

Your guide to submitting claim appeals online

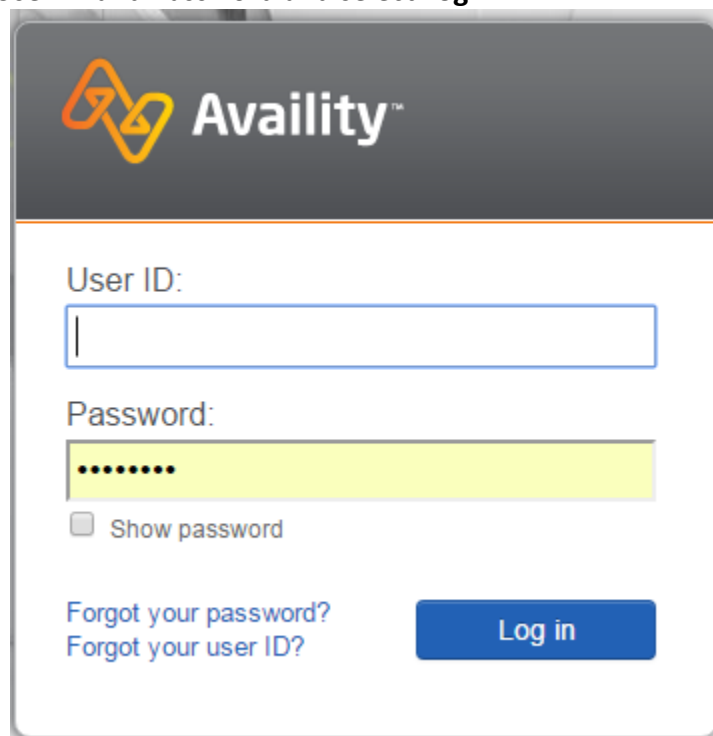
This guide will give you steps on how to submit claim appeals online and how to use Clear Claim Connection™ (C3) to verify code combinations.

Providers can access the Claims Submission Tool by logging in to the Availity Web Portal and initiating the request at <https://www.availity.com>.

From the Availity website

If you are navigating to the Claims Submission tool from <https://www.availity.com>:

Enter your Availity User ID and Password and select **Log in**.

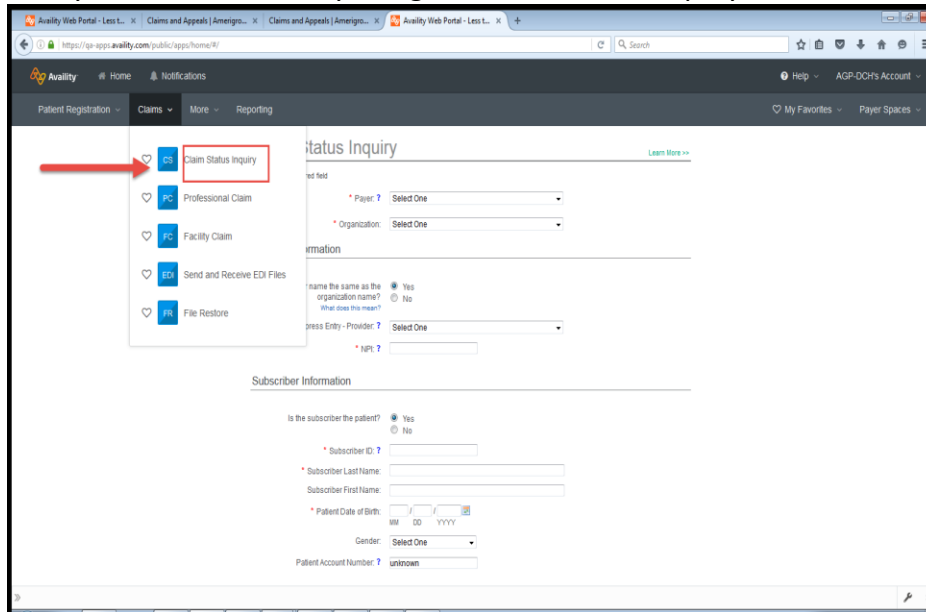


The image shows a screenshot of the Availity login interface. At the top left is the Availity logo, which consists of three interlocking orange and yellow shapes. To the right of the logo is the word "Availity" in a white sans-serif font. Below the logo and name is a white login form with a grey border. The form contains the following elements: a "User ID:" label above a white text input field; a "Password:" label above a white text input field with a yellow background and black dots; a "Show password" checkbox below the password field; a "Forgot your password?" link below the password field; a "Forgot your user ID?" link below the password field; and a blue "Log in" button to the right of the "Forgot your user ID?" link.

Once in Availity, you may begin appealing a claim.

Appealing a claim

1. Query the claim in Availity using the Claim Status Inquiry tool from the top navigation.



2. Select the desired claim.
3. Within the *Claims Status Detail* page, go to the *Claims Appeal* section and select **Dispute this claim**.

The screenshot displays the 'Claims Status Detail' page. It features a table with columns for dates, claim numbers, and amounts. Below the table, there is a section for 'Other Insurance Information' with a table showing 'Carrier' and 'Paid Amount'. A red arrow points to the 'Claims Appeal' link, which includes a sub-link for 'Dispute this claim'.

Date	Claim Number	Amount	Other Amount	Total
04/04/2015	04/04/2015 92552	\$ 50.00	\$ 26.66	\$ 76.66
04/04/2015	04/04/2015 G8482	\$ 1.00	\$ 0.00	\$ 1.00
04/04/2015	04/04/2015 G8510	\$ 1.00	\$ 0.00	\$ 1.00
		Total	\$ 202.00	\$ 63.55

Carrier ¹	Paid Amount ¹
N/A	\$ 0.00

[Claims Appeal](#)
[Dispute this claim](#)

¹ Represents data elements that are not required by HIPAA for this transaction

[Return to Results](#) [Edit Inquiry](#) [Print](#)

- The system will leave Availity (accept the action) and you will be redirected to the *Claims Dispute* form on the provider self-service website.
- Enter all of the required fields and select **Submit Dispute** to submit the appeal form.

Dispute a Claim To cancel this dispute [Close Window](#)

Claim Details

Provider ID 10014519
Provider NPI 1750399184
Provider Name Taghadosi, Maryam
Provider Address 1213 Hermann Dr Ste 770
Provider City Houston
Provider State TX
Provider Zip 770047031
Member ID 519761424
Member Last Name Wiley
Member First Name Raylon
Member Address 4118 Miramichi Ct
Member City Houston
Member State TX
Member Zip 770534551
Member DOB 01/22/2000
Date Of Service From 04/04/2015
Date Of Service To 04/04/2015
Claim Type HCFA

Who is the contact for this dispute? *required fields

First Name *
Last Name *
Street Address *
City *
State *
Zip *
Phone *
Fax *
Email
Preferred method of contact *

Please describe the reason for this dispute: *

Supporting Files
Attach any supporting documents for this request by selecting the file to attach below. You can attach up to 5 files for a total file size of 25 MB.
Files must be formatted as:
.pdf, .xls, .xlsx, .doc, .docx, .tif, or .tiff

No file chosen

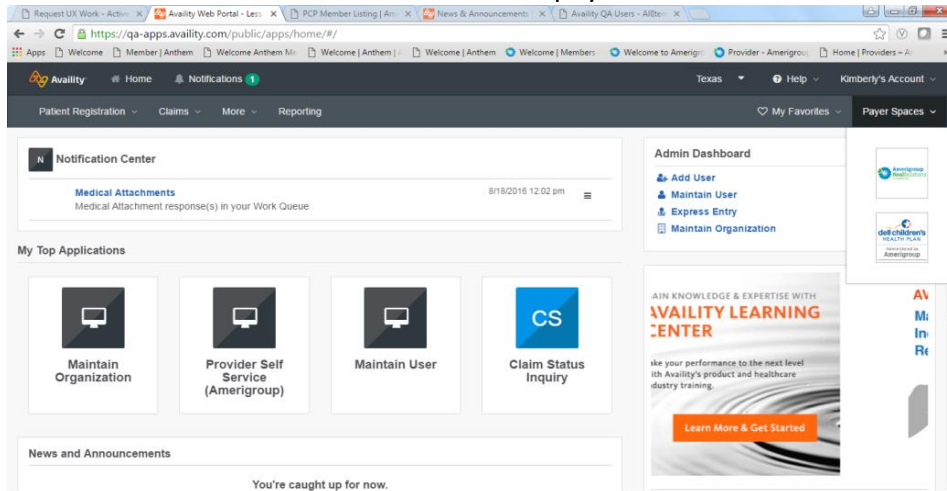
Clear Claim Connection

Dell Children's Health Plan offers an online code auditing reference tool, C3, which:

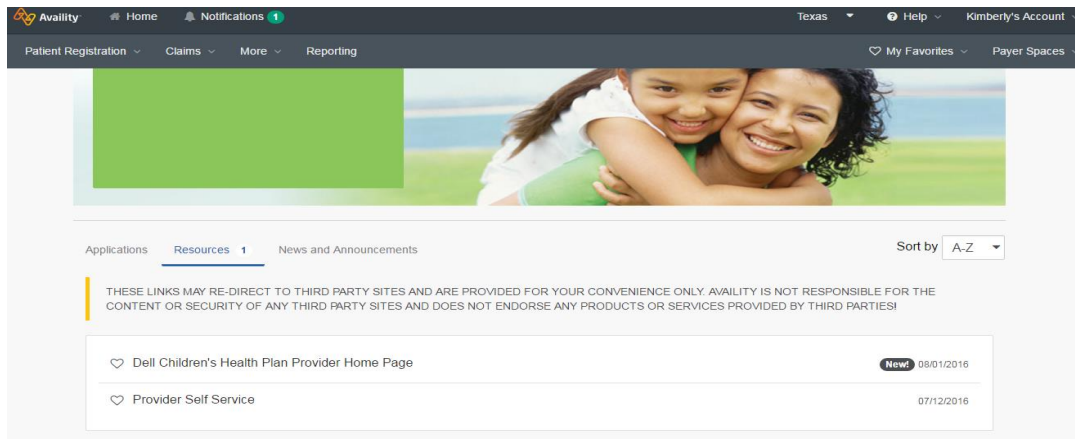
- Mirrors our current code-auditing software.
- Evaluates code combinations the same way they are reviewed during adjudication of a claim.
- Allows you to access our claim auditing rules and the clinical rationale built into our code auditing software.

To use C3:

1. Navigate to the Dell Children's Health Plan provider self-service website. Select **Payer Spaces**, and select the Dell Children's Health Plan payer icon.



Select the **Resources** tab, then select **Provider Self Service**. You will be prompted with a message indicating you're leaving Avality. Please accept the message.



You will be redirected to the Dell Children's Health Plan provider self-service website.

Home

Claims

Precertification

Medical

Members

Provider Education

Find a Doctor

News & Announcements

Effective December 1, 2016, Dell Children's Health Plan and Amerigroup to begin partnership

We are excited to announce that beginning December 1, 2016, we will begin partnering with Dell Children's Health Plan, which formerly partnered with Medview, to administer services to STAR and Children's Health Insurance Plan (CHIP) members in the Travis service delivery area. [Learn more.](#)

Useful Publications
Provider Updates & Communications ▶

Provider Manuals & Quick Reference Guides ▶

Viewing
Dell Children's Health ▼
Use the select above to choose another state ⓘ

Government Resources
[Texas Health and Human Services](#)
[CMS.gov](#)

Medicaid: 1-888-821-1108

Administered by Amerigroup

[Privacy](#) | [Terms of Use](#) | [Report Waste, Fraud, or Abuse](#)

2. Select **Claims** on the left navigation, and then select **Clear Claim Connection**.
3. Choose your market and select the check box beside "I agree to the Terms & Conditions" to continue. If you do not agree to the terms, you cannot use this tool.

Clear Claim Connection

Amerigroup administers claims on behalf of Dell Children's Health Plan. Dell Children's Health Plan offers as a web-based code auditing reference tool called Clear Claim Connection (C3). C3 "mirrors" how (Seton Health Plan's) current code auditing software evaluates code combinations during the adjudication of a claim. This tool allows you to access our claim auditing rules and clinic rationale inherent in the code auditing software.

This link uses POP UPS - Please ensure that your browser allows popups from this site!

Market:

1. Amerigroup Community Care licenses a code auditing reference tool on the Web (the "Application Hosting Services") that enables Amerigroup Community Care to disclose its code auditing rules and associated clinical rationale to Providers. Amerigroup Community Care provides access to such Application Hosting Services to its Providers subject to the terms and conditions contained in this agreement ("Agreement"), which may be updated from time to time at Amerigroup Community Care's or its licensors' sole discretion without notice.
2. Provider's right to access and use the Application Hosting Services is non-transferable, nonexclusive, and for the sole purpose of internal use within the United States.
3. Provider will limit access to the Application Hosting Services to (i) only employees and agents of Provider and (ii) only to the extent necessary to request the outcome of specific

I agree to the Terms & Conditions

[Clear Claim Connection](#)


Medicaid: 1-888-821-1108

Administered by Amerigroup

[Privacy](#) | [Terms of Use](#) | [Report Waste, Fraud, or Abuse](#)

4. Enter the member's information, the procedure codes, modifiers (if any) and the date of service.
5. Select the **Review Claim Audit Results** button.

Note: This tool does not guarantee payment. It mirrors our code edit logic for claims.



Clear Claim Connection™
McKesson Edit Development [Glossary](#) [About](#) [Help](#) [Logoff](#)

Claim Entry

Gender: Male Female
Date of Birth: / / (mm/dd/yyyy)
Claim Diagnoses: 1 2 3 4

Procedure	Units	Date of Service	Mod 1	Mod 2	Mod 3	Mod 4	Diag 1	Diag 2	Diag 3	Diag 4
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

[Add More Procedures>>](#)

Review Claim Audit Results
Clear

Copyright © 2016 McKesson Corporation and/or one of its subsidiaries. All rights reserved.

CPT only © 2015 American Medical Association. All rights reserved.