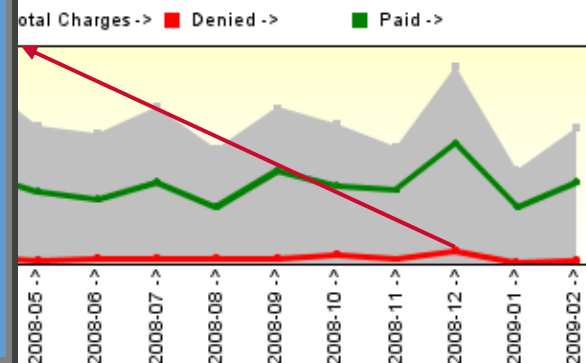


Claims/Processing Time Drill Down Options

Claims Summary

	# Claim Lines	Charges	
Current Month	370	\$43,625.00	\$1
12 Month Min	274	\$30,146.00	\$
12 Month Max	679	\$63,311.00	\$4
12 Month Avg	424	\$46,100.50	\$2

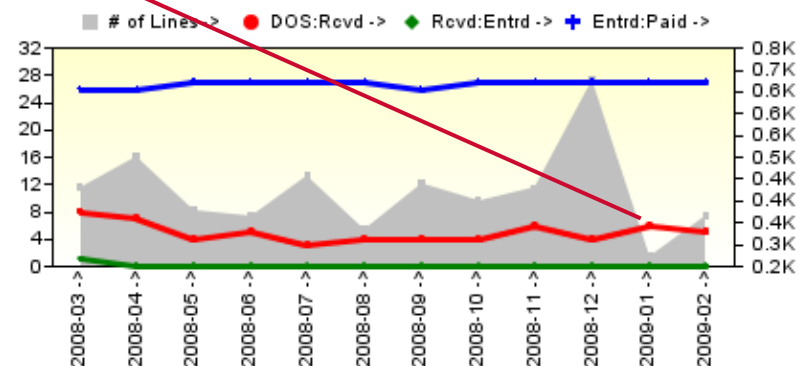
Paid or Denied
 Explanation Code Category
 Explanation (EX) Code
 Group Practice Number
 Provider Specialty
 Provider Number
 Product Type
 Place of Service
 Type of Service
 Procedure Code
 Remittance Advice



Processing Time in Days

	# Claim Lines	DOS to Receive	Received to Entered	Entered to Paid
Current Month	364	5	0	27
12 Month Min	272	3	0	26
12 Month Max	677	8	1	27
12 Month Avg	420	5	0	27

Processing Trend

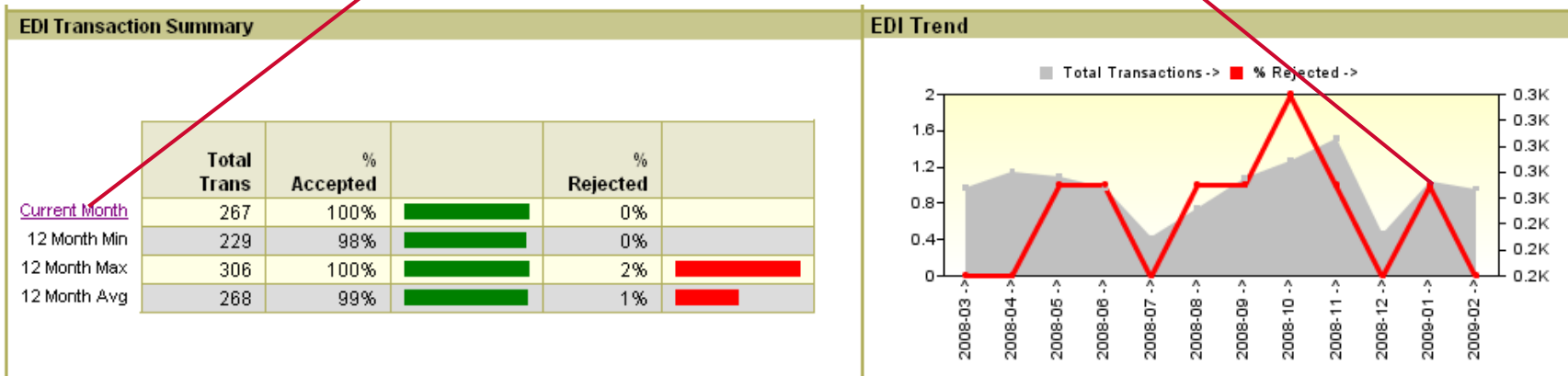


Claims Options Description

Select	To view claims data by
Paid or Denied	Status - paid or denied
Explanation Code Category	Adjudication category: Administrative, Contractual, Other Party Liability, Paid, Payment Policy
Explanation (EX) Code	EX Code on a Harvard Pilgrim remittance
Group Practice Number	Group practice if <i>HPHConnect</i> access list is comprised of multiple provider and group practice records
Provider Specialty	The primary provider specialty on record
Provider Number	Individual provider
Product Type	Member product, i.e., HMO, PPO, POS or indemnity
Place of service	Where the service occurred, e.g., office, ER, inpatient, etc.
Type of Service	General type of service rendered, e.g., lab, day surgery, radiology
Procedure code	CPT or revenue code
Remittance Advice	Remittance advice (check) number

EDI Transaction Drill Down Options

Provider
EDI Reason
EDI Code Category

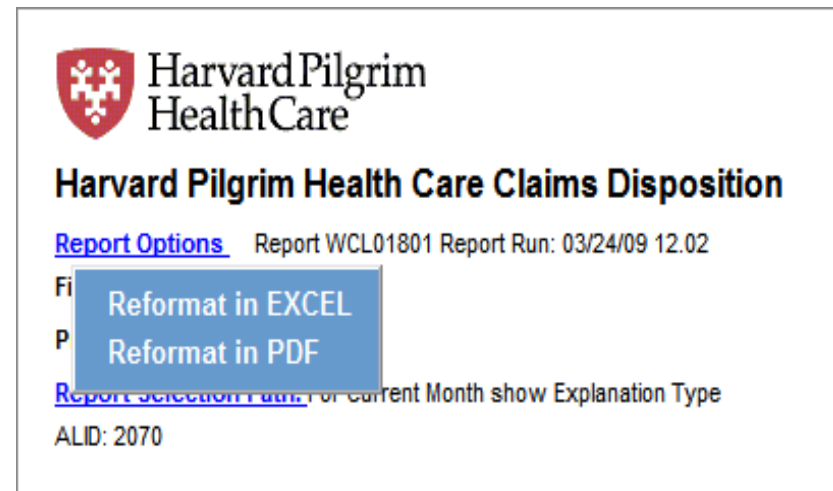


EDI Transaction Options Description

Select	To view claims data by
Provider	Individual provider
EDI Reason	Reason code: claim accepted for further processing, invalid member #, invalid member/patient last name, etc.
EDI Code Category	Status – Accepted or Rejected

Report View Options

- Report Options - reformat data on the page into
 - Microsoft Excel spreadsheet
 - PDF document
- Report Selection Path - “breadcrumb” navigation allows user to retrace steps through the drilldown path
 - Go back to an earlier view
 - Go back to Dashboard to choose a different path to go forward



Harvard Pilgrim HealthCare

Harvard Pilgrim Health Care Claims Disposition

[Report Options](#) Report WCL01801 Report Run: 03/24/09 12.02

Fi **Reformat in EXCEL**

P **Reformat in PDF**

[Report Selection Path](#) For current Month show Explanation Type

ALID: 2070



Harvard Pilgrim HealthCare

Harvard Pilgrim Health Care Claims Disposition

[Report Options](#) Report WCL01801 Report Run: 03/24/09 12.04

Filter Parameters:

Provider: All

Report Selection Path: For Specialty:004 show Provider

Dashboard

1 For Current Month show Explanation Type

2 For Explanation Type:"Paid" show "Specialty"

Drill Down Report Columns

- # of Claim Lines
- Gross charges
- Contractually allowed dollars
- Denied dollars
- Member coinsurance, copayment and deductible
- Discount off of charges
- Risk withheld (if any)
- Payments by other liable parties
- Net paid dollars



Harvard Pilgrim Health Care Claims Disposition

[Report Options](#) Report WCL01801 Report Run: 03/24/09 11.34

Filter Parameters:

Provider: All

[Report Selection Path](#): For Current Month show Explanation Type

ALID: 2070


Explanation Type	# Claim Lines	Charges	Allowed	Denied	Co-Insure	Copay	Deduct	Discount	Risk	Other	Paid
Denied	26	\$1,465.00	\$1,110.43	\$1,465.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Paid	344	\$42,160.00	\$30,157.14	\$0.00	\$0.00	\$3,360.00	\$389.96	\$0.00	\$0.00	\$0.00	\$26,351.91
TOTAL	370	\$43,625.00	\$31,267.57	\$1,465.00	\$0.00	\$3,360.00	\$389.96	\$0.00	\$0.00	\$0.00	\$26,351.91

This report is confidential

Page 1 of 1

UserID: 18822


Claim Drill Down Report Column Options


Harvard Pilgrim HealthCare
Harvard Pilgrim Health Care Claims Disposition
[Report Options](#) Report WCL01801 Report Run: 03/24/09 12.12
Filter Parameters:
 Provider: All
[Report Selection Path:](#) For Current Month show Explanation Type
 ALID: 2070

Explanation Type	# Claim Lines	Charges	Allowed
Ascending	26	\$1,465.00	\$1,110.43
Descending	344	\$42,160.00	\$30,157.14
Download			
Trend Report	370	\$43,625.00	\$31,267.57

This report is confidential

- Primary view column header permits:
 - Ascending/descending sort
 - Ability to claim download all data associated with the visible view
 - Access to the trend report


Harvard Pilgrim HealthCare
Harvard Pilgrim Health Care Claims Disposition
[Report Options](#) Report WCL01801 Report Run: 03/24/09 12.12
Filter Parameters:
 Provider: All
[Report Selection Path:](#) For Current Month show Explanation Type
 ALID: 2070

Explanation Type	# Claim Lines	Charges	Allowed	Denied	Co-Insure
Denied	26	\$1,465.00	\$1,110.43	\$1	00
Paid	344	\$42,160.00	\$30,157.14		00
TOTAL	370	\$43,625.00	\$31,267.57	\$1,465.00	\$0.00

This report is confidential

Page 1 of

- Secondary column headers permit:
 - Ascending/descending sort

Claim Drill Down Report Trend Report

- Access via the primary column detail (e.g., below: explanation type)
- Only report that once accessed does NOT allow further drilldown
- Drilldown in following example:
 - Select: Explanation Category
 - Select: Administrative Denials
 - Select Trend Report

[Report Options](#) Report WCL01801 Report Run: 04/13/09 14.07

Filter Parameters:

Provider: All

[Report Selection Path:](#) For Current Month show Explanation Type

ALID: 2070

Explanation Type	<u># Claim Lines</u>	<u>Charges</u>	<u>Allowed</u>	<u>Denied</u>
Ascending	45	\$3,730.00	\$2,542.65	\$3,730.00
Descending	437	\$52,764.00	\$37,769.43	\$0.00
Download				
Trend Report	482	\$56,494.00	\$40,312.08	\$3,730.00

Claim Drill Down Report Trend Report

- 13 month trend of a particular view
 - In below example: administrative denials in total over last 13 months
- All but primary column (month/year) are sortable
- Further drilldown by month year is not selectable HOWEVER
- Drilldown to a given month and year is achieved via trend report on dashboard

Report Selection Path: For Explanation Code show 12 month trend

Month and Year Adjudicated	# Claim Lines	Charges	Allowed	Denied
Mar 2008	14	\$1,735.00	\$962.54	\$1,735.00
April 2008	5	\$535.00	\$342.99	\$535.00
May 2008	2	\$65.00	\$37.45	\$65.00
June 2008	4	\$885.00	\$541.22	\$885.00
July 2008	3	\$545.00	\$355.97	\$545.00
August 2008	1	\$120.00	\$81.48	\$120.00
September 2008	1	\$120.00	\$81.48	\$120.00
October 2008	2	\$235.00	\$152.78	\$235.00
November 2008	3	\$565.00	\$419.74	\$565.00
December 2008	17	\$1,560.00	\$1,285.45	\$1,560.00
January 2009	1	\$50.00	\$35.36	\$50.00
February 2009	7	\$470.00	\$369.37	\$470.00
Mar 2009	8	\$1,705.00	\$1,081.84	\$1,705.00
TOTAL	68	\$8,590.00	\$5,747.67	\$8,590.00

Claim Drill Down Pay Matrix Report

- Available as a drilldown option only from the Processing Time module
- Compares the month of service to the month for which the claims was paid or denied and includes 13 months of service and 13 months of paid claims
- No columns are sortable
- No further drilldown is possible from this report
- Navigation to prior drilldown points or the dashboard is still an option

Service Date (Columns) Adjudicated Date(Rows)	Feb 2008	Mar 2008	Apr 2008	May 2008	Jun 2008	Jul 2008	Aug 2008	Sep 2008	Oct 2008	Nov 2008	Dec 2008	Jan 2009	Feb 2009	TOTAL
Mar2008	\$23,769.80	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$23,769.80
Apr2008	\$2,658.73	\$22,564.12	\$3,638.39	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$28,861.24
May2008	\$11.26	\$714.27	\$21,383.07	\$1,248.87	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$23,357.47
Jun2008	\$0.00	\$0.00	\$1,123.90	\$19,877.05	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$21,000.95
Jul2008	\$0.00	\$62.85	\$0.00	\$1,646.09	\$21,921.08	\$2,592.11	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$26,222.13
Aug2008	\$0.00	\$596.77	\$0.00	\$11.64	\$112.85	\$17,771.32	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$18,492.58
Sep2008	\$0.00	\$0.00	\$0.00	\$0.00	\$61.97	\$735.83	\$26,405.09	\$2,950.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$30,153.63
Oct2008	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$165.80	\$544.98	\$22,974.36	\$1,605.95	\$0.00	\$0.00	\$0.00	\$0.00	\$25,291.09
Nov2008	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$66.48	\$592.68	\$442.99	\$22,432.22	\$0.00	\$0.00	\$0.00	\$0.00	\$23,534.37
Dec2008	\$0.00	\$0.00	\$107.71	\$0.00	\$0.00	\$0.00	\$140.14	\$188.95	\$2,016.06	\$31,472.21	\$4,703.56	\$0.00	\$0.00	\$38,628.63
Jan2009	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$188.94	\$0.00	\$0.00	\$742.24	\$17,419.73	\$0.00	\$0.00	\$18,350.91
Feb2009	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$134.85	\$0.00	\$0.00	\$778.43	\$808.98	\$24,629.65	\$0.00	\$26,351.91
Mar2009	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$86.93	\$3,798.97	\$26,217.29	\$30,103.19
TOTAL	\$26,439.79	\$23,938.01	\$26,253.07	\$22,783.65	\$22,095.90	\$21,331.54	\$28,006.68	\$26,557.04	\$26,054.23	\$32,992.88	\$23,019.20	\$28,428.62	\$26,217.29	\$334,117.90

This report is confidential

Page 1 of 1

UserID: 18822



Submit a Request for Download

Types of Download Reports

- Claims - request claim line detail for particular condition(s)
 - Detail equivalent to what appears on a provider remittance
 - Service or paid date
 - Claim disposition (paid or denied)
 - Adjudication category or reason
 - Demographic: provider, specialty, type or place of service
 - Check number
- EDI – request EDI claim transaction details
 - Receipt or service date
 - Accepted or rejected
 - EDI response code
 - Provider

Types of Download Reports

- Provider Demographics – request and validate provider attributes
 - Local Care Unit (LCU/contract affiliation)
 - Primary specialty
 - Tax ID#
 - Practice and payment addresses
 - Contract status
 - Effective and end dates

Report Selection Criteria

1. Select “All” or specific provider(s) from the access list to include in the reports
2. Determine whether to exclude or include adjusted service lines in processing time
3. Click on “*Submit a request for Claim, EDI or Provider demographic data download*” to launch the Input Report Request Criteria window

Select Provider and Group Practice Value(s)

Select provider numbers and/or group practice values to be included in the requested report or download

All
A123 - ABC Medical Group
1234 - John Smith MD

Include adjusted service lines in processing time summary

Yes No

■ [Begin viewing reports](#)

■ [Submit a request for Claim, EDI or Provider demographic data download](#)


■ [Check Status Summary Report](#)

Report Archive

■ [Retrieve available download requests](#)

Data is Limited by the following conditions
Includes Paid Dates between 01/01/2008 and 02/28/2009
Report reflects data updated through 02/28/2009

Submit a Report for Specific Data

 **Provider Analytics**

Selected Provider and Group Practice Values
Selected Values: All

Input Report Request Criteria

Report Name	<input type="text"/>	Type of Download *	<input type="text" value="Claim Download"/>
Claim Number(s)	<input type="text"/>	Check Number(s)	<input type="text"/>
Starting Paid Date	<input type="text"/>	Ending Paid Date	<input type="text"/>
Starting Service Date	<input type="text"/>	Ending Service Date	<input type="text"/>
Starting Receipt Date	<input type="text"/>	Ending Receipt Date	<input type="text"/>
Claim Disposition	All	EDI Disposition	All
Explanation Code Category	--All Categories--		
Explanation Codes	\$\$-ADJUSTMENT - CLAIM/CAP FUND FIX ON 5/11/98 *C-CAPITATED SERVICE PROVIDED BY ON-CALL/NO FFS PAYMENT *E-ENCOUNTER - NO FFS PAYMENT		
Provider Name	1234 - John Smith MD		
Product Type	Health Maintenance Organization Indemnity Point of Service		
Provider Specialty	CARDIOVASCULAR DISEASE HEMATOLOGY INTERNAL MEDICINE		
Place of Service	Adult preventive dental rider AMBULANCE AMBULATORY SURGICAL DAY CARE		
Type of Service	ADULT PREVENTIVE DENTAL CARE (AGES 14 YEARS AND OLDER) ALCOHOL - OFFICE/OPD AMBULANCE & AMBULANCE ATTENDANT		

Data is Limited by the following conditions

Claim Download Request

1. Assign a *Report Name*
2. Select the *Type of Download*
3. a) Enter one or more *Claim* or *Check Numbers* separated by a comma, or
b) Select *date* parameters
4. Select *Claim Disposition*
 - Selecting 'denied' will enable *Explanation Code Category* and individual *Explanation Codes*
5. Refine returned criteria data on additional criteria
6. Click on *Submit Request*

Selected Provider and Group Practice Values

Selected Values: All

Input Report Request Criteria

Report Name	<input type="text"/>	Type of Download *	Claim Download
Claim Number(s)	<input type="text"/>	Check Number(s)	<input type="text"/>
Starting Paid Date	<input type="text"/>	Ending Paid Date	<input type="text"/>
Starting Service Date	<input type="text"/>	Ending Service Date	<input type="text"/>
Starting Receipt Date	<input type="text"/>	Ending Receipt Date	<input type="text"/>
Claim Disposition	All	EDI Disposition	All
Explanation Code Category	--All Categories--		
Explanation Codes	\$\$-ADJUSTMENT - CLAIM/CAP FUND FIX ON 5/11/96 *C-CAPITATED SERVICE PROVIDED BY ON-CALL/NO FFS PAYMENT *E-ENCOUNTER - NO FFS PAYMENT		
Provider Name	1234 - John Smith MD		
Product Type	Health Maintenance Organization Indemnity Point of Service		
Provider Specialty	CARDIOVASCULAR DISEASE HEMATOLOGY INTERNAL MEDICINE		
Place of Service	Adult preventive dental rider AMBULANCE AMBULATORY SURGICAL DAY CARE		
Type of Service	ADULT PREVENTIVE DENTAL CARE (AGES 14 YEARS AND OLDER) ALCOHOL - OFFICE/OPD AMBULANCE & AMBULANCE ATTENDANT		

EDI Data Download Request

1. Assign a *Report Name*
2. Select the *Type of Download*
3. Select data parameters
4. Refine returned data based on specific providers
5. Click on *Submit Request*

Selected Provider and Group Practice Values

Selected Values: All

Input Report Request Criteria

Report Name	<input type="text"/>	Type of Download *	EDI Data Download
Claim Number(s)	<input type="text"/>	Check Number(s)	<input type="text"/>
Starting Paid Date	<input type="text"/>	Ending Paid Date	<input type="text"/>
Starting Service Date	<input type="text"/>	Ending Service Date	<input type="text"/>
Starting Receipt Date	<input type="text"/>	Ending Receipt Date	<input type="text"/>
Claim Disposition	Denied	EDI Disposition	All
Explanation Code Category	--All Categories--		
Explanation Codes	\$\$-ADJUSTMENT - CLAIM/CAP FUND FIX ON 5/11/98 *C-CAPITATED SERVICE PROVIDED BY ON-CALL/NO FFS PAYMENT *E-ENCOUNTER - NO FFS PAYMENT		
Provider Name	1234 - John Smith MD		
Product Type	Health Maintenance Organization Indemnity Point of Service		
Provider Specialty	CARDIOVASCULAR DISEASE HEMATOLOGY INTERNAL MEDICINE		
Place of Service	Adult preventive dental rider AMBULANCE AMBULATORY SURGICAL DAY CARE		
Type of Service	ADULT PREVENTIVE DENTAL CARE (AGES 14 YEARS AND OLDER) ALCOHOL - OFFICE/OPD AMBULANCE & AMBULANCE ATTENDANT		

Provider Demographic Download Request

1. Assign a *Report Name*
2. Select the *Type of Download*
 - No selectable fields are enabled
3. Click on *Submit Request*

Selected Provider and Group Practice Values

Selected Values: All

Input Report Request Criteria

Report Name	<input type="text"/>	Type of Download *	Provider Demographic Download
Claim Number(s)	<input type="text"/>	Check Number(s)	<input type="text"/>
Starting Paid Date	<input type="text"/>	Ending Paid Date	<input type="text"/>
Starting Service Date	<input type="text"/>	Ending Service Date	<input type="text"/>
Starting Receipt Date	<input type="text"/>	Ending Receipt Date	<input type="text"/>
Claim Disposition	Denied	EDI Disposition	All
Explanation Code Category	--All Categories--		
Explanation Codes	\$\$-ADJUSTMENT - CLAIM/CAP FUND FIX ON 5/11/98 *C-CAPITATED SERVICE PROVIDED BY ON-CALL/NO FFS PAYMENT *E-ENCOUNTER - NO FFS PAYMENT		
Provider Name	1234 - John Smith MD		
Product Type	Health Maintenance Organization Indemnity Point of Service		
Provider Specialty	CARDIOVASCULAR DISEASE HEMATOLOGY INTERNAL MEDICINE		
Place of Service	Adult preventive dental rider AMBULANCE AMBULATORY SURGICAL DAY CARE		
Type of Service	ADULT PREVENTIVE DENTAL CARE (AGES 14 YEARS AND OLDER) ALCOHOL - OFFICE/OPD AMBULANCE & AMBULANCE ATTENDANT		

Download Request Response

- When you click on *Submit Request*, this message displays initially
- When the download submission request has been completed, this message displays
- To retrieve download requests, return to the *Provider Analytics Home Page*

Please wait

Your request is being submitted...

Submission Confirmation

Your request was successfully submitted. The request ID is 721.

[Return](#)



Retrieve Available Download Requests

Report Selection Criteria

- Click on “Retrieve available download requests”Begin viewing reports” to launch the list of reports

Select Provider and Group Practice Value(s)

Select provider numbers and/or group practice values to be included in the requested report or download

All
A123 - ABC Medical Group
1234 - John Smith MD

Include adjusted service lines in processing time summary Yes No

- [Begin viewing reports](#)
- [Submit a request for Claim, EDI or Provider demographic data download](#)

- [Check Status Summary Report](#)

Report Archive

- [Retrieve available download requests](#)

Data is Limited by the following conditions
Includes Paid Dates between 01/01/2008 and 02/28/2009
Report reflects data updated through 02/28/2009

Retrieve a submitted request

Claim, EDI or Provider Demographic requests available for download

Request #	Request Date	Report Name	Request Status	Download
721	03-24-2009 13:26:20	Test Case 1	SUCCESS	Download

Note: Requests placed in the past 15 days are available for view and download

- Data is returned in a tab delimited ASCII text file
- Data can be imported into Microsoft Excel or Access for analysis



Check Status Summary Report

Report Selection Criteria

1. Select “All” or specific provider(s) from the access list to include in the reports
2. Click on “*Check Status Summary Report*” to launch the report

Select Provider and Group Practice Value(s)

Select provider numbers and/or group practice values to be included in the requested report or download

All
A123 - ABC Medical Group
1234 - John Smith MD

Include adjusted service lines in processing time summary

Yes No

- [Begin viewing reports](#)
- [Submit a request for Claim, EDI or Provider demographic data download](#)

- [Check Status Summary Report](#)

Report Archive

- [Retrieve available download requests](#)

Data is Limited by the following conditions
Includes Paid Dates between 01/01/2008 and 02/28/2009
Report reflects data updated through 02/28/2009

Check Status Summary Report

- View all checks issued within previous 12 months:
 - Check Number
 - Paid date
 - Total paid
 - Status



Check Status Summary Report

[Report Options](#) Report WCL01813 Report Run: 03/26/09 11.51

Filter Parameters:

Provider: All

Check Nbr	Pavto	Pavto Name	Check Paid Date	Total Paid	Check Cleared Date
BB0007222777	1234	JOHN SMITH MD	2009/02/24	\$6,507.55	Not Cleared Yet
FL0000415328	1234	JOHN SMITH MD	2009/02/24	\$186.78	Not Cleared Yet
BB0007214975	1234	JOHN SMITH MD	2009/02/17	\$7,018.62	Not Cleared Yet
FL0000413101	1234	JOHN SMITH MD	2009/02/17	\$68.65	Not Cleared Yet
BB0007207067	1234	JOHN SMITH MD	2009/02/10	\$6,129.00	Not Cleared Yet
BB0007199400	1234	JOHN SMITH MD	2009/02/03	\$6,419.83	Not Cleared Yet
FL0000408507	1234	JOHN SMITH MD	2009/02/03	\$21.48	Not Cleared Yet
BB0007192376	1234	JOHN SMITH MD	2009/01/27	\$3,178.56	Not Cleared Yet
BB0007185522	1234	JOHN SMITH MD	2009/01/20	\$4,017.93	01/31/2009
BB0007177840	1234	JOHN SMITH MD	2009/01/13	\$4,678.99	01/31/2009
FL0000402177	1234	JOHN SMITH MD	2009/01/13	\$133.51	01/31/2009
BB0007170328	1234	JOHN SMITH MD	2009/01/06	\$6,304.15	01/31/2009
FL0000399832	1234	JOHN SMITH MD	2009/01/06	\$46.31	01/31/2009
BB0007162860	1234	JOHN SMITH MD	2008/12/30	\$5,944.37	01/31/2009
FL0000397599	1234	JOHN SMITH MD	2008/12/30	\$169.43	01/31/2009
BB0007155614	1234	JOHN SMITH MD	2008/12/23	\$8,484.74	12/31/2008
FL0000395466	1234	JOHN SMITH MD	2008/12/23	\$1.83	12/31/2008
BB0007147670	1234	JOHN SMITH MD	2008/12/16	\$8,472.78	12/31/2008
FL0000392991	1234	JOHN SMITH MD	2008/12/16	\$75.48	12/31/2008
BB0007139826	1234	JOHN SMITH MD	2008/12/09	\$8,340.74	12/31/2008
FL0000390623	1234	JOHN SMITH MD	2008/12/09	\$461.75	12/31/2008
BB0007132059	1234	JOHN SMITH MD	2008/12/02	\$6,510.54	12/31/2008
FL0000388271	1234	JOHN SMITH MD	2008/12/02	\$166.97	12/31/2008
BB0007124187	1234	JOHN SMITH MD	2008/11/25	\$5,733.12	12/31/2008
FL0000385962	1234	JOHN SMITH MD	2008/11/25	\$211.04	12/31/2008
BB0007116323	1234	JOHN SMITH MD	2008/11/18	\$4,213.40	11/30/2008
BB0007108844	1234	JOHN SMITH MD	2008/11/11	\$5,786.12	11/30/2008
FL0000381260	1234	JOHN SMITH MD	2008/11/11	\$182.62	11/30/2008
BB0007101004	1234	JOHN SMITH MD	2008/11/04	\$7,351.57	11/30/2008
FL0000378961	1234	JOHN SMITH MD	2008/11/04	\$209.23	11/30/2008
BB0007093287	1234	JOHN SMITH MD	2008/10/28	\$4,913.53	11/30/2008
FL0000376686	1234	JOHN SMITH MD	2008/10/28	\$449.46	10/31/2008



Thank you for viewing this presentation