The Availity Claim Status Tool is the recommended method for providers to acquire status on claims processed by Blue Cross and Blue Shield of Texas (BCBSTX) for the following members:

- Texas Medicaid STAR, STAR Kids and CHIP

Organizations can improve their accounts receivable by utilizing the Claim Status tool. Results are available in real-time and provides more detailed information than the HIPAA-standard 277 claim status transaction.

If you do not have Availity access, you may obtain claim status online by completing a 276/277 transaction through your preferred web vendor.

1) Getting Started

- ▶ Go to **Availity** ☑
- ▶ Select **Availity Portal Login**
- ▶ Enter User ID and Password
- ▶ Select **Log in**

Note: Only registered Availity users can access the Claim Status Tool. If you are not a registered Availity user, you may complete the guided online registration process at availity.com – at no charge.

2) Accessing Claim Status

- ▶ Select **Claims & Payments** from the navigation menu
- ▶ Select **Claim Status**
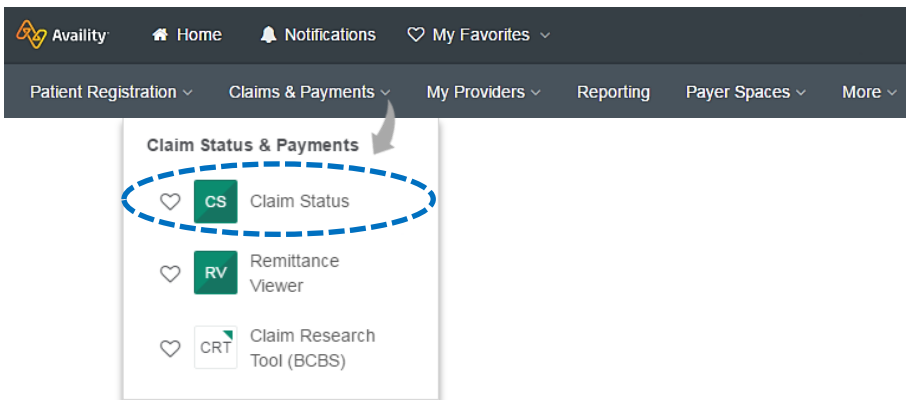
*Note: Contact your Availity administrators if the **Claim Status** tool is not listed in the **Claims & Payments** menu.*

3) Submitting Transactions

Claim status may be obtained using a Member ID or Claim Number. Both options are illustrated in this step.

▶ Choose the **Organization** and appropriate **Payer** from the drop-down list

▶ Click **Select**

> **Quick Tip:**
> → **PLUS** *signifies enhanced payer-specific details.*

Search by Member:

▶ Select the **Search by Member** tab

▶ Choose the Billing Provider from the **Select a Provider** drop-down list or enter the **Provider NPI** (Type 2)

▶ Enter **Member ID** excluding the preceding three-character prefix

▶ Enter **Service Dates** in MM/DD/YYYY format

▶ Select **Submit**

> **Quick Tip:**
> → *The plus (+) icon signifies enhanced payer-specific details.*

> **Quick Tip:**
> → *Claim status is available for* **Service Dates** *of 1/1/2016 to current.*

3) Submitting Transactions *(continued)*

Search by Claim:

▶ Select the **Search By Claim** tab

▶ Choose the Billing Provider from the **Select a Provider** drop-down list or enter the **Provider NPI** (Type 2)

▶ Enter the **Claim Number**

▶ Select **Submit**

> *Quick Tip:*
> → *The plus (+) icon signifies enhanced payer-specific details.*

4) Search Results

▶ After completing the **Member ID** search, users can view detailed claim status for a specific date of service by selecting the corresponding **claim**

5) Detailed Search Results

The following information is returned after the corresponding **claim** is selected and/or the **Claim Number search** is completed:

- Claim Number
- Received Date
- Processed Date
- Service Dates
- Claim Status
- Allowed Amount
- Billed Amount
- Paid Amount
- Coinsurance Amount

- Copay & Deductible Amounts
- Ineligible Amount
- Sequestration Amount
- Medicare Paid Amount
- Check Status & Check Number
- Check Amount & Check Date
- Payee Information
- Billing Provider Information
- Rendering Provider Information

- Line Item Breakdown:
  - Service Dates
  - Revenue / Procedure Code
  - Modifier
  - Quantity
  - Diagnosis
  - Ineligible Code & Amount
  - Allowed Amount
  - Paid Amount
  - Sequestration Amount
  - Copay, Coinsurance & Deductible

> **Quick Tip:**
> → Select **Print this Page** at top or bottom of result page to print and/or save status.

Claim Status

Customer ID 9999999 Transaction Date 06/01/2020
Transaction ID 99999999999999999999999999999999

Print this Page | Return to Results | Edit Search | New Search

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Patient Information

Patient	DOE, JANE	Member ID	999999999	Subscriber	DOE, JANE
DOB	01/01/2000	Patient Account Number	Doe12345	Relationship	SELF
Gender	F	Group Number	TXM0000X		

Claim Information

Claim Number	999999999999	Claim Status	FINALIZED	Coinsurance Amount	$0.00
Received Date	05/07/2020	Allowed Amount	$130.07	Copay Amount	$0.00
Processed Date	05/18/2020	Billed Amount	$135.57	Deductible Amount	$0.00
Service Dates	04/23/2020 – 04/23/2020	Paid Amount	$130.57	Ineligible Amount	$5.00
Bill Type Code	N/A	DRG Code	N/A	Sequestration Amount	$0.00
Approved Length of Stay	N/A			Medicare Paid Amount	N/A

Payment Information

Check Status	CREATED	Payee	ABC CLINIC	Billing Provider	ABC CLINIC
Check Number	999999	Payee Tax ID	999999999	Billing Provider NPI	9999999999
Check Amount	$6,246.27	Payee Address	12345 STREET	Billing Provider Tax ID	999999999
Check Date	05/18/2020		ANYWHERE, TX 12345	Rendering Provider	ABC CLINIC
				Rendering Provider NPI	9999999999
				Rendering Provider Tax ID	999999999

Line Level Information

Service Dates	Proc	Rev	Mods	Qty	DX	Codes	Billed	Allowed	Paid	Seq Amt	Coins	Copay	Deductible	Ineligible
04/23/2020 04/23/2020	76811	0402	42	1	O2684	h05	$394.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$394.00
04/23/2020 04/23/2020	76817	0402	42	1	O2684	h05	$389.00	$44.93	$44.93	$0.00	$0.00	$0.00	$0.00	$344.07
04/23/2020 04/23/2020	76816	0402	42	1	O2684	h05	$924.00	$106.72	$106.72	$0.00	$0.00	$0.00	$0.00	$817.28

Codes

Type	Code	Description
Remark	h05	Charges previously considered

Customer ID 9999999 Transaction Date 10/24/2019
Transaction ID 99999999999999999999999999999999

Print this Page | Return to Results | Edit Search | New Search

> **Quick Tips:**
> → Ineligible reason codes display in the **Codes** field.
> → View ineligible reason code descriptions in the **Codes** section.

Transaction Tips

How to avoid a "Claim Not Found" response:

→ The Type 2 Billing NPI must match the NPI submitted on claim.

→ The **Service Dates** entered must include the actual date(s) of service.

→ Claim Status is available for **Service Dates** of 1/1/2016 to current.

If...

→ All line items are not displayed on the Detail Search Results screen, click **Next** at bottom of the page. You may also change the number of lines displayed by using the **Rows** drop-down listing.

→ The check number is not present on a finalized claim (see below), please allow additional time. The system reflects check information based on the payment schedule of the provider.

Payment Information	
Check Number	
Check Amount	14.92
Check Date	06/15/2020

Have questions or need additional education? Email the Provider eBusiness Consultants. *Be sure to include your name, direct contact information & Tax ID or billing NPI.*