



Provider Portal Enhancements

*Claim Reconsiderations and Denial
Explanations*

6/17/2020

Denial Reason Explanations



absolute total care

Eligibility Patients Authorizations Claims Messaging Contact Us

Viewing Claims For: [] [] GO Upload EDI Create Claim

Claim Details

Claim # [] Denied

+Copy Claim Correct Claim

Claim Accepted In Process Denied

Member
Member Name: []
Member ID: []
Member DOB: []

Provider
Ref/Acct No.: []
Servicing Provider: []
Servicing NPI: []

Claim
DOS Range: 08/13/2018 - 08/13/2018
Received Date: 09/06/2018
Billed Amount: \$7,105.00

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Payment Amount	Payment Date	Check No.	Status	Payment Codes
1	08/13/2018	J0585	R252		11	\$5,850.00	\$0.00	09/11/2018	00001317 68	DENY	Nc,Aa
2	08/13/2018	J0585	R252	JW	11	\$650.00	\$0.00	09/11/2018	00001317 68	DENY	Zm,KA,Aa
3	08/13/2018	64842	R252		11	\$277.00	\$0.00	09/11/2018	00001317 68	DENY	KA,Aa
4	08/13/2018	64843	R252		11	\$182.00	\$0.00	09/11/2018	00001317 68	DENY	KA,Aa
5	08/13/2018	05874	R252		11	\$149.00	\$0.00	09/11/2018	00001317 68	DENY	KA,Aa

Denial Reason

Denial Code	Description
KA	Provider Medicaid ID required from member's state, register and resubmit
Zm	DENY: SERVICE NOT REIMBURSABLE AS BILLED PER MEDICAID GUIDELINES
Aa	PAY: SERVICE PROCESSED THRU COB AUTOMATION
Nc	DENY: MIN/MAX NOT VALID FOR HCPCS/NDC CROSSWALK

- New denial reason table has been added to show descriptions of denial codes.

Submitting Reconsiderations



absolute total care

Eligibility Patients Authorizations **Claims** Messaging Tyrion Lannister

Viewing Claims For: [] [] GO Upload EDI Create Claim

Back to Claims Claim Details

Claim # [] Denied

+ Copy Claim Correct Claim Reconsider Claim

Claim Accepted In Process Denied

Member

Member Name: []

Member ID: []

Member DOB: []

Provider

Ref/Act No.: []

Servicing Provider: []

Servicing NPI: []

Claim

DOS Range: 01/22/2019 - 01/22/2019

Received Date: 01/25/2019

Billed Amount: \$160.00

Service Lines

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Payment Amount	Payment Date	Check No.	Status	Payment Codes
1	01/22/2019	99213	S82132 D, S82112 D, W010X XD		22	\$160.00	\$0.00	02/01/2019		VOID	L6

- Within the **claims tab**, navigate to the **claim details page** of a paid or denied claim.
- The **reconsider claim button** will be visible unless a web-initiated reconsideration is already in progress.

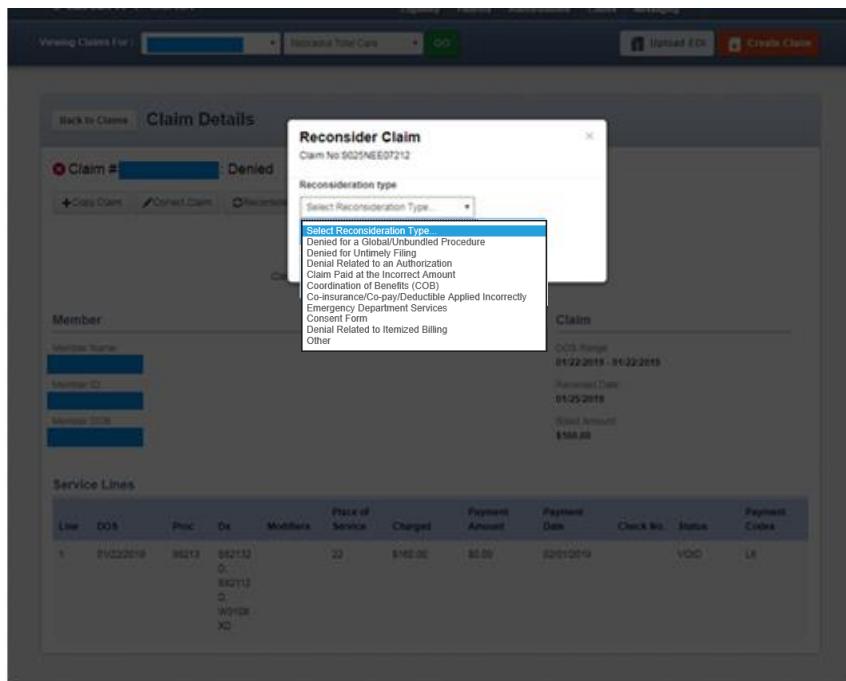
Submitting Reconsiderations Notice Enhancement

A screenshot of a web application pop-up window titled "Reconsider Claim". The window has a close button (X) in the top right corner. Below the title, there is a field for "Claim No:" with a greyed-out value. A pink shaded box contains the following text: "For reconsiderations only. Not for appeals/Claim disputes. Example: If an authorization was not obtained and/or you need to review for medical necessity, submit an appeal. Any submission on this form will be treated as a reconsideration. Please refer to your Provider Manual." Below this box is a "Reconsideration Type" label and a dropdown menu with the text "Select Reconsideration Type...". At the bottom of the window are two buttons: a "Cancel" button and a green button with a right-pointing arrow.

- Select **reconsider claim** to open reconsider claim pop-up window with a **reconsideration type** dropdown.

Submitting Reconsiderations

Selecting Reconsideration Type



- From the dropdown, select a **reconsideration type**.
- Examples:
 - “Denied for Global/ Unbundled Procedure”
 - “Denied for Untimely Filing”
 - “Other”

Note: The Claims Tracker is only for reconsiderations. Providers are not to use this for appeals.

Submitting Reconsiderations Entering Information

A screenshot of the Absolute Total Care web application showing a 'Reconsider Claim' modal window. The modal is titled 'Reconsider Claim' and contains the following fields and sections:

- Reconsideration type:** A dropdown menu with 'Denied for Untimely Filing' selected.
- Notes:** A text area with the label 'Brief Explanation' containing placeholder text: 'Lorem ipsum dolor sit amet, consectetur adipiscing elit. Sed interdum et ipsum eget tempor. Fusce suscipit in nulla sit amet accumsan. Aenean lectus nibh, pretium ac duis sit amet, ullamcorper fermentum elit.'
- Upload Documents:** A section with the label 'Proof of Timely Filing attachment Required' and a 'Choose Files' button.
- Uploaded files:** A section showing a file named 'SampleAttachment.JPG' with a 'Choose Files' button next to it.
- Note:** A small note at the bottom of the modal: 'Note: Please upload files less than 5MB each and supported File Formats are PDF, tiff, tif, Jpeg'.
- Buttons:** 'Cancel' and 'Submit' buttons at the bottom.

Three red arrows point to the 'Notes' text area, the 'Choose Files' button under 'Upload Documents', and the 'SampleAttachment.JPG' file name.

- The window then provides the ability to add notes and upload documents.
 - This form is dynamic; depending on the dropdown item selected, notes and/or documents may be required

Email Updates

A screenshot of the Absolute Total Care portal showing a 'Reconsider Claim' modal form. The form is overlaid on a 'Claim Details' page. The modal has a title 'Reconsider Claim' and a close button. It contains a 'Claim No.' field, a 'Reconsideration Type' dropdown menu, a 'Notes' section with a text area containing 'Test' and a '245 Characters Left' indicator, an 'Upload Documents' section with a 'Choose Files' button, and an 'Email Updates' section with a checkbox and a note: 'Note: Please upload files less than 5MB each and supported file formats are PDF, TIFF, TIF, JPEG, JPG'. At the bottom of the modal are 'Cancel' and 'Submit' buttons. Two pink arrows point to the 'Submit' button and the 'Email Updates' checkbox. The background shows a 'Denial' status with a table of denial codes and amounts.

- Providers may opt in or out of email updates using the **email updates checkbox**.
- Email updates are triggered when reconsideration letters are posted.
- A provider's email address populates from portal. It is not editable on the form.
- Emails will only generate for submitted cases.
- Select **submit** after populating all required fields.

Submitting Reconsiderations Updated Tracker



The screenshot displays the 'Claim Details' page in the Absolute Total Care system. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, and Messaging, along with the user name 'Tyron Lamaster'. Below this is a search bar for 'Viewing Claims For' and buttons for 'Upload EDI' and 'Create Claim'. The main content area shows a 'Claim #' field with a 'Reconsideration' button next to it. A green success banner reads 'Your Reconsideration request has been submitted Successfully.' Below this is a progress tracker with five stages: 'Claim Accepted' (green checkmark), 'In Process' (green checkmark), 'Denied' (red X), 'Submitted' (green checkmark), and 'Outcome TBD' (grey circle). A 'RECONSIDERATION' label is positioned above the 'Submitted' and 'Outcome TBD' stages. Below the tracker are sections for 'Member', 'Provider', and 'Claim' details. The 'Service Lines' table is also visible.

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Payment Amount	Payment Date	Check No.	Status	Payment Codes
1	01/22/2019	99213	S82132 D, S82112 D, W010X XD		22	\$160.00	\$0.00	02/01/2019		VOID	LE

- Upon submission, a success banner will be displayed.
- The tracker graphic will be updated to reflect that a reconsideration is in progress.
- The **reconsider claim button** will no longer be available.

Reconsideration Details Upcoming Functionality



The screenshot shows the 'Claim Details' page for a 'Reconsideration' claim. At the top, there's a navigation bar with 'absolute total care' logo and user 'Tyron Lanister'. Below it, a search bar and 'Upload EDI' and 'Create Claim' buttons. The main content area has a 'Claim Details' header and a 'Reconsideration' status indicator. A progress bar shows the claim's history: Claim Accepted (green check), In Process (green check), Denied (red X), Submitted (green check), and Outcome TBD (grey circle). A red arrow points to the 'Reconsideration Details' table below.

Created Date	Type	Current Status	Reference #
01/01/2019	General Correspondence	New	[REDACTED]
02/02/2019	COB Correspondence	Resolved	[REDACTED]

Member	Provider	Claim	Payment	
Member Name: [REDACTED]	Ref/Acct No.: [REDACTED]	DOS Range: 10/10/2018 - 10/10/2018	Payment Date: 10/11/2018	Granted Claim Amount: \$68.00
Member ID: [REDACTED]	Servicing Provider: [REDACTED]	Received Date: 10/10/2018	Check Number: 123456789	Total Check Amount: \$75.00
Member DOB: [REDACTED]	Servicing NPI: [REDACTED]	Billed Amount: \$300.24	Check Dated: 10/10/2018	Included Claim Numbers View all

- The **reconsideration details table** has one entry per reconsideration.
 - Entries include: Created Date, Type, Current Status, Reference Number

Additional Attachments



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Eligibility Patients Authorizations Claims Messaging Test Etest

Viewing Claims For: [] GO Upload EDI Create Claim

Claim Details

Claim # [] Denied

+ Copy Claim Correct Claim

Claim Accepted In Process Denied In Process Outcome TBD

Reconsideration Details

Created Date	Type	Current Status	Reference Number	Tools
06/05/2019	General Correspondence	OPEN	[]	[] []


Member: Member Name, Member ID, Member DOB

Provider: Ref/Acct No., Servicing Provider, Servicing NPI

Claim: DOS Range, Received Date, Billed Amount

Service Lines

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	11/23/2018	J7620	J449		12	\$156.75	\$0.00	03/26/2019		DENY	6N,Ku
2	11/23/2018	Q0513	J449		12	\$33.00	\$0.00	03/26/2019		DENY	46,Ku

- Select the **paperclip icon** () in the reconsideration details table to view and add additional references and/or attachment(s) to ongoing reconsideration cases.

Additional Attachments View Files



The screenshot shows the Absolute Total Care web application interface. At the top, there are navigation elements including "Viewing Claims For:", "Nebraska Total Care", and buttons for "Upload EDI" and "Create Claim". The main content area is titled "Claim Details" and shows a claim status of "Denied". A modal window titled "Upload/View Files for Reference Number:" is open, displaying an "Upload Documents" section with a "Choose Files" button and a list of "Previously Uploaded Files" including "SampleFile1.docx_05_June_2019" and "SampleFile2.pdf_05_June_2019". A pink arrow points to the "Choose Files" button. Below the modal, there are fields for member and provider information, and a "Service Lines" table.

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	11/23/2018	J7620	J449		12	\$158.75	\$0.00	03/26/2019		DENY	6N,Ku
2	11/23/2018	Q0513	J449		12	\$33.00	\$0.00	03/26/2019		DENY	46,Ku

- Files will appear with original file name and appended date.
 - Special characters will be removed from file name.
- Files can be downloaded and opened by clicking on the document name.

Additional Attachments Upload Files

A screenshot of the Absolute Total Care web portal. The main page shows "Claim Details" for a denied claim. A modal window titled "Upload/View Files for Reference Number:" is open, displaying a "Choose Files" button and three sample files: "SampleFile3.jpeg", "SampleFile4.jpeg", and "SampleFile5.jpeg". Below the files, there is a note about file size and format, and a list of "Previously Uploaded Files" with links to "SampleFile1.jpeg_05_June_2019" and "SampleFile2.pdf_05_June_2019". The modal also has "Cancel" and "Submit" buttons. In the background, a table of "Service Lines" is visible, showing two lines with a status of "DENY".

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	11/23/2018	J7820	J449		12	\$156.75	\$0.00	03/26/2019		DENY	6H,Ku
2	11/23/2018	Q0513	J449		12	\$33.00	\$0.00	03/26/2019		DENY	46,Ku

- Selected documents will display next to the **choose files button**.
- Each submission is limited to five files.
- There is no limit on the number of successive submissions.

Additional Attachments Success Banner



The screenshot displays the Absolute Total Care web application interface. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, and Messaging, along with a 'Test Etest' dropdown. Below the navigation bar, there is a 'Viewing Claims For:' section with a dropdown menu and a 'GO' button. To the right of this section are 'Upload EDI' and 'Create Claim' buttons.

The main content area is titled 'Claim Details' and includes a 'Back to Claims' link. The claim status is shown as 'Denied'. There are buttons for '+ Copy Claim' and 'Correct Claim'. A green success banner with a checkmark icon and the text 'Your attachment has been submitted successfully.' is displayed, with a red arrow pointing to it. Below the banner is a progress bar with five stages: 'Claim Accepted' (green checkmark), 'In Process' (green checkmark), 'Denied' (red X), 'In Process' (green checkmark), and 'Outcome TBD' (grey circle). A 'RECONSIDERATION' bracket spans the 'Denied' and 'In Process' stages.

Below the progress bar is a 'Reconsideration Details' table:

Created Date	Type	Current Status	Reference Number	Tools
06/05/2019	General Correspondence	OPEN	[Redacted]	[Icons]

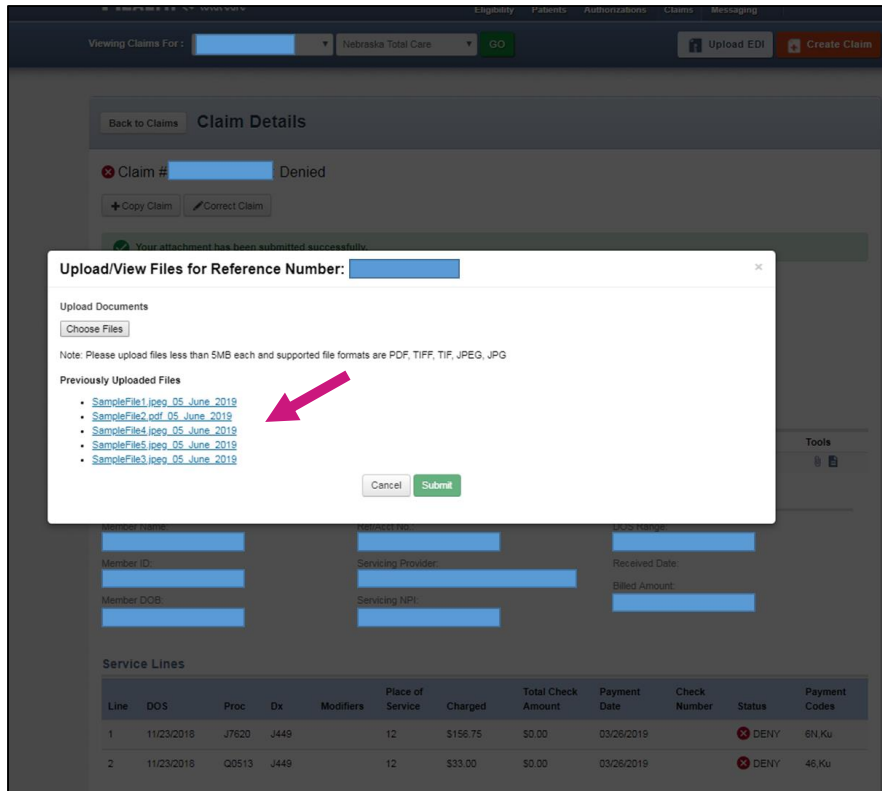
Below the table are three sections: 'Member', 'Provider', and 'Claim', each with redacted fields.

At the bottom is a 'Service Lines' table:

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	11/23/2016	J7620	J449		12	\$156.75	\$0.00	03/26/2019		⊗ DENY	6N,Ku
2	11/23/2016	Q0513	J449		12	\$33.00	\$0.00	03/26/2019		⊗ DENY	46,Ku

- Upon upload of files, a success banner is displayed.

Additional Attachments View Files



- To view files, navigate back to pop-up by clicking the **paperclip icon** (📎).
- Files can be downloaded and opened by clicking on the document name.

Reconsideration Letters



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Eligibility Patients Authorizations Claims Messaging Test Etest

Viewing Claims For: [] [] GO Upload EDI Create Claim

Back to Claims Claim Details

✖ Claim # [] Denied

+ Copy Claim Correct Claim

RECONSIDERATION

Claim Accepted In Process Denied In Process Outcome TBD

Reconsideration Details

Created Date	Type	Current Status	Reference Number	Tools
06/05/2019	General Correspondence	OPEN	[]	[] []

Member Provider Claim


Member Name: [] Refl/Act No.: [] DOS Range: []

Member ID: [] Servicing Provider: [] Received Date: []

Member DOB: [] Servicing NPI: [] Billed Amount: []

Service Lines

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	11/23/2018	J7620	J449		12	\$156.75	\$0.00	03/26/2019		✖ DENY	6N.Ku
2	11/23/2018	Q0513	J449		12	\$33.00	\$0.00	03/26/2019		✖ DENY	46.Ku

- Select the **reconsideration letter icon** () to view letters associated to a reconsideration case.
 - This includes acknowledgement and outcome letters.
 - The frequency of letters is dependent on CenPAS operations.

Reconsideration Case Letters



The screenshot displays the Absolute Total Care claims management interface. At the top, it shows "Viewing Claims For: [redacted] Nebraska Total Care" with "GO", "Upload EDI", and "Create Claim" buttons. The main section is titled "Claim Details" and shows a claim status of "Denied". A pink arrow points to a green notification banner that reads "Your Reconsideration request #S164NEW00002 has been submitted successfully". Below this, a white pop-up window titled "Reconsideration Letters for Reference Number: [redacted]" is displayed, containing the text "No records found". Below the pop-up, there are status indicators for "Claim Accepted", "In Process", "Denied", "In Process", and "Outcome TBD". At the bottom, there is a "Reconsideration Details" table.

Created Date	Type	Current Status	Reference Number	Tools
06/13/2019	Denied for Global/Unbundled Procedure	Open	[redacted]	[download icon] [print icon]

Member	Provider	Claim	Most Recent Payment	
Member Name: [redacted]	Ref/Acct No.: [redacted]	DOS Range: [redacted]	Payment Date: [redacted]	Granted Claim Amount: [redacted]
Member ID: [redacted]	Servicing Provider: [redacted]	Received Date: [redacted]	Check Number: [redacted]	Total Check Amount: [redacted]
Member DOB: [redacted]	Servicing NPI: [redacted]	Billed Amount: [redacted]	Check Dated: [redacted]	

- Files can be downloaded and opened by clicking on the document name.

Updates

Claims Details Page Design



Claim # [redacted] : Denied

+ Copy Claim / Correct Claim

✓ Your Reconsideration request # [redacted] has been submitted successfully.

✓ Claim Accepted →
 ✓ In Process →
 ✗ Denied →
 ✓ In Process →
 ○ OUTCOME TBD

RECONSIDERATION

Reconsideration Details

Created Date	Type	Current Status	Reference Number	Tools
06/11/2019	Denial Related to an Authorization	OPEN	[redacted]	[Tools]

Member | Provider | Claim | Most Recent Payment

Member Name: [redacted] | Ref/Acct No.: [redacted] | DOS Range: [redacted] | Payment Date: [redacted] | Granted Claim Amount: [redacted]

Member ID: [redacted] | Servicing Provider: [redacted] | Received Date: [redacted] | Check Number: [redacted] | Total Check Amount: [redacted]

Member DOB: [redacted] | Servicing NPI: [redacted] | Billed Amount: [redacted] | Check Dated: [redacted]

Service Lines

Line	DOS	Proc	Dx	Modifiers	Place of Service	Charged	Total Check Amount	Payment Date	Check Number	Status	Payment Codes
1	05/13/2019		Q059, N319, R32, K592		12	\$381.92	\$0.00	06/11/2019		✗ DENY	L6,Ku

Denial Reason

Denial Code	Description
L6	DENY: BILL PRIMARY INSURER 1ST RESUBMIT WITH EOB
Ku	INFORMATIONAL-RE-ADJUDICATION PROCESS EX CODE

- New fields in the most recent payment section include:
 - Payment Date
 - Check Number
 - Check Dated
 - Total Check Amount



Questions?