



# AHC AmeriHealth Caritas District of Columbia Claims Investigation



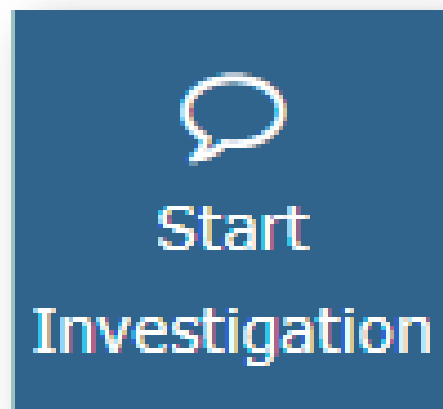
The **Claim Inquiry** function, also referred to in this guide as a Claim Investigation, allows ancillary, facility and professional providers the ability to submit a claim inquiry on claims that were previously finalized. For each submitted transaction, users will receive an electronic response indicating 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



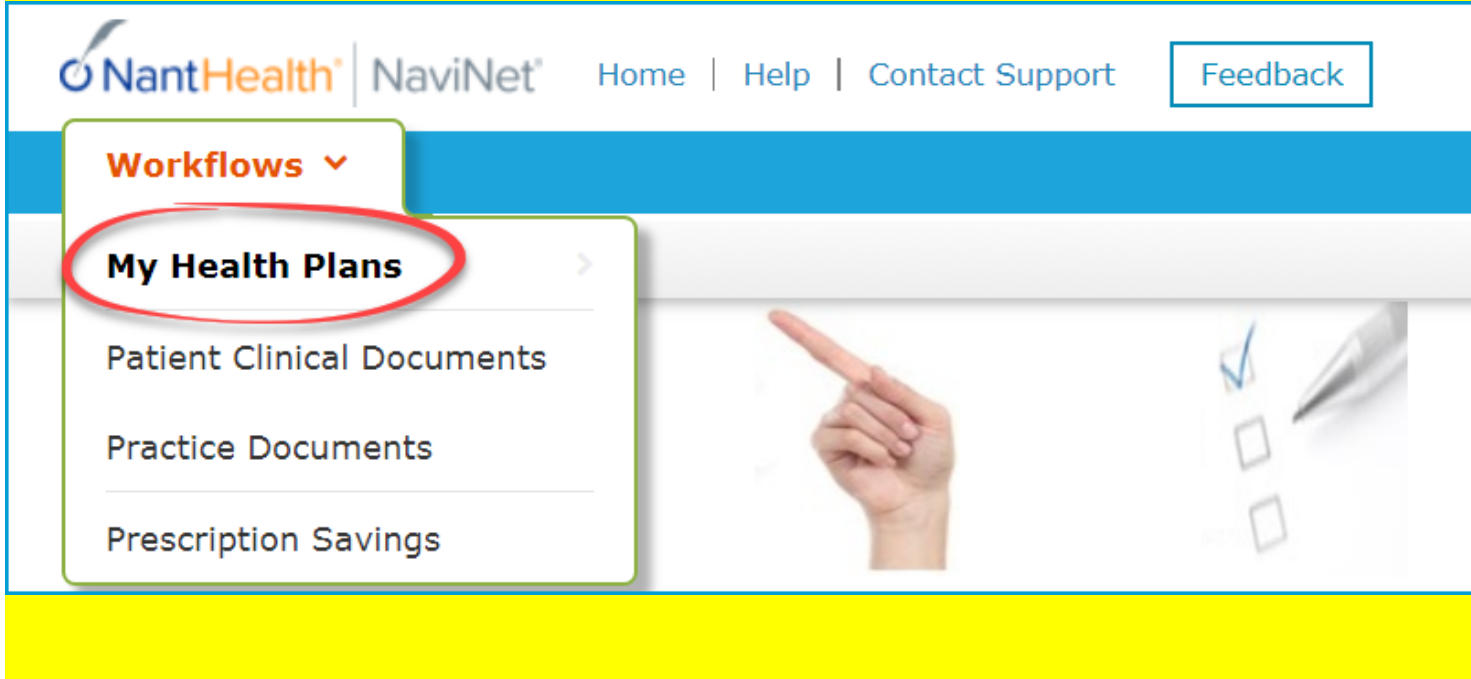
# Claim Status Inquiry Workflow



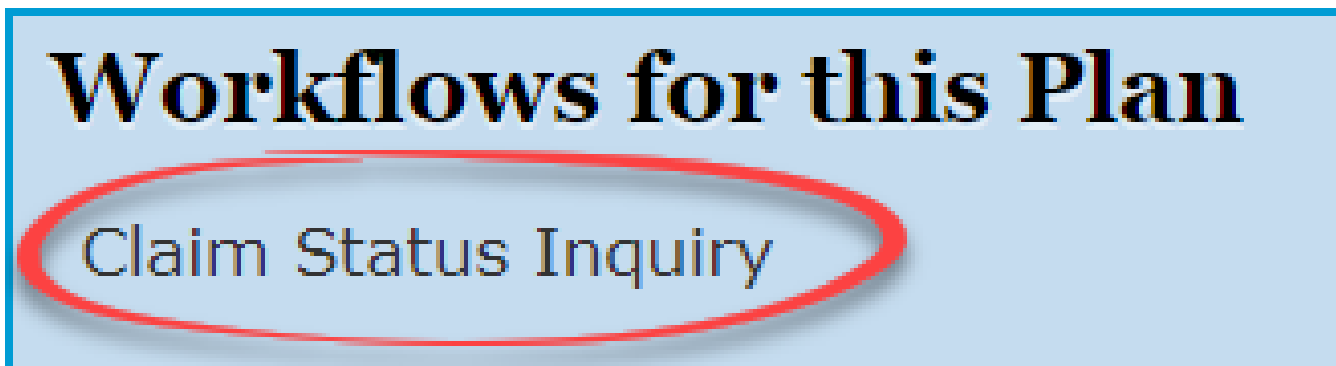
Starting a Claim Investigation (Inquiry)

Sign in to navigate to the NaviNet Open Home screen.

Under Workflows on the NaviNet toolbar, select My Health Plans. Select [INSERT PLAN NAME].



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, there is a 'Print' link and a message: 'Online Remittance Advice will be available for claims paid on or after 01/04/2016.' with a 'Reset Search Fields' link. The form includes a 'Billing Entity' field with a placeholder 'Type Name or ID to find provider...'. Under 'Patient Details', there are fields for 'Member ID', 'Last Name', 'First Name' (with 'Optional' text), and 'Date of Birth' (with a 'mm/dd/yyyy' placeholder). Under 'Claim Status Details', there are date pickers for 'Service Start' (08/17/2017) and 'Service End' (11/15/2017), and a 'Claim ID' field with 'Optional' text. At the bottom right, there is a 'Reset Search Fields' link and a green 'Search' button highlighted with a red circle.

*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

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	2000000000000	\$275.00	

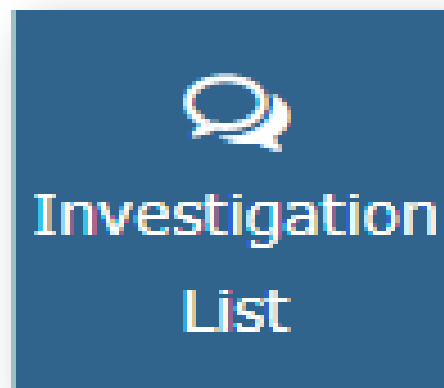
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▶ **Claim Overpaid**

Raised on	Reference
Today	--



# 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 window titled "Back to Investigation List". On the left is a blue sidebar with a "Start Investigation" button and an "Investigation List" button (highlighted with a red border). The main content area displays a claim for LACI SMITH (ID: 55555555) with a "Finalized" status. Below this is a "Claim Overpaid" section with a table of overpayments. At the bottom, there are two messages: one from Jennifer Jones about eligibility updates, and a new message (marked with a red "NEW" icon) thanking the user for their response.

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

## 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 user 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 details for a specific investigation for 'LACI SMITH' (ID: 55555555). The investigation status is 'Finalized' with a green checkmark. Below this, a 'Claim Overpaid' section shows it was raised on 'Today' with no reference. A communication timeline for 'Today' shows two messages: one from 'Jennifer Jones' (User) stating 'Hello, the member's eligibility has been updated, please review for claim adjustment.', and a newer message from the 'Health Plan' stating 'Thank you for your response, we will respond to your request within 10 business days.' The interface includes navigation links like 'Status Details', 'Start New Investigation', and 'View/Print'.

**Start Investigation**

**Investigation List**

**Back to Investigation List** ✕

**LACI SMITH**  
55555555

Status Details Start New Investigation View/Print

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

**Claim Overpaid**

Raised on	Reference
Today	--

Prev Next

Today

**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

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.

**Claim Overpaid**

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

**Patient Details**

Patient Name: <b>LACI SMITH</b>	Member ID: <b>55555555</b>	Date of Birth: <b>01/01/2000</b>
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**Claim Details**

Claim ID: <b>200000000000</b>	Date of Service: 09/23/2017 to 09/23/2017	Claim Value: \$275.00	Status: ✓ Finalized
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11/15/2017

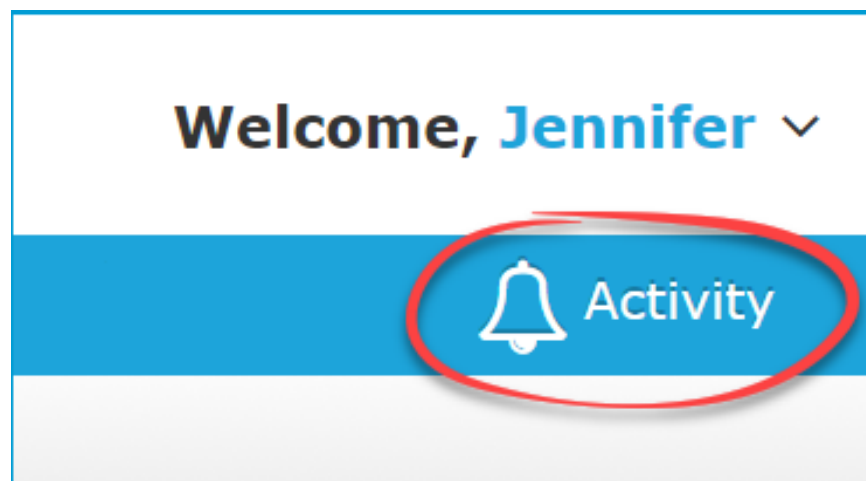
Jennifer Jones Hello, the member's eligibility has been updated, please review for claim adjustment.

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

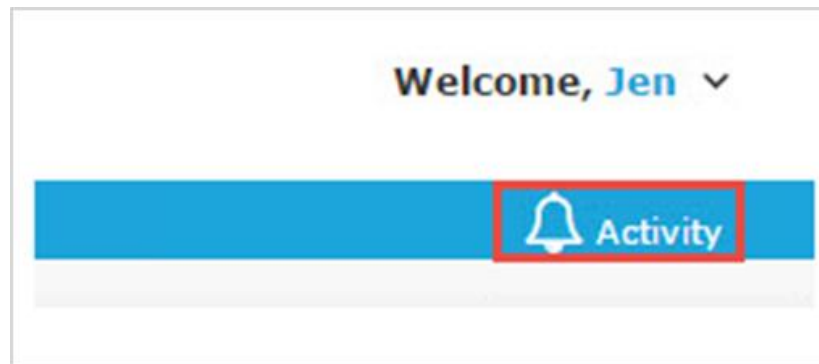
# Enabling Claim Investigation Notifications

How will I be notified once [INSERT PLAN NAME] responds to my inquiry?

## Settings Tab Enabling Notifications

Sign in to navigate to the NaviNet Open Home screen.

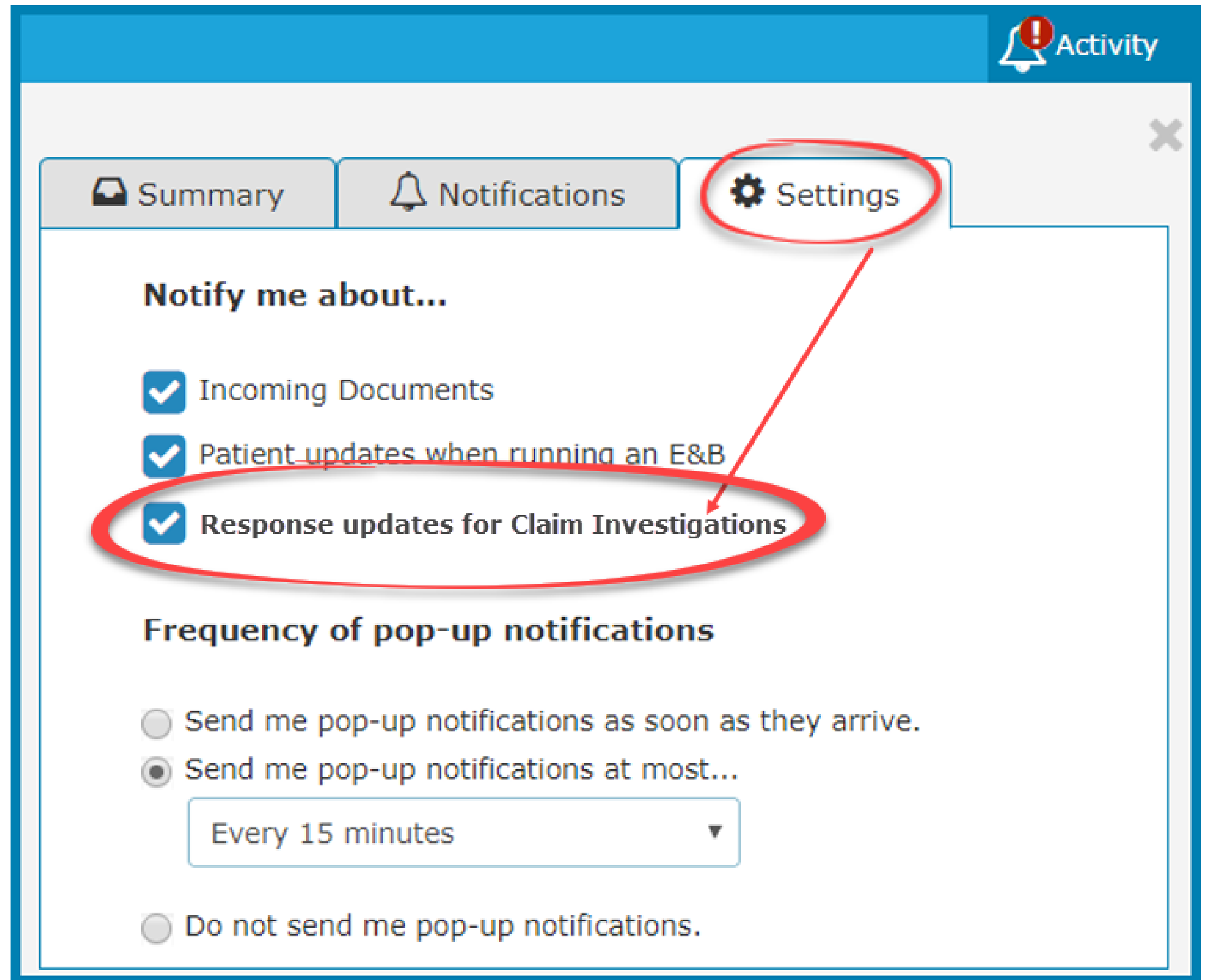
Click Activity located on the top right of your NaviNet toolbar.



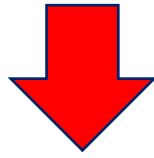
Select the Settings tab.

Check the Response updates for Claim Investigation box.

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

A screenshot of the NaviNet Settings page. The page 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 highlighted with a red oval. A red arrow points from the "Settings" tab to the "Response updates for Claim Investigations" checkbox, which is also highlighted with a red oval. The page is titled "Notify me about..." and has three checkboxes: "Incoming Documents" (checked), "Patient updates when running an E&B" (checked), and "Response updates for Claim Investigations" (checked). Below this is a section titled "Frequency of pop-up notifications" with 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." The "Send me pop-up notifications at most..." option has a dropdown menu set to "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	--	< Prev Next >

Today

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

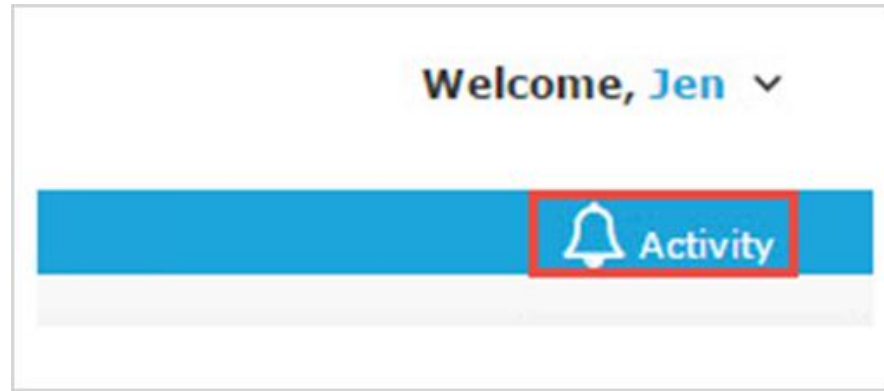
**NEW** Thank you for your response, we will respond to your request within 10 business days.

Once you have enabled the Claims Investigations Notifications you will begin receiving updates for existing claim inquiries you sent to [INSERT PLAN ANME].

# Notifications Tab

Sign in to navigate to the NaviNet Open Home screen

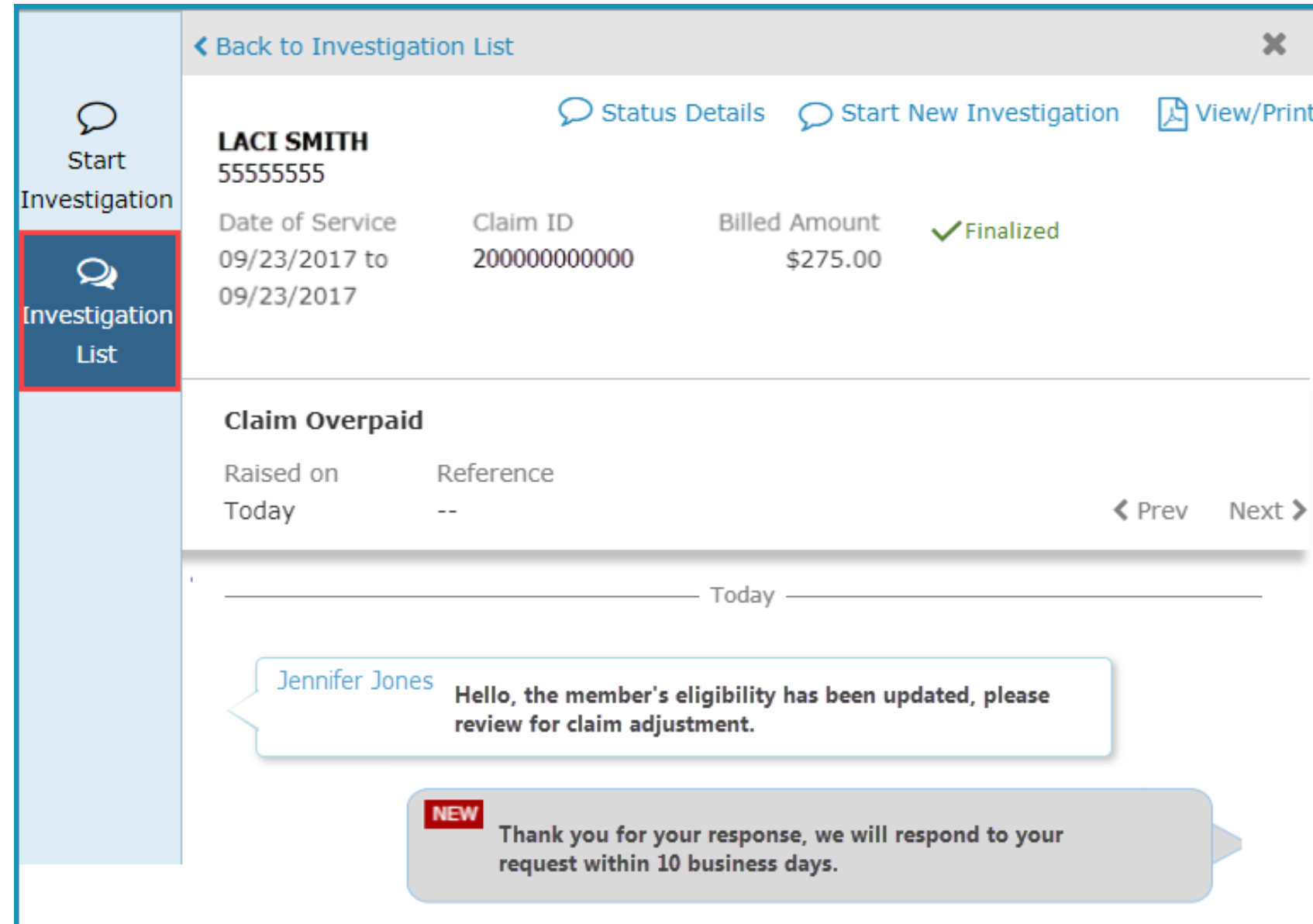
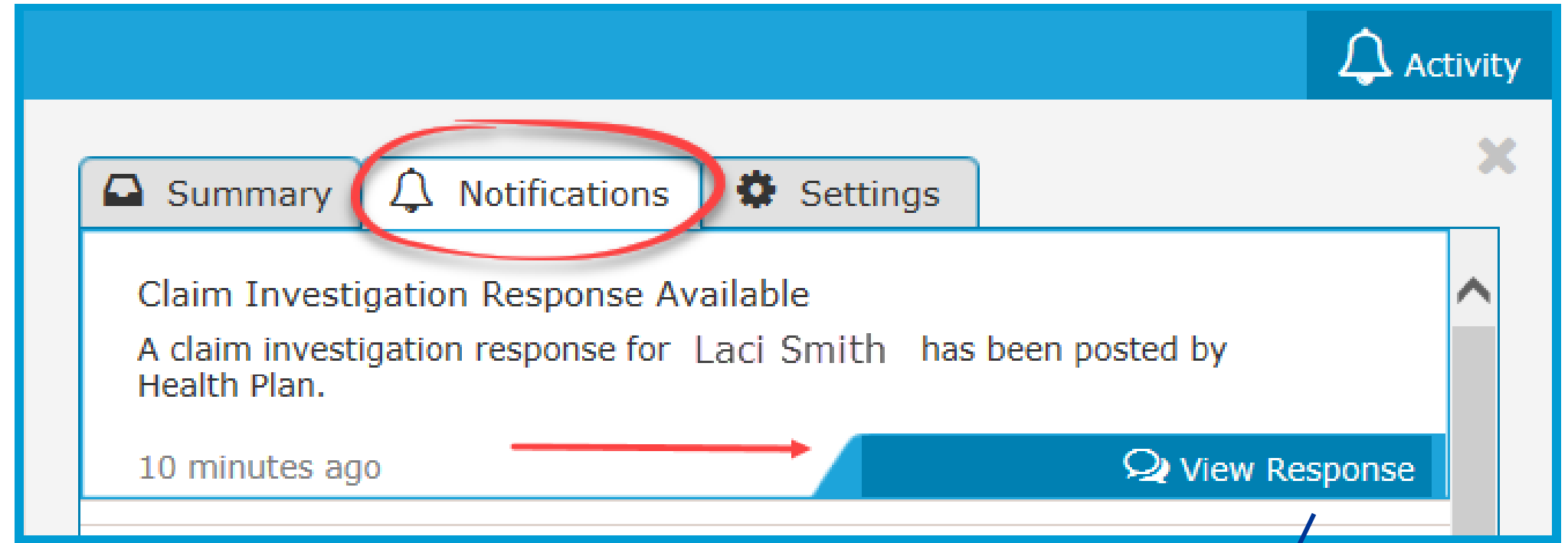
Click Activity located on the top right of your NaviNet toolbar



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

The image shows a two-part screenshot of a web application. The top part is a window titled 'Investigation List' with a close button (X) in the top right. It contains a table with one row of data for 'LACI SMITH' with ID '55555555'. The table columns are 'Date of Service' (09/23/2017 to 09/23/2017), 'Claim ID' (200000000000), 'Billed Amount' (\$275.00), and 'Finalized' (checked). Above the table are two links: 'Status Details' and 'Start New Investigation', with the latter circled in red. A blue arrow points from the circled link to the bottom screenshot. The bottom screenshot is a window titled 'Start Investigation' with a close button (X) in the top right. It contains the same table data as the top screenshot. Below the table is a 'Reason:' dropdown menu with the text 'Select reason for investigation ...'. Below that is a text input field with the placeholder 'Enter investigation details ...' and a character count '2000 characters left'. Underneath is a 'Contact Information' section with input fields for 'First name ...', 'Last name ...', 'Email address ...', 'Telephone number ...', and 'Ext: Optional'. At the bottom right are 'Cancel' and 'Send' buttons.

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



# 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.

Investigation List

Start Investigation

Investigation List

**LACI SMITH**  
55555555

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

# 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

<b>INSURANCE DETAILS</b> Health Plan Member ID: 55555555	<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>