



# AmeriHealth Caritas Pennsylvania Claims Investigation



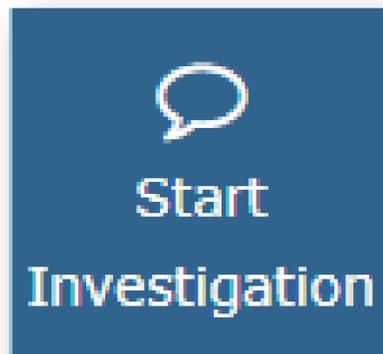
The **Claim Inquiry** function, also referred to in this guide as a Claim Investigation, allows ancillary, facility and professional providers the ability to submit a claim inquiry on claims that were previously finalized. For each submitted transaction, users will receive an electronic response indicating if the claim was adjusted or an explanation why it was not adjusted. This new feature is for individual claims, if users have a large claim project please continue to contact your Provider Account Executive.

This guide was designed to help you:

- Submit a Claim Inquiry
- Review/ Search the Investigation List
- Enable Notifications
- Start a new Claim Investigation



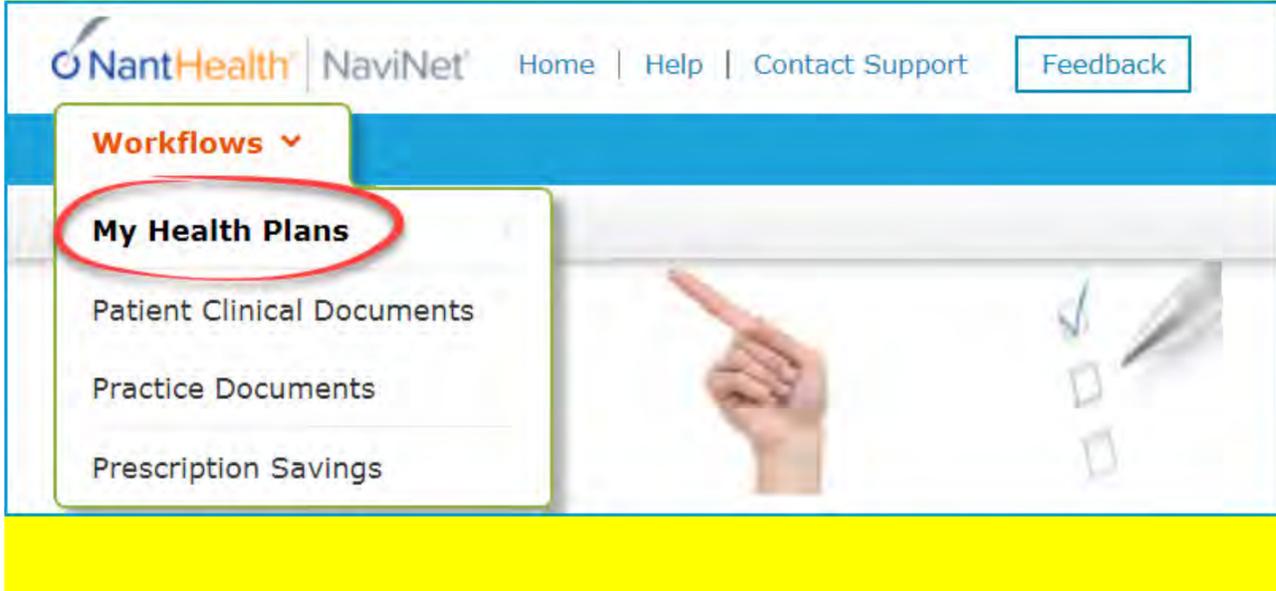
# Claim Status Inquiry Workflow



Starting a Claim Investigation (Inquiry)

Sign in to navigate to the NaviNet Open Home screen.

Under Workflows on the NaviNet toolbar, select My Health Plans. Select AmeriHealth Caritas Pennsylvania



On the Plan Central screen: Select Claim Status on the Workflows for this Plan menu.



The Claim Status Search screen appears: Enter claim search criteria and click Search

A screenshot of the 'Claim Status: Search' screen. At the top, there are links for '< Back to' and 'Claim Status:'. Below the title 'Claim Status: Search', there is a 'Print' link and a note: 'Online Remittance Advice will be available for claims paid on or after 01/04/2016.' A 'Reset Search Fields' link is also present. The form includes several input fields: 'Billing Entity' (with placeholder 'Type Name or ID to find provider...'), 'Patient Details' section with 'Member ID', 'Last Name', 'First Name' (with 'Optional' placeholder), and 'Date of Birth' (with 'mm/dd/yyyy' placeholder). The 'Claim Status Details' section includes 'Service Start' (08/17/2017) and 'Service End' (11/15/2017), both with calendar icons, and a 'Claim ID' field (with 'Optional' placeholder). At the bottom right, there is a 'Reset Search Fields' link and a green 'Search' button circled in red.

*Note: Fields not marked optional are required.*

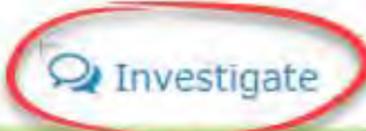
In the action bar, on the top-right of the screen, click Investigate.

An Investigation window opens

[← Back to Claim Status Search](#) | Claim Status:

## Claim Status Details

**LACI SMITH**  
Born on 01/01/2000

 Investigate  View/Print

 Finalized (Claim Status as of 10/09/2017) Claim ID:20000000000 Service Dates: 09/23/2017 to 09/23/2017

<b>INSURANCE DETAILS</b> Health Plan Member ID: 555555555	<b>Total Billed:</b>	<b>\$275.00</b>
<b>BILLING ENTITY</b> SMITHTOWN PEDIATRICS Tax ID: 012345678 Provider PIN: 123456	<b>Total Paid:</b>	<b>\$0.00</b>

## Start Investigation

- In the blue panel on the left of the investigation screen is a **Start Investigation** icon. Click this to create a new message.

## Reason For Investigation

- Select the reason for the investigation by selecting one of the options in the dropdown.

### Select reason for investigation ...

Eligibility Updated  
Authorization Updated/On File  
TPL/COB Changed  
Duplicate Payment Received  
Claim Underpaid  
Claim Overpaid

## Investigation Details

- Enter inquiry details. Please be as specific as possible when entering your inquiry.

## Contact Information

- Enter in your contact information.

## Send Investigation

- Click **Send**.

### Start Investigation

**LACI SMITH**  
55555555

Date of Service	Claim ID	Billed Amount	✓ Finalized
09/23/2017 to 09/23/2017	200000000000	\$275.00	

Reason:

2000 characters left

#### Contact Information

Ext:

*Email address is required but notifications will not be sent via email.*

# The inquiry will now appear in your Investigation List

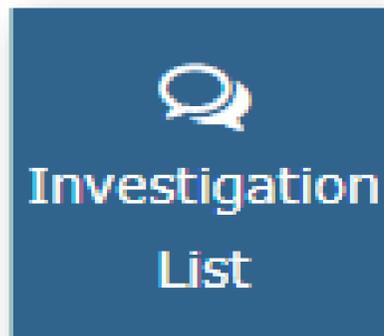
The screenshot displays a web application interface for an 'Investigation List'. On the left is a vertical navigation menu with three items: 'Start Investigation' (with a speech bubble icon), 'Investigation List' (with a speech bubble icon and highlighted in dark blue), and a third item (partially visible). The main content area is titled 'Investigation List' and contains a card for a claimant named 'LACI SMITH' with ID '55555555'. The card includes a table with the following data:

Date of Service	Claim ID	Billed Amount	Status
09/23/2017 to 09/23/2017	2000000000000	\$275.00	Finalized

Below the table, a red oval highlights a section titled 'Claim Overpaid' with a blue arrow icon. Under this section, there are two columns: 'Raised on' with the value 'Today' and 'Reference' with a plus sign icon. At the top right of the main content area, there are three buttons: 'Status Details', 'Start New Investigation', and 'View/Print'.



# Claim Status Inquiry Workflow



Continuing Claim Investigations (Inquiry)

# Investigation List

## Status Details

- On the upper-left of the window is a blue Status Details link. Click this to be redirected to the claim details page.

## Start New Investigation

- On the upper-right of the Investigation screen is a Start New Investigation link. Click this to create a new message for the health plan.

## View/Print

- View /Print Claim Investigation

## Investigation List

- In the blue panel on the left of the investigation screen is an Investigation List icon. Click this to see the list of existing investigations.

The screenshot shows a web application interface for an investigation list. At the top left, there is a blue sidebar with a 'Start Investigation' button and an 'Investigation List' button (highlighted with a red border). The main content area has a header with a 'Back to Investigation List' link and three action buttons: 'Status Details', 'Start New Investigation', and 'View/Print'. Below the header, a claim entry for 'LACI SMITH' (ID: 55555555) is shown with a table of details: Date of Service (09/23/2017 to 09/23/2017), Claim ID (200000000000), Billed Amount (\$275.00), and a 'Finalized' status with a green checkmark. Below this is a 'Claim Overpaid' section with a table for 'Raised on' (Today) and 'Reference' (--). At the bottom, there are two messages: one from 'Jennifer Jones' about eligibility updates and a 'NEW' notification about responding to a request within 10 business days.

## Claim Status

- On the upper-right of the Investigation screen, the status of the claim is displayed.

## NEW

- In the Investigation List view, if responses from the health plan are unread, a red NEW icon appears next to the message

# Communication between You & The Health Plan

The screenshot displays a web application interface for managing investigations. On the left is a vertical navigation menu with two items: 'Start Investigation' (top) and 'Investigation List' (bottom, highlighted with a red border). The main content area is titled 'Back to Investigation List' and contains the following information:

- Member Information:** LACI SMITH, 55555555
- Actions:** Status Details, Start New Investigation, View/Print
- Investigation Details:**

Date of Service	Claim ID	Billed Amount	Status
09/23/2017 to 09/23/2017	200000000000	\$275.00	Finalized
- Claim Overpaid:**

Raised on	Reference
Today	--

Below the investigation details is a communication log with a timeline starting at 'Today'. The log shows two messages:

- User:** Jennifer Jones: Hello, the member's eligibility has been updated, please review for claim adjustment.
- Health Plan:** **NEW** Thank you for your response, we will respond to your request within 10 business days.

# View/Print your Claim Investigation Communications

[Back to Investigation List](#)

[Status Details](#)
[Start New Investigation](#)
[View/Print](#)

**LACI SMITH**  
 55555555

Date of Service	Claim ID	Billed Amount	Finalized
09/23/2017 to 09/23/2017	200000000000	\$275.00	✓

**Claim Overpaid**

Raised on	Reference
Today	--

Today

Jennifer Jones Hello, the member's eligibility has been updated, please review for claim adjustment.

**NEW** Thank you for your response, we will respond to your request within 10 business days.

**Claim Overpaid**

Raised on:	Reference:
11/15/2017	--

**Patient Details**

Patient Name:	Member ID:	Date of Birth:
LACI SMITH	55555555	01/01/2000

**Claim Details**

Claim ID:	Date of Service:	Claim Value:	Status:
200000000000	09/23/2017 to 09/23/2017	\$275.00	✓ Finalized

11/15/2017

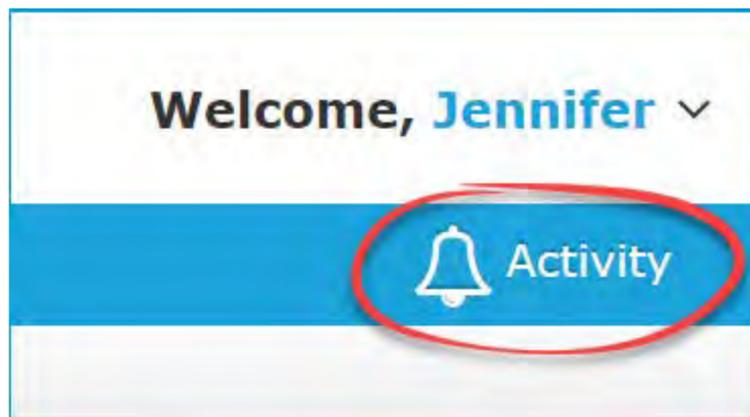
Jennifer Jones Hello, the member's eligibility has been updated, please review for claim adjustment.

Health Plan Thank you for your response, we will respond to your request within 10 business days.

The reference field will not be populated.



# Claim Investigations



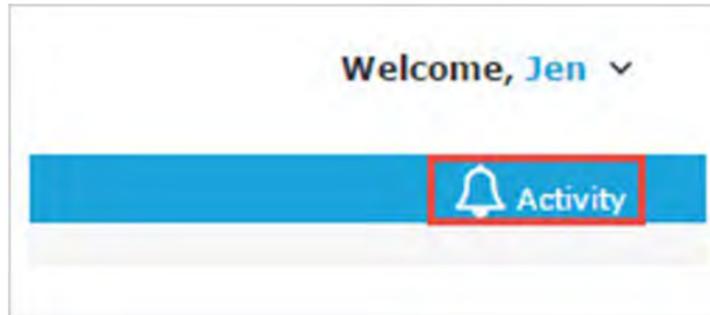
## Enabling Notifications

How will I be notified once AmeriHealth Caritas Pennsylvania responds to my inquiry?

## Settings Tab Enabling Notifications

Sign in to navigate to the NaviNet Open Home screen.

Click Activity located on the top right of your NaviNet toolbar.

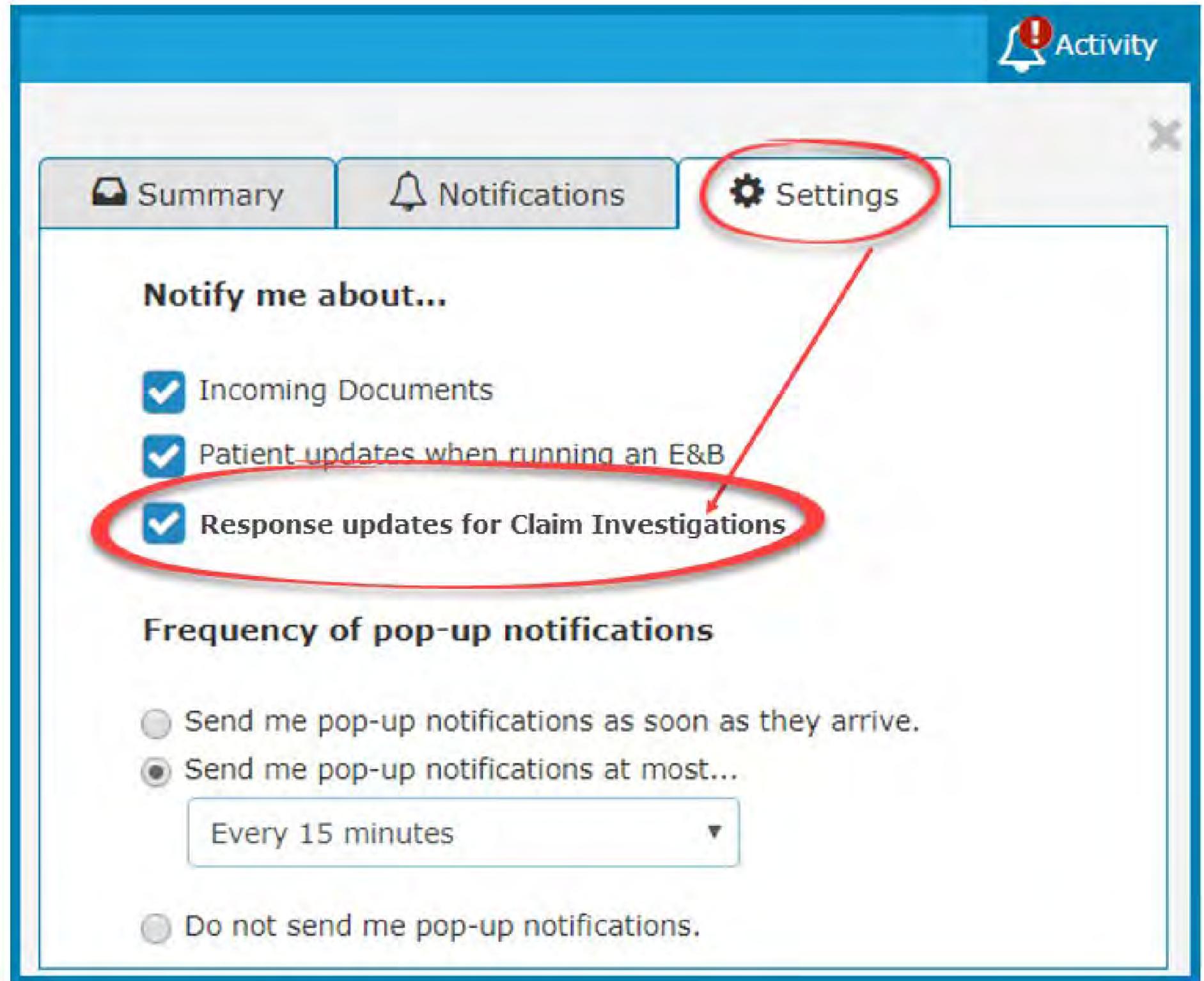


Select the Settings tab.

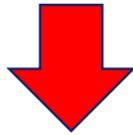
Check the Response updates for Claim Investigation box.

Select the frequency in which you would like to receive you notifications.

# Enabling Claim Investigation Notifications

A screenshot of the NaviNet "Activity" settings window. The window has a blue header with a bell icon and the word "Activity". Below the header are three tabs: "Summary", "Notifications", and "Settings". The "Settings" tab is selected and circled in red. A red arrow points from the "Settings" tab to the "Response updates for Claim Investigations" checkbox, which is also circled in red. The "Notify me about..." section contains three checked checkboxes: "Incoming Documents", "Patient updates when running an E&B", and "Response updates for Claim Investigations". The "Frequency of pop-up notifications" section has three radio button options: "Send me pop-up notifications as soon as they arrive.", "Send me pop-up notifications at most..." (selected), and "Do not send me pop-up notifications.". Below the selected radio button is a dropdown menu showing "Every 15 minutes".

NOTE: Responses will be available to view for 7 days from the date of notification.



Welcome, Jen ▾

Activity

**Claim Investigation Response Available**

A claim investigation response for Laci Smith has been posted by Health Plan.

[View Response](#)

Start Investigation

Investigation List

Back to Investigation List

Status Details Start New Investigation View/Print

**LACI SMITH**  
55555555

Date of Service	Claim ID	Billed Amount	Finalized
09/23/2017 to 09/23/2017	200000000000	\$275.00	✓

**Claim Overpaid**

Raised on	Reference
Today	--

Today

Jennifer Jones Hello, the member's eligibility has been updated, please review for claim adjustment.

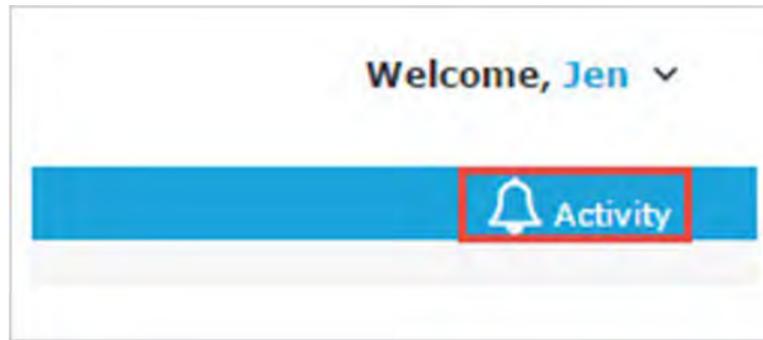
**NEW** Thank you for your response, we will respond to your request within 10 business days.

Once you have enabled the Claims Investigations Notifications you will begin receiving updates for existing claim inquiries you sent to AmeriHealth Caritas Pennsylvania

# Notifications Tab

Sign in to navigate to the NaviNet Open Home screen

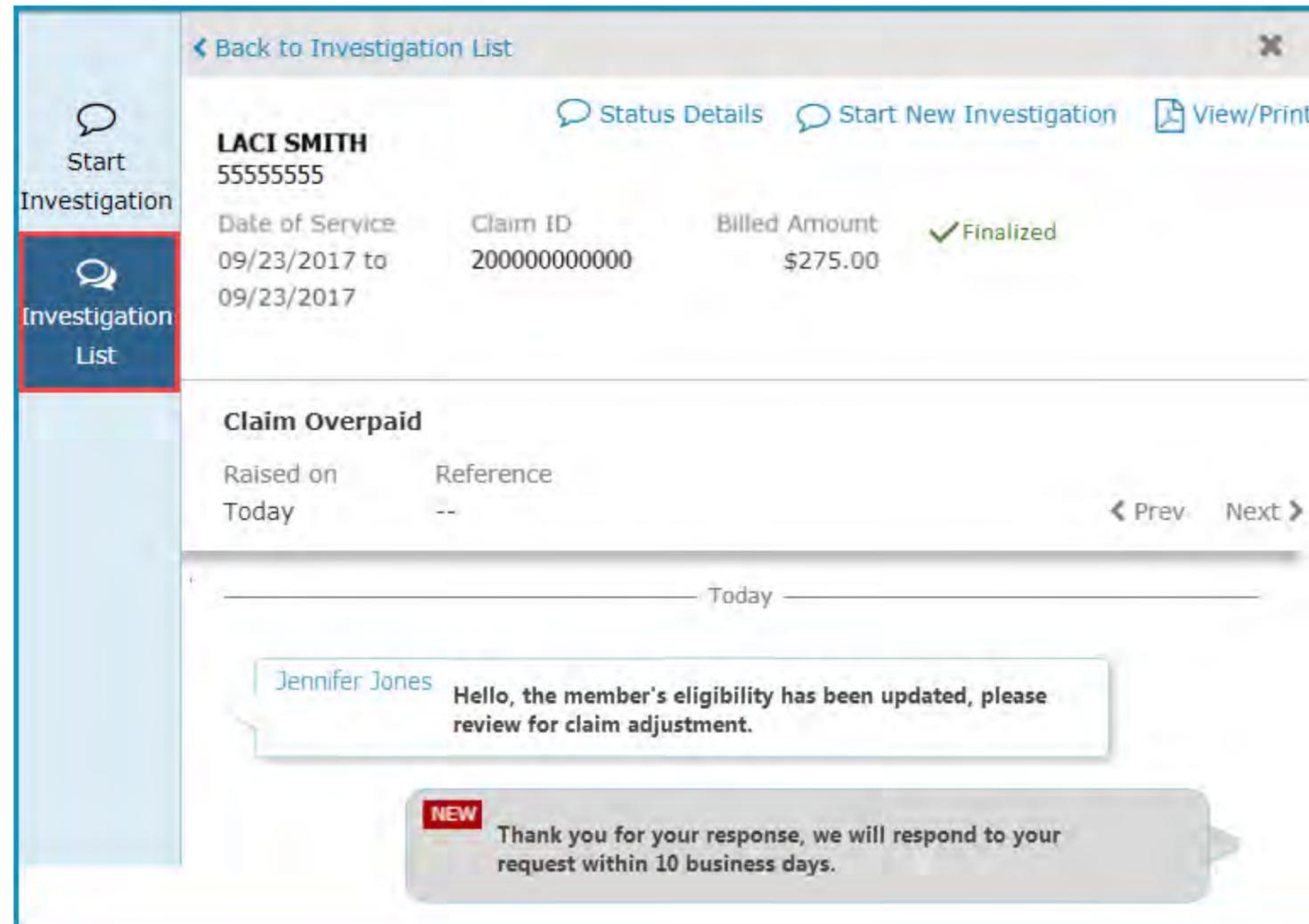
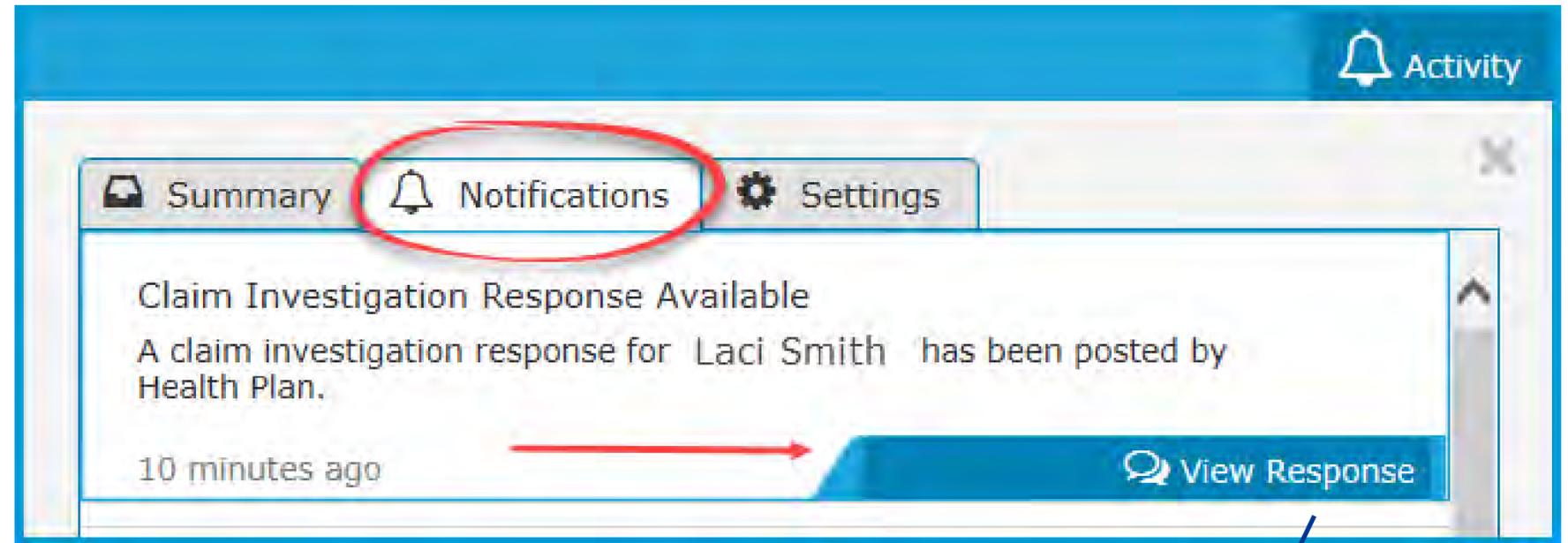
Click Activity located on the top right of your NaviNet toolbar



Select the Notifications tab

Hover over the bottom section of each notification to View Response

Click on Open Investigations to view Claim Investigations sent to the Health Plan



# Start New Investigation From Investigation List

Investigation List

Start Investigation

Investigation List

**LACI SMITH**  
55555555

Date of Service: 09/23/2017 to 09/23/2017

Claim ID: 200000000000

Billed Amount: \$275.00

Finalized

Status Details

**Start New Investigation**

On the upper-right of the Investigation screen is a Start New Investigation link. Click this to create a new message for AmeriHealth Caritas Pennsylvania.

Start Investigation

**LACI SMITH**  
55555555

Date of Service: 09/23/2017 to 09/23/2017

Claim ID: 200000000000

Billed Amount: \$275.00

Finalized

Reason: Select reason for investigation ...

Enter investigation details ...

2000 characters left

**Contact Information**

First name ... Last name ...

Email address ...

Telephone number ... Ext: Optional

Cancel Send

# Status Details

Investigation List

Start Investigation

Investigation List

**LACI SMITH**  
55555555

Date of Service: 09/23/2017 to 09/23/2017

Claim ID: 200000000000

Billed Amount: \$275.00

✓ Finalized

Status Details

Start New Investigation

On the upper-left of the window is a blue Status Details link. Click this to be redirected to the claim details page.

# Claims Details Page

Back to Claim Status Search | Claim Status:

Claim Status Details | **LACI SMITH**  
Born on 01/01/2000

Investigate View/Print

✓ Finalized (Claim Status as of 10/09/2017) Claim ID: 200000000000 Service Dates: 09/23/2017 to 09/23/2017

**INSURANCE DETAILS**  
Health Plan  
Member ID: 55555555

**BILLING ENTITY**  
SMITHTOWN PEDIATRICS  
Tax ID: 012345678  
Provider PIN: 123456

**Total Billed: \$275.00**

**Total Paid: \$0.00**