PAYERPATH QUICK GUIDE

Accessing Payerpath

Step	Process	Description	Tips
1	**Accessing Payerpath** : • Log on to http://www.payerpath.com/ • Click on Login.		• To use Payerpath efficiently, the Pop up Blockers should be turned off on the Computer or Payerpath should be added to the Allow Pop up Blockers from Web Site List. • The optimum viewable Screen Resolution for Payerpath is 1024x768. Make sure the Screen Resolution is set to that mark for optimum viewing of Reports and Claims in Payerpath.
2	**At the Login Page :** • Enter Customer Name • Enter Username • Enter Password • Click on Access Payerpath. • Change Password when prompted for. • Click on Access Payerpath.	• Customer Name is the Misys Client number. • Username is the same as your Tiger/PM Login • Password should be at least 6 characters long, should have 1 Uppercase Alphabet, 1 Lowercase Alphabet, 1 Numeric and 1 Special Character e.g. #,$,*, etc.	• The format of the Password is according to HIPAA regulations and considered as a Strong Password for Security Reasons. • The Server would prompt to Change the Password every 60 Days for added Security.
3	**The Welcome Screen / Dashboard :** • The Ribbon Menu comprises of Claims, Patients, Reports, Maintenance, Help and Tools. • Alerts: New Messages, New Payer Reports, New Remit Reports. • Upload Summary. • Top Edit Errors • Payer Response Status.	• Messages are sent from Payerpath on any changes or updates in Payerpath. • Payer Reports are sent by Payers for confirmation of receiving the Claims and informing the Status on the Claim. E.g. Accepted, Rejected, etc. • Remit Reports are Electronic EOBs sent by the Payers.	• Messages, Payer Reports and Remit Reports are deleted in 90 Days from Payerpath. • It's always advisable to keep a regular check on them. • You can either Download or Print the Reports for future reference.
4	**Upload Summary :** • A percentage break up of the Claims uploaded to Payerpath from the application is depicted by a Pie Chart. • Gives you the percentage of Claims Passed and Failed at Payerpath. • Can run Report for Individual Payers. • The Date on the Report changes as and when you upload the Claims from the Application. -- **Top Edit Errors :**	• Can select a particular Payer by clicking on the Drop down Menu for Payer.	• These Graphs on the Welcome Screen / Dashboard give you a brief description on the Status of the Claims uploaded on Payerpath and also the Status of the Claims at the Payer.

	• A bar Chart depicting the Top Errors on the Failed Claims at Payerpath: • Can Run Report for Individual Payers. The Date on the Report changes as and when you Upload the Claims from the Application. -- **Payer Response Status :** • A percentage break-up of the Status on the Claims Received by the Payer depicted by a Pie Chart. • Can Run Report for Individual Payers. • The Date on the Report changes as when the Reports are sent from the Payers.		

Accessing and use of UPLOAD DETAIL REPORT

Step	Process	Description	Tips
5	**From the Ribbon Menu :** • Click **Reports>Upload Detail.**	• This will take you to the Upload Detail List. • From the Upload Detail List click on View	• The Upload Detail Report is the same as the Accepted / Rejected Report with Fast Services.

		to open the Upload Detail Report. • The Filter option takes you to the Upload Detail Filter. • The Headers in the List like Upload Date / Time, etc are sortable when you click on the Headers.	• The Date / Time tells you exactly when the Claims were uploaded to Payerpath.
6	**The Upload Detail Report :** • The options on the Menu bar are Table of Contents (TOC), First, Prev, Next, Last, Goto, Page, Search, Download and Print Preview.	• The Upload Detail Report only gives you detailed information for Failed Claims. • The Upload Detail Report gives information for Individual Payers. • It gives the Total # of Claims and also the Total Amount on the Claims. • The last page or the Report gives a Summary of all the Claims uploaded in that Batch.	• The Upload Detail Report is deleted from Payerpath in 90 Days. • It's best to review the Report after you do a Send / Receive. • You can also Download or Print the Report for future Reference.
7	**The Menu Bar in Upload Detail Report:** • TOC – Table of Contents. Gives a list of Payers. • First, Prev, Next, Last, Goto and Page- Page Navigation Tools. • Search – Search option to Search Report using various fields. • Download – Option used to download the report in different formats. • Print Preview – A preview of the Report before printing, which opens in Adobe.	• TOC – Clicking on one of the Payers would take you directly to the Page which contains information about that Payer. • The Last Page is same as the Grand Totals Option under TOC. • Clicking on First, Prev, Next or Last takes you to the respective page. • Search - To activate a Search Field in the Search window click on the actual field you want to search with in the Report, e.g. Click on an actual Patient Name to activate the Patient Name Search field in the Search Window. • Download – This option allows you to download the report in different file formats like PDF, Excel Data, Excel Display and RTF. Can download a single page or multiple pages or all the pages. Choose the Radio Button accordingly under Page Range. Click > Save Report. File Download Dialog Box. Click > Save. Save As Dialog Box. You can Save the Report in the folder of your choice. Type in the Date beside the given File Name to Prevent overwriting of Files. Click > Save. • Print Preview – The Print Preview Screen opens in Adobe. It's a preview of the Report before printing it.	• Search – To search with the Patient First Name, first enter an * and then enter the Patient First Name. To search with a Patient Last Name enter the * after the Patient Last Name. • Download – Payerpath recommends the PDF format if you have Adobe loaded in your system. If you do not have Adobe loaded on your system, you can visit www.adobe.com for a free download of Adobe. • Save As Dialog Box. The Date that you enter beside the Default Filename i.e. "Upload Detail Report" helps you distinguish between files and also helps in not overwriting files the next time you download a report.
8	**The Upload Detail Filter :** • Click on Filter in the Upload Detail List.	• This takes you to the upload Detail Filter. The Claim Status can be selected as Failed, Passed, etc. • You can select an Individual Payer by the payer Drop Down menu. • From the Edit Message drop down menu we have to select the last option "Edit Category: Field in Error – Error Message. This displays the Error Messages due to which the claims have failed at Payerpath. Select appropriate Error Messages to filter the Report. • Click > Process Report. • This opens the Upload Detail Report with claims with the particular error message that was selected.	• The Filter Option is used to find claims with specific Error Messages and to filter out Claims in the Upload Detail Report with similar Error messages. • If there are more than 10 Error Messages, you can select only 10 at a time. • You can select multiple Error messages by using the Shift or the Control Keys on the keyboard.

VIEWING AND CORRECTING CLAIMS IN PAYERPATH

Step	Process	Description	Tips
1	**Accessing Claims**: • Goto Claims > View Claims. This takes us to the Claims List Filter. • To Save the commonly used filters. Select the fields. Click > Save Filter. • Type a Name for that Filter. Click > Add to List. Click > Save List. • To view the List of Claims. Click > Display List.	• The Claims List Filter lets you to filter your search for particular Claims. It also lets you Save commonly used Filters. • Form Type – Always "Professional" • Payer – Depends on the search for Claims. You can select a particular Payer to view claims for that Payer only. • Claim Status – Can select a specific Claim Status to view only Failed or Passed Claims for example. • Click the Untransmitted Radio Button. • Provider – Depending on the Payer you have selected you can select a particular Provider for that payer to view claims only of that Provider. • Under Claim Type, Both the options should always be checked to view both type of claims i.e. Primary and Secondary. • You can further filter your search by using the fields in the lower half of the window. E.g. Create Date, Date of Service, Procedure Code, Patient Acct #, Patient Last Name. You can use the Sent Date option when you are searching for Transmitted Claims. • Click > Display List.	• Unlike the Reports that are deleted in 90 Days from Payerpath, the Claims stay at Payerpath for 7 years, unless you manually delete them. **Payerpath Recommendations :** • Payer – All • Claim Status – All • Provider – All • Claim Type – Primary & Secondary • If searching with Pat Acct #, Procedure Code and Patient Last Name the information has to be entered in both the fields From and Through. • When searching for Transmitted Claims: ➢ Select the radial button for Transmitted next to claim status ➢ Also enter the Sent Date for the Claims. ➢ Constrain on Patient Account number, which is claim number with leading zeros, or patient last name
2	**The Untransmitted Claims List:** • According to the fields selected in the Claims List Filter, the Untransmitted Claims List gives you the List of those particular Claims. • The Headers in the Untransmitted Claims List are: • Status, Created Date, Patient Last, Patient First, Insured's ID, Patient Acct #, Total Charges, Payer Name and Location. • The Columns at the extreme right which have alphabets. '**V**' and '**H**' are used to **View** the Claims and View the **History** of the Claim Respectively. You can click on the headers of the Table to Sort the Columns Alphabetically, or in Ascending or Descending order depending on the Column. • To View the History of the Claim : • Click > '**H**' • To open the HCFA 1500 Form : • Click > '**V**'	• Under Status, we have different Status Codes such as **F – Failed** **P – Passed** **H – Held** **S – Marked for Send** **A – At the Payer** • The Claims in the Untransmitted Claims List can also be sorted out by using the Show drop down Menu at the Right Hand Top Corner of the Table. • Depending on the Option Selected the Claims would be filtered to Show only Claims with that particular Status. • The Claims under Status 'F' are the Calims Failed at Payerpath. We can correct these Claims and Send them to the Payer. • The History Window of the Claim shows the Time and Date when the Claim was Uploaded, Corrected and Sent to the Payer. • We can Print this Page: Click > Print History.	• When Claims are uploaded to Payerpath. The Claims that Fail at Payerpath, sit at Payerpath, till worked upon. If the Claims pass, they are directly forwarded to the Payers. However the Failed Claims have to be corrected and have to manually send them to the Payers. • The Claim History is useful to re file claims rejected for Timely Filling Limits.

3	**The HCFA 1500 Form :** • Click > 'V' • We also have a Form Navigation Box, which opens with the HCFA 1500 Form. • The Form Navigation Box shows the Patient Name and the Errors, which are in red on the HCFA 1500 Form. • The other options on the Form Navigation Box are: Save and Run Edits, Electronic Fields, Back to List, Previous Claim, New Claim, and Next Claim. • If the Claim has multiple Errors, they can be viewed by clicking on the Drop down Menu in the Form Navigation Box. • If there are two ** preceeding the Error. It is an Error on the Electronic Fields. • To go to the Electronic Fields we have to click on Electronic Fields in the Form Navigation Box. • The option Back to List in the Form Navigation box is used to go back to the Untransmitted Claims List from the HCFA 1500 Form or the Electronic Fields. • The option New Claim on the Form Navigation Box is used to open a New Claim, which is completely blank. However payerpath recommends not using that option and only File Claims from your application.	• Before making any changes on the Form or Electronic Fields the option save and Run Edits is greyed out in the Form Navigation Box. • The Errors on the HCFA 1500 Form and the Electronic Fields are highlighted in Red i.e. the Block which has the Error on the Form would be in Red. • To correct the Error, click in the box, enter the correct information and hit TAB on the keyboard. • The color of the block would change from Red to White. • After we make the changes, the option Save and Run Edits would be activated in the Form Navigation Box. • We have to click on Save and Run Edits after making the changes. This will apply the changes made to the Form. • In this manner we can go ahead and correct all the Errors on the Form and the Electronic fields. • Once all errors all corrected the Form Navigation Box shows a message "No Edit Errros". This would appear in Green. • Now the Claim is ready to be forwarded to the Payer. While you are at the HCFA 1500 Form, you can go to Tools in the Ribbon Menu. • Click > Send. • This would send the Claim to the Payer. • The options Next Claim and Previous Claim work as browsing options between claims. • Instead of going back to the Untransmitted Claims List and selecting the Next Claim or Previous Claim, these options would take you to the Next Claim and Previous Claim respectively from the HCFA Form, and open the HCFA Form for that particular claim. • Any change made to Payerpath also needs to be made to the Tiger/PM Application.	• The Electronic Fields are HIPPA Requirements for Electronic Transmission of Claims. These are mandatory fields required for the Electronic Transmission of Claims. • The options in the Form Navigation Box change when we are at the Electronic Fields. • We have the option Back to Form. This is used to go back to the HCFA 1500 Form from the Electronic Fields. • Once the Claim is corrected Status on the Claim changes from 'F' to 'P'.
11	**Sending Passed Claims :** • After correcting the Claim, while you are at the HCFA 1500 Form, you can go to Tools. • Click > Send. • You can send multiple Passed Claims from the Untransmitted Claims List.	• At the Untransmitted Claims List, select Passed from the Show Drop Down Menu. • This would List all the Passed Claims. • To select a particular Claim without opening it, you can check the checkbox beside the Status Code under the Status Column. • Once selected, you can go to Tools. Click > Send Selected. • You can Select Multiple Claims to send. • To select the complete page, go to Tools. Click > Select / Unselect Page. This would select all the Claims on the current	• Once you send the Claim to the Payer the Status on the Claim changes from 'P' to 'S'. • The Status 'S' is temporary. Once the claim is transmitted the Status automatically changes from 'S' to 'A'. • In the Ribbon Menu under Help, we have the Professional Manual for Payerpath. • You can either download the Manual or Print it or View it online. • It is a detailed Navigation tool for Payerpath with appropriate

		Page. • Once selected you can go to Tools. Click > Send Selected. • To select all the Passed Claims, go to Tools. Click > Select / Unselect List. • Once selected you can go to Tools. Click > Send Selected. • You can also send all the Passed Claims by going to Tools. Click > Send All. • This would Send All the Passed Claims.	Screenshots.

CARRIER REPORT

Step	Process	Description	Tips

Payerpath Cheat Sheet

1	**Payer Reports:** • Go to the Welcome page of payerpath. • Under **ALERTS** click on **NEW PAYER REPORTS**. (you will find only the Unread payer reports) (**OR**) Go to the **Ribbon Menu** , under **Reports** select **PAYER**.(you will find both the read and unread reports).	• Payer Reports are sent by Payers for confirmation of receiving the Claims and informing the Status on the Claim. E.g. Accepted, Rejected, etc. • The information displayed depends on the information released by individual payers. • The information may vary from report to report depending on the payer. • Different payers send the reports in different formats, but payerpath normalizes these reports.	• Most of the reports are in the Upload Detail Report format and open in a different window. • Reports like C00 and S00 look different and open in the same window. • To print the C00 and S00 reports , we go to **Tools** on the Ribbon menu and select **PRINT**. • Payer Reports are deleted in 90 days from Payerpath. • It's always advisable to keep a regular check on them. • You can either Download or Print the Reports for future reference.
2	**Payer Report Filter:** • Go to the **Ribbon Menu** , under **Reports** select **PAYER REPORT FILTER.**	• We can select the appropriate filters to open specific payer reports instead of opening all the reports.	• To re-use a particular filter, we can save it.
3	**Remit Reports:** • Go to the Welcome page of payerpath. • Under **ALERTS** click on **NEW REMIT REPORTS**. (you will find only the Unread remit reports) (**OR**) Go to the **Ribbon Menu** , under **Reports** select **REMITTANCE DETAIL**.(you will find both the read and unread reports).	• Remit Reports are Electronic EOB's send by the payer.	• Remit Reports are deleted in 90 days from Payerpath. • It's always advisable to keep a regular check on them. • You can either Download or Print the Reports for future reference.
4	**Payer Rejects:** • Go to the **Ribbon Menu** , under **Reports** select **PAYER REJECTS**	• This report shows you claims rejected by the Payer with the error message.	• There is no restriction on the date range. • You can filter the reports according to the Payer.
5	**Billing Summary Report:** • Go to the **Ribbon Menu**, under **Reports** select **Billing Summary.**	• This is a report on Transmitted and Untransmitted claims. • This report is also used for Billing purposes.	• The Date range should not exceed a month.
6	**Claim Age Report:** • Go to the **Ribbon Menu** , under **Reports** select **Claim Age**	• This report tells you for how long a claim has been sitting at Payerpath. • This report is also used to ensure that the failed claims are being worked on.	• This report can be run on a weekly basis

Step	Process	Description	Tips
7	**Error Trend Report:** • Go to the **Ribbon Menu** , under **Reports** select **Error Trend**	• This report shows you the errors that are happening for a particular payer. • This report is mainly used to track errors.	• There is no restriction on the Date range.
8	**Transmitted Claim Report:** • Go to the **Ribbon Menu** , under **Reports** select **Transmitted Claim**	• This report is used for auditing purposes and to ensure that all the charges are posted and sent to the payer.	• The date range should not exceed a week. • This is the only report which shows the CPT codes.
9	**Upload Reconciliation Report:** • Go to the **Ribbon Menu** , under **Reports** select **Upload Reconciliation**	• This report breaks down the batch activities and gives you the claim activity for that day. • This report captures any activity preformed on Payerpath.	• It is used for balancing purposes.
10	**Upload Summary Report:** • Go to the **Ribbon Menu** , under **Reports** select **Upload Summary**	• This report is used to see the Percentage of Passed and Failed claims.	• If you see a payer with a high percentage of failed claims you can run the **Error Trend Report** for that payer.

1	**Correcting the Payer Rejected Claims and Rebilling:** • Goto Claims > View Claims. This takes us to the **Claims List Filter** page. • Payer: **ALL** • Select the radio button **Transmitted** • Select the **Sent Date** • Enter the **Patient Acct # or Patient Last Name** in the **From** and **Through** column. • Click on **Display List** • You are on the **Transmitted Claims list** • Click on '**V**' (View) • This brings you to the HCFA 1500 Form. • Goto **Tools** click on **Rebill Claim** • Click on **OK** • Make the necessary corrections and click on **Save and Run Edits.** • Goto **Claims** on the ribbon menu select **View Claims** • Payer : **All** Claim Status : **All** Provider : **All** Select the radio button **Untransmitted** • Click on **Display List** • At the Untransmitted Claims List, select Passed from the Show Drop Down Menu. • This would List all the Passed Claims. • To select a particular Claim without opening it, you can check the checkbox beside the Status Code under the Status Column. • Once selected, you can go to Tools. Click > Send Selected. • You can Select Multiple Claims to send. • To select the complete page, go to Tools. Click > Select / Unselect Page. This would select all the Claims on the current Page. • Once selected you can go to Tools. Click > Send Selected. • To select all the Passed Claims, go to Tools. Click > Select / Unselect List. • Once selected you can go to Tools. Click > Send Selected. • You can also send all the Passed Claims by going to Tools. Click > Send All.		• You can also make the corrections in Tiger and Rebill the claim.