

# **PAYERPATH DAILY INSTRUCTIONS**

## **I. Verifying Transmission totals**

- 1. Sign in to Payerpath, check Upload Summary pie chart on bottom left corner of the WELCOME screen to ensure date/graph has been updated by the latest transmission date. This Pie Chart and date verifies your latest transmission of claims have come into Payerpath.**
- 2. Go to Reports/Upload Reconciliation. This report will provide you: a) the # of Claims received by carrier and then by total dollar amount for the transmission. (Look for the Yellow TOTALS line) This will balance back to your Claims To Be Printed report from the application b) The 2<sup>nd</sup> part of this report TRACKS the claims through Payerpath. Different sections will show you 1) Deleted claims 2) Claims SENT to the carrier 3) Remaining claims in PP and their current status.**
- 3. Go to Reports/Upload Detail Report – Print VIEW mode for the transmission date you are reviewing. (this report replaces the Accept/Reject Report and explains why claims failed in Payerpath. It will give you the claim Detail for ONLY the Failed claims. You will get the complete claim detail including the reason for the claim failure.).**  
**\*You can also check the last page of the report to make sure it balances to the amount of claims on your Claims to Be Printed List.**

## **II. Working Failed Claims**

**From the Menu bar: Go to Claims/View Claims.**

**From the Claim Filter screen: select – ALL Payers and FAILED status. It will open up a Failed Claims list – you do not have to enter dates because you are only showing claims that were NOT transmitted due to a front end claim failure.**

- 1. Correct as many of the claims as you can, after they change to a “PASS” status you can send them all to the carrier at one time. Go to Tools and select ‘Send All’. ( Passed claims will not send automatically). Once claims are in a “S” Marked for**

Send status, you do not have to do anything further with those claims.

2. Use your Upload Detail report in the VIEW mode to make any required Manual notes per claim. For all File Maintenance and Patient demographic corrections you made in Payerpath, go back into PM/Tiger and make corrections in the Allscripts application screens & save work.
3. Payerpath DELETED claims: Any claims that have to be fully corrected in the PM/Tiger application, ( generally because of financial reasons) will need to be deleted from Payerpath. Payerpath claims displayed in blue indicate the claim will drop to paper because you are missing your TSPID. If there is a valid TSPID that can be added to the Insurance company file: Delete claim out of Payerpath, go into PM/Tiger, load TSPID then refile claim from PM/Tiger.
4. PAYER Reports: Go back into Payerpath and from the Menu bar select Reports/Payer.

Review all Carrier reports daily and for any errors that need to be corrected, go back into the PM/Tiger application to make changes and refile.

**NOTE:** Payer report claim rejection errors **MUST** be addressed in the PM/Tiger application and the claims need to be refiled. You can not fix a claim rejected on a Payer report in Payerpath. These are already in the PP archived files with a 'T' status.

4. PAYER REJECT Report: This is an Error consolidation report. It can be run by DATE range and by Carrier. It will consolidate claims in error from the Payer reports onto this 1 report. **RED FLAG:** It **DOES NOT** include ANY information from the C00 & S00 reports. These 2 types of Payer reports **MUST** be reviewed individually.

The Payer Reject report pulls information by date from the carrier reports. If you run this report you must keep a log of previous dates run and do not duplicate. Duplicated dates will show the same Payer report errors. Payer report information is kept in PP for 90 days.

REVISED 7/3/2008