



Alliance Claims System (ACS)

Provider Portal Handbook



Table of Contents

Welcome

Welcome to the Alliance Claims System (ACS), a next generation managed care system designed specifically to meet the needs of managed care organizations and the behavioral healthcare providers they support. This handbook will walk you through the following aspects of the provider portal:

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Basic Functionality

This section will give you an understanding of the basic functionality of the Alliance Claims System (ACS): how to navigate through the database, how to view information and how to input information.

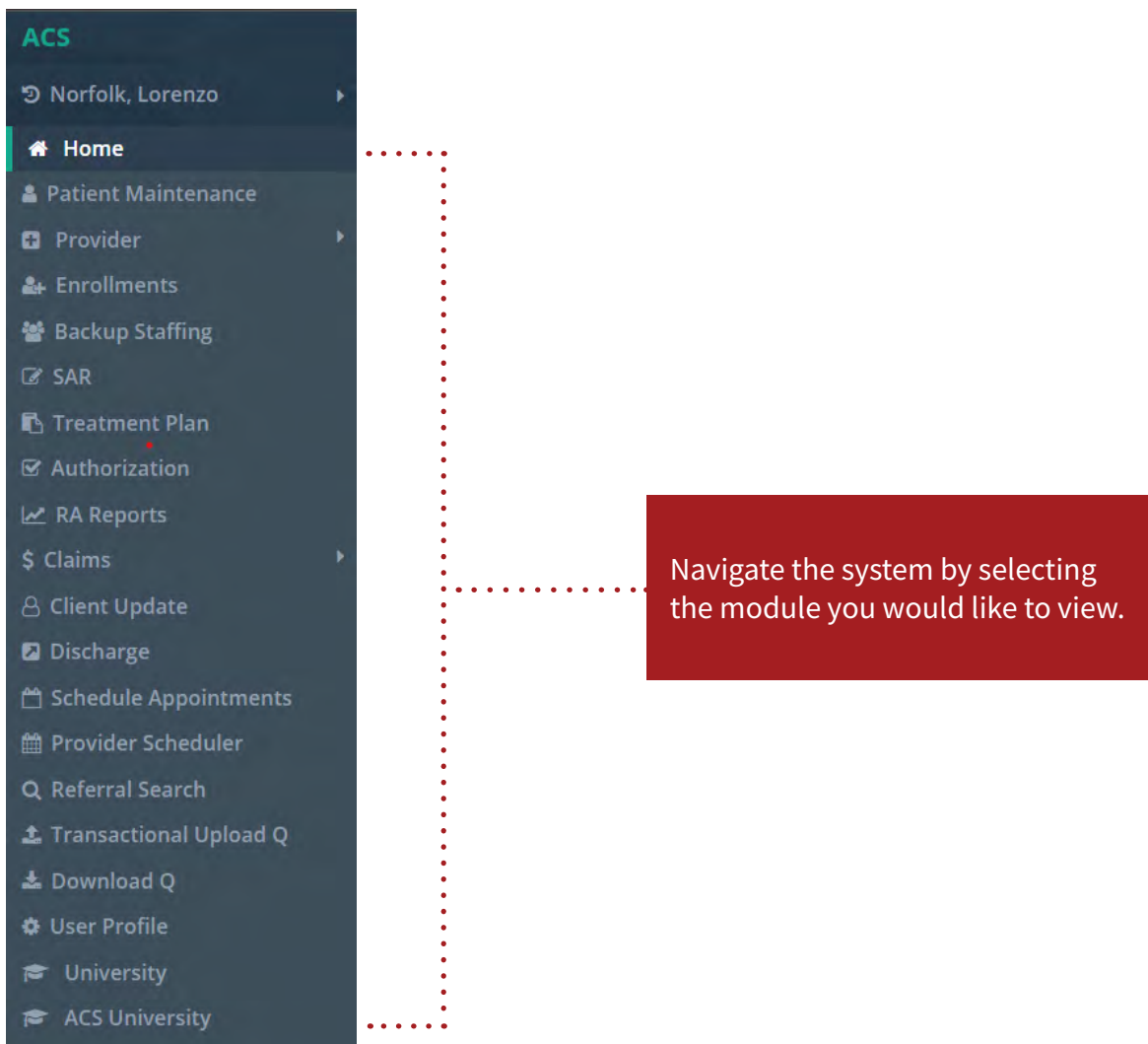
First things first...

You are encouraged to use the most up- to-date version of Google Chrome browser to access ACS and the Provider Portal.

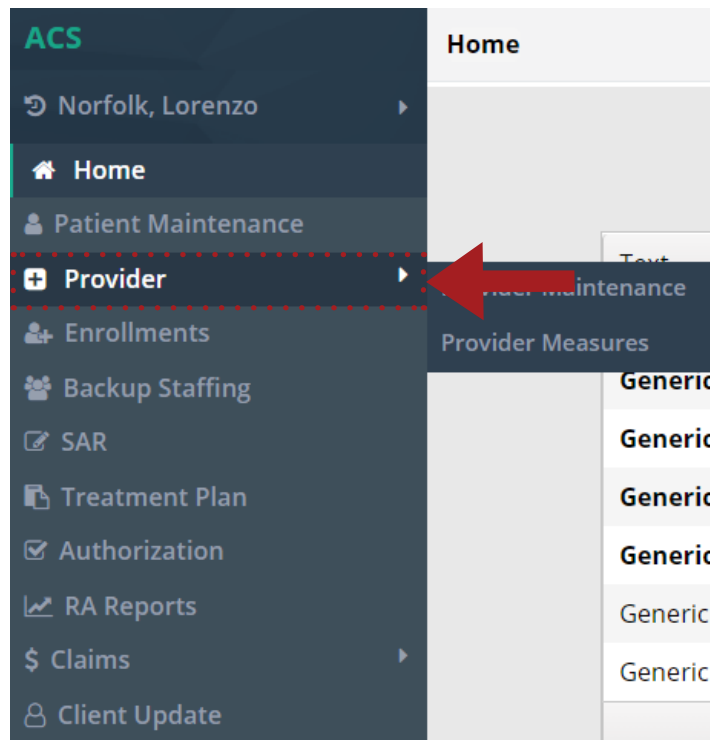
Note: Firefox’s ESR version may be used as an alternative.

The best screen resolution is 1360 x 765. This will allow you to see the entire screen and navigate more easily. You can also zoom in and out using the zoom function in your browser or by holding down the **Ctrl** button on your keyboard and moving the wheel on your mouse forward (to zoom in) and backwards (to zoom out).

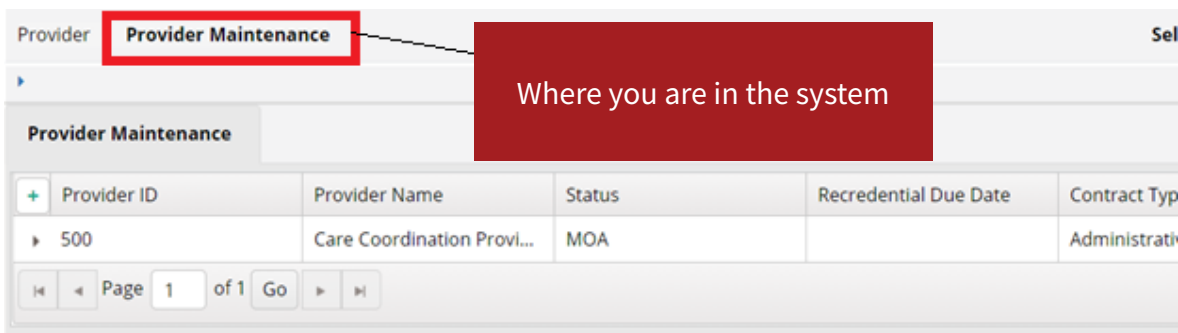
Navigation



Once you've selected a module, the menu will expand to show one or more sub-groups. Click the arrow on the left to expand the sub-group menu. Clicking on one of the menu choices that does not have an arrow on the left will take you to the main screen of that selection.



At the very top of each page is a **breadcrumb** explaining where you are in the system. The bolded label tells you where you are in the system.



Viewing Information

When a row is highlighted, the corresponding consumer information is shown below the breadcrumb at the top of the page. Click on the arrow to expand the view.

Patient Maintenance Select Provider: Care Coordination Pro... ▼

▼ 1196 uewmCbdC_aCmPJWgR K Generic Address Generic City NC 99999 999-999-9999 03/19/1970

Demographics	Financial	Care Coordination
Address: Generic Address City: Generic City State: NC Zip: 99999 Address Type: Private Residence (house,apartment,mobile home,child living with family)		
		Phone 1: 999-999-9999(Home) Phone 2: 999-999-9999 Phone 3: 999-999-9999 Clinical Home: Move In Date: 04/18/2019

At the bottom left of the list, the number of pages is listed. Use the arrows to page forward or backward, or enter a number in the box to advance to that page.

At the bottom right of the list, the number of items is listed. Use the dropdown to select the number of records you want to display on each page. The number of pages will update when the number of items is changed.

▶ 545636	SVlyjdRj	BrucDJMZ		Female	07/18/1957	158-49-8560	Generic	<input checked="" type="checkbox"/>
▶ 688477	hauNUsWC	BrUCewb	J	Male	02/07/2005	319-19-2253	Generic	<input checked="" type="checkbox"/>

Page 1 of 1 Go 10 ▼ items per page 1 - 6 of 6 items

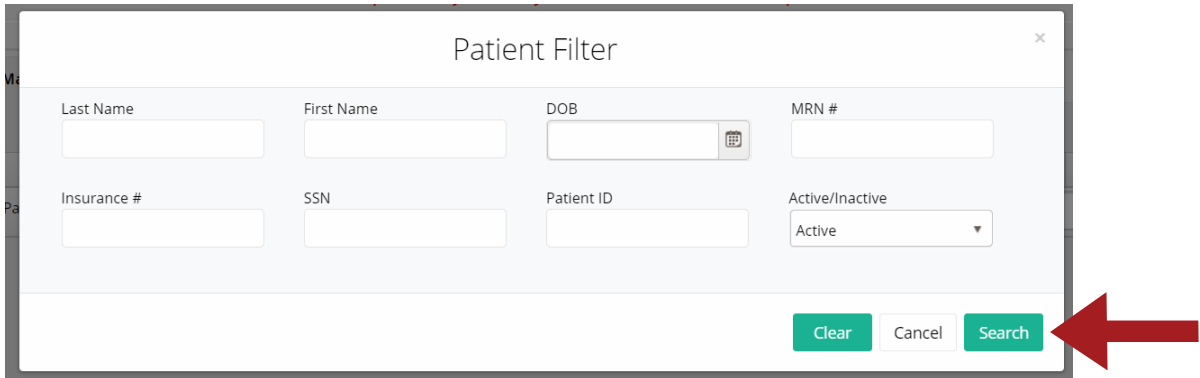
Many screens may also have a **Filter** button, which will allow you to modify the information you're looking at in the rows. For instance, if you're looking at a list of patients and only want to see "John Doe," you would click the **Filter** button and put in relevant information, such as "Doe" in the **Last Name** field. That way, only people with that last name will appear on the list.



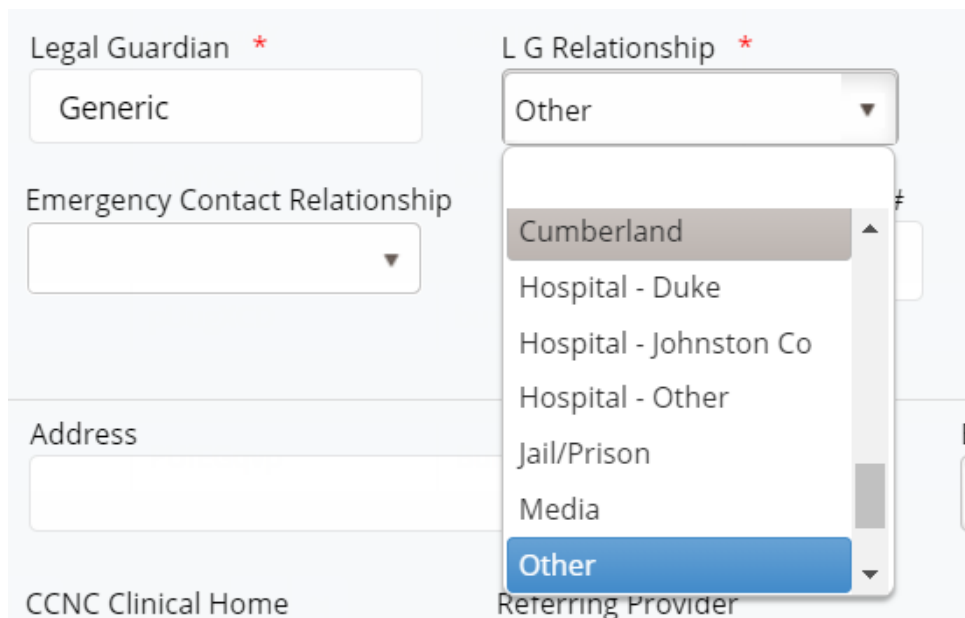
If you begin creating a record in any screen, make sure it's either saved or cancelled before you try to go to another module or you won't be able to.

Putting in Information

In most cases, inputting data is as simple as typing into fields. However, there are a few cases in which you will need to search for the info to go into the field. When this is the case, you will see a **Search** button.

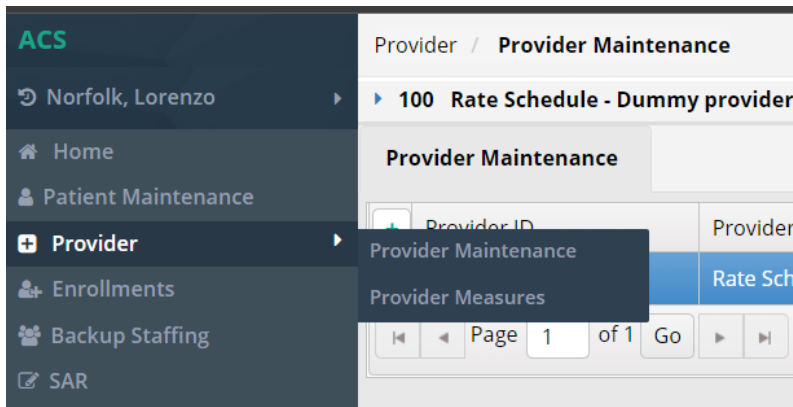


This will open a subscreen, allowing you to search through records to find the one you want to input.



At other times, the system may want to fill in text as you're writing something into a field. This will usually appear as a dropdown under the text box. You can then scroll down to the selection you want and click on it. This will fill in the text box with the info exactly as it is in the dropdown. There are tables in the system with buttons to the side: **Add**, **Modify**, **Remove**. To edit or delete a field, click on the field itself, then **Modify** or **Remove**. Clicking **Add** will add a new field regardless of what is currently highlighted.

Provider Details



This module allows you to view the information that Alliance has on file for your company. There are two tabs in this module: **Provider Maintenance** and **Provider Measures**.

On the **Provider Maintenance** tab, you will see your company's name, for more information, select view or details. To view its sites, the counties it serves and the clinicians link to it.

Provider / **Provider Maintenance** Select Provider: Care Coordination Pro... Alliance - QA Log out

500 Care Coordination Provider Agency

Provider Maintenance

Provider ID	Provider Name	Status	Recredential Due Date	Contract Type	Organization Type	Active
500	Care Coordination Provider	MOA		Administrative	Agency	<input checked="" type="checkbox"/>

Website: Initial Upload

Update Bank A/C Info
View
Details

Page 1 of 1 Go 18 items per page 1 - 1 of 1 items

As you go through the other tabs on the side of the screen, you will see more in-depth information. Note that when you click on the **Site** tab, you can choose a site and the surrounding tiles will show information for that site.

Provider Maintenance

Provider ID	Provider Name	NPI	Status	Contract Type	Organization Type	
100	Rate Schedule - Dummy provider	1234567890	Contracted	Network Contract	Facility	Close Record

Serving Counties **Sites** Site Mapping Contracts Clinicians Provider Notes Provider Docs Suspensions Vendor Mapping

Sites Filter

Site ID	Site Name	Status	Available St...	Contract Type	Organizatio...	City	Effective Date	End Date	Main	PRTF	Active
500	Test 1	Contracted	Available	MOA	Agency	Harrisburg	01/01/1900		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Address1: 123 first st
Address2:
PO Box:
PO Box Can Be Used: No
Inserted User: Admin, System
Inserted Date: 01/11/2012 11:44:00 AM
Notes: test

State: NC
Zip: 28075-0191
County: Cabarrus
Last Updated User: Admin, System
Last Updated Date: 01/11/2012 11:44:00 AM

NPI #: 1234567890
Of Beds: 0
MHL #:
ICF Site: Yes
Open Access for Referral: No
IMD: No

Once you've chosen a site on the **Site** tab, you can then go to the **Site Mapping** tab and it will show more information for only that site. In case you forget which site you are viewing information on, you can find this in the company information bar at the top of the screen.

Provider Maintenance

Provider ID: 100, Provider Name: Rate Schedule - Dummy provider, NPI: 1234567890, Status: Contracted, Contract Type: Network Contract, Organization Type: Facility Close Record

Serving Counties | Sites | **Site Mapping** | Contracts | Clinicians | Provider Notes | Provider Docs | Suspensions | Vendor Mapping

Numbers Filter Add

Number ID	Site ID	Site Name	Medicaid # / Attendin...	NPI #	Effective Date	End Date	Active
31950	500	Test 1		1619995446	12/19/2020		<input checked="" type="checkbox"/>

NC Tracks Site Locator ID
Inserted User: Liu, Charlie
Inserted Date: 12/27/2020 05:45:58 PM
Last Updated User: Liu, Charlie
Last Updated Date: 12/27/2020 05:45:58 PM

Bill Type Specialty Update

Page 1 of 1 Go 10 items per page 1 - 1 of 1 items

Finally, the **Contracts** tab will allow you to see all contracts for your company, including information on what services require authorizations, if they are subcapitated and if they are patient-specific. To search for a service rate, you can enter the all or part of the service code in the **Contract Rates** tile and it will pull up all corresponding services with their rate.

Provider Maintenance

Provider ID: 100, Provider Name: Rate Schedule - Dummy provider, NPI: 1234567890, Status: Contracted, Contract Type: Network Contract, Organization Type: Facility Close Record

Serving Counties | Sites | Site Mapping | **Contracts** | Clinicians | Provider Notes | Provider Docs | Suspensions | Vendor Mapping

Contracts

Contract ID	Contract Type ID	Contract Type	Insurance	Effective Date	End Date	Active
100	970	Network Contract	State	07/01/2011	12/31/2099	<input checked="" type="checkbox"/>

Termination Date
Termination Reason
Is Draft: No
Inpatient Pricing Type: Per Diem Rate
Last Updated User: Goodfellow, Kelly
Last Updated Date: 05/19/2020 01:34:29 PM
Comments: Initial Upload

Paid Days: 45
Claim Days: 90
Process Days: 30

Inserted User: Admin, System
Inserted Date: 08/29/2011 04:37:28 PM

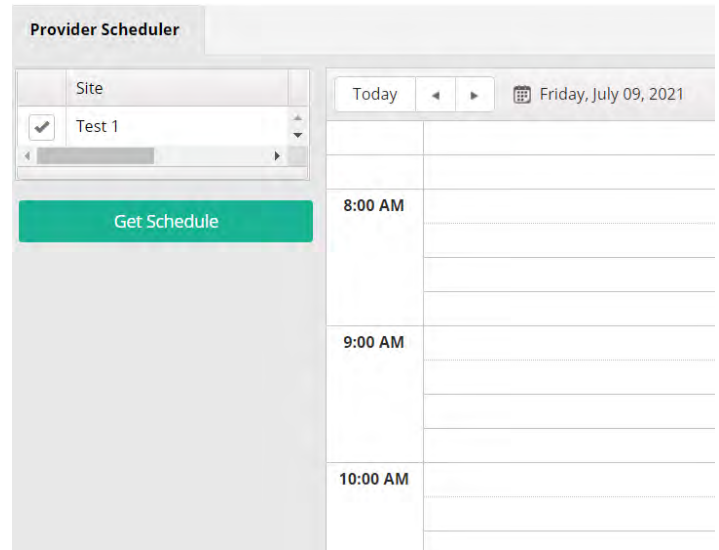
Contract Rates Details

101 891 Signed Procurement Medicaid 07/01/2011 12/31/2099

Page 1 of 1 Go 10 items per page 1 - 2 of 2 items

Provider Scheduler

When Alliance wants to refer a client to you, they will do so by looking at a master schedule of all the providers in their catchment area. Many companies have regularly scheduled times when they can handle referrals. You are able to set these up in the **Provider Scheduler** so that Alliance knows your availability and can schedule appropriately.



Your company's sites will automatically appear in the **Site** list. Choose the one you want (in this case, there is only one) and click **Get Schedule**. This will show you the calendar for that site for the day you have selected.

To set your availability, double click on the calendar at the time your availability starts. For instance, if you are available from 9 am–12 pm, you would double click on the calendar at the 9 am time.

You can now enter the appointment information. Enter a subject, as well as an optional description. Then adjust the start and end times of the block, then enter the number of slots.

Next, enter the information that narrows down what type of client can be seen by disability, age range and funding source. If this is a recurring appointment, click **Recurrence**. This will open up a second appointment screen.

Recurrence

Recurrence Pattern

Sunday Monday Tuesday Wednesday

Thursday Friday Saturday

Recurrence Range

Start Time

05/04/2021 09:15:00 AM

End After Occurrences

End By

Fill in the necessary information and click the **Save** button. This will take you back to the first appointment screen. If everything looks correct, hit the **Save** button. Once you do this, rows will appear underneath the **Save** button.

Appt ID		Patient Name	Start Time	End Time	Status	Ackn...	New Date	New Start T...	New End T
1	<input checked="" type="checkbox"/>		09:00...	09:15...		<input type="checkbox"/>			
2	<input checked="" type="checkbox"/>		09:00...	09:15...		<input type="checkbox"/>			
3	<input checked="" type="checkbox"/>		09:00...	09:15...		<input type="checkbox"/>			

Page 1 of 1 Go 10 items per page 1 - 3 of 3 items

Once slots begin being scheduled, you will be notified by e-mail. You can go to the appointment and double click on it to check the **Acknowledgement** checkbox so Alliance knows you're aware of the appointment. Once the appointment has/not happened, you can go back into the appointment and enter a **Status**. Again, this information appears on the Alliance side side once saved.

Start Time	End Time	Status	Ackn...	New Date	New Start T...	New End T
09:00...	09:15...		<input checked="" type="checkbox"/>			
09:00...	09:15...		<input type="checkbox"/>			
09:00...	09:15...		<input type="checkbox"/>			

Appointment Under Review
 Attended
 CC criteria not met referred back to CS
 CC criteria not

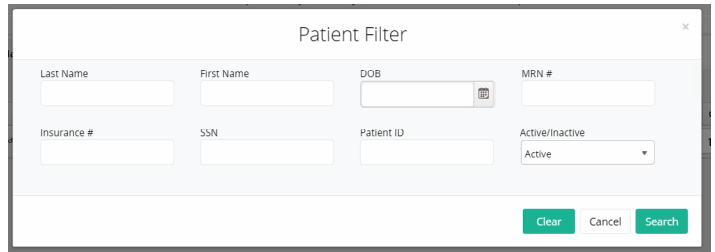
10 items per page 1 - 3 of 3 items

Note also that the block changes colors as Alliance begins to reserve slots:

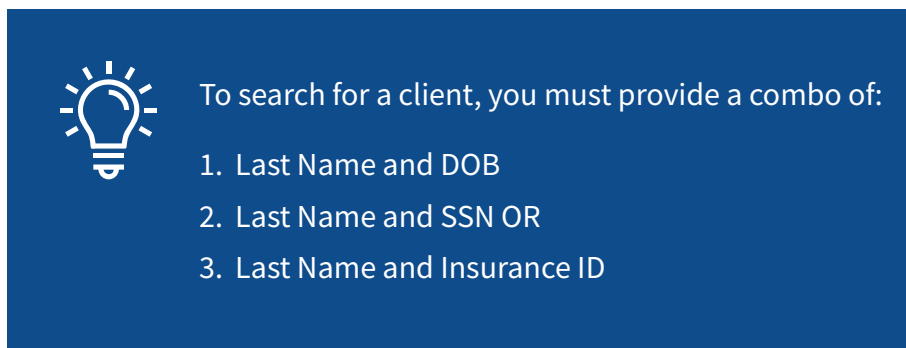
- If a block is **GREEN**, that means all the slots in it are still available. For example, if you have three slots and all three are still available, the block will be green.
- If a block is **YELLOW**, some of the slots have been reserved but not all. If you have one or two of the three slots still available, the block will be yellow.
- If a block is **RED**, all the slots have been reserved. All three slots have been reserved and nothing else can be scheduled here.

Patient Search

When you are first approached by a patient and need to find out what benefit plan(s) they are a part of, you will want to go to **Patient Search** module. You will do this by clicking on **Menu**, then **Patient Search**.



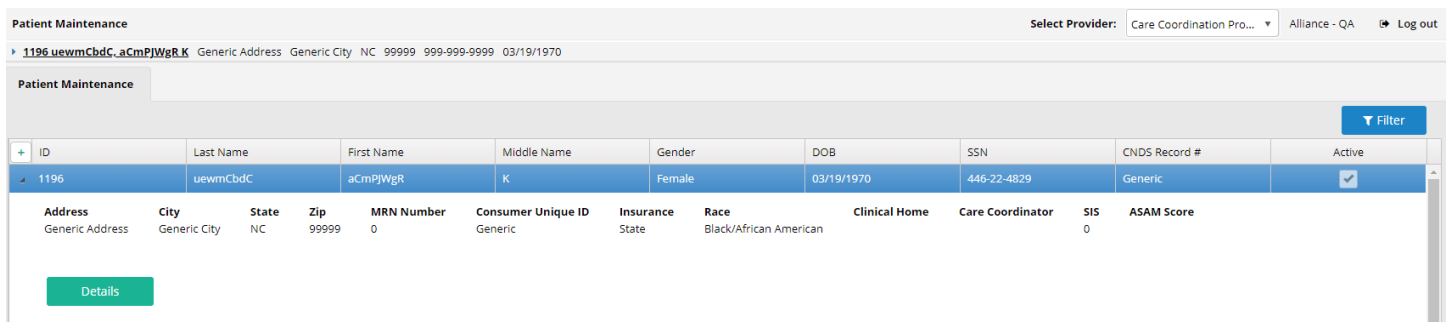
Search for clients in the **Patient** tile to see if they have Medicaid or a state benefit plan by entering the information you have for them and clicking the **Search** button.



To search for a client, you must provide a combo of:

1. Last Name and DOB
2. Last Name and SSN OR
3. Last Name and Insurance ID

This will pull patients who match whatever data you entered. The patient’s information will populate in the surrounding tiles and tabs. You can view their insurance by maximizing the **Insurance** tile.



ID	Last Name	First Name	Middle Name	Gender	DOB	SSN	CNDS Record #	Active
1196	uewmCbdC	aCmPJWgR	K	Female	03/19/1970	446-22-4829	Generic	<input checked="" type="checkbox"/>

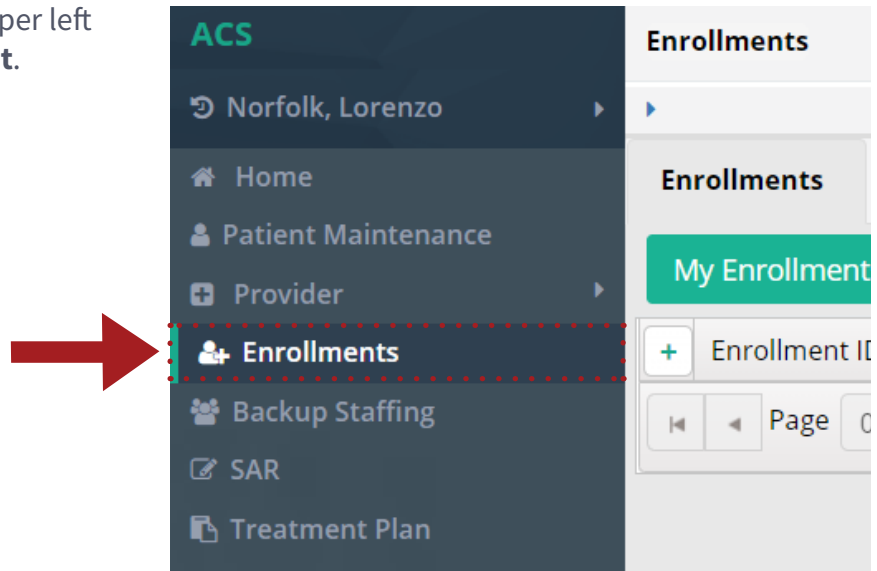
Address	City	State	Zip	MRN Number	Consumer Unique ID	Insurance	Race	Clinical Home	Care Coordinator	SIS	ASAM Score
Generic Address	Generic City	NC	99999	0	Generic	State	Black/African American			0	

[Details](#)

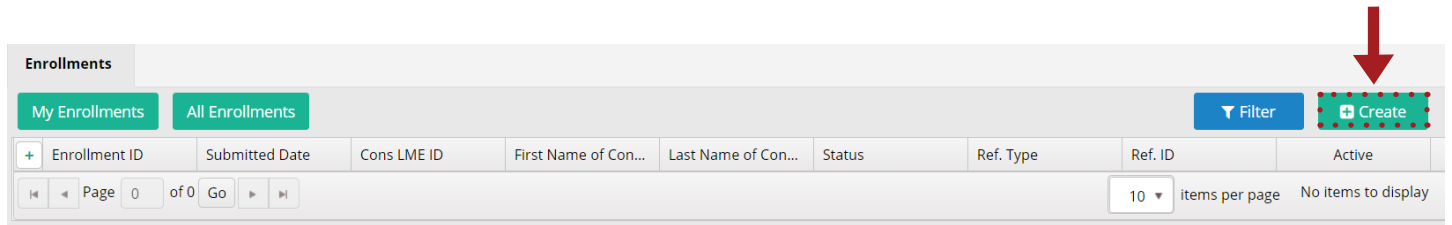
If no patients appear when you search, you may want to try again with other pieces of data, or ask the patient if they might have any other name on file. If after trying several attempts at find the patient you’re still unable to find them, you will want to enroll them in a benefit plan.

Patient Enrollment

To enroll a patient, click on **Menu** in the upper left hand corner of the screen, then **Enrollment**.



This will open the **Enrollment** module. Any enrollments that you have either not yet submitted, or not yet heard back from Alliance on, will appear here on this list. You can filter for other enrollments by using the **Filter** button on the **Base** tile. The surrounding tiles will be populated with the information corresponding to the highlighted enrollment. To create a new enrollment, click on the **Create** button on the **Base** tile.



The **Enrollment Master** allows providers to enter all necessary information to enroll a client. Note that after you've entered the information into fields with the red asterisks next to them, you are able to save the enrollment at the bottom of the page. At this point, the **Additional Clinical Information** button at the top will enable, which allows you to put in target pops, diagnoses, medications, etc.

Close

Create Enrollment Request

* Required to Save * Required to Submit
Additional Clinical Information
Enrollment ID:326653

Screening Type *

Telephone
 Face-To-Face

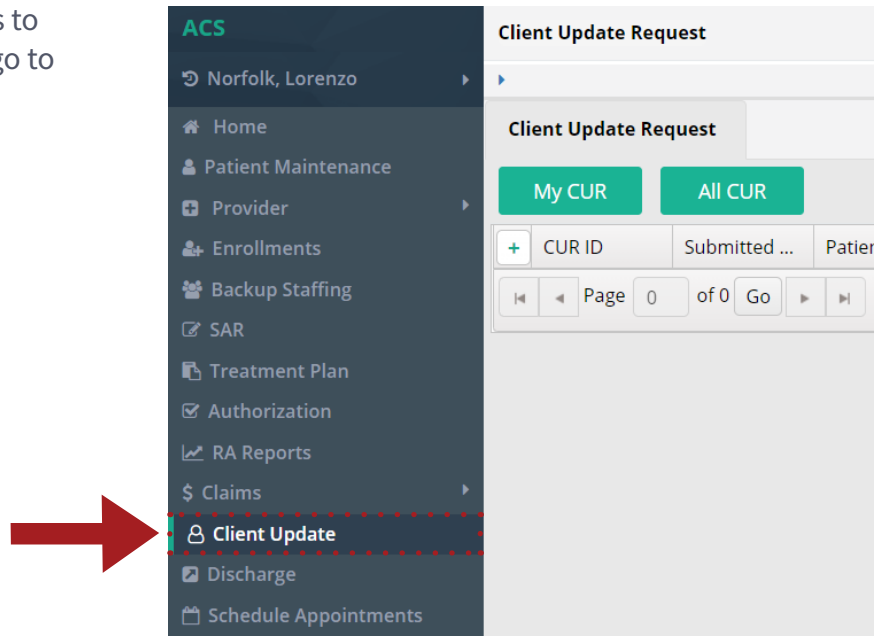
LME Cons. ID

First Name *	Middle Initial	Last Name *	Suffix	Maiden	
<input type="text" value="fjdakl;fdsadl;js"/>	<input type="text"/>	<input type="text" value="fajk;dasjflj;djks"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Same as Last Name
DOB *	Screening Date *	Time Screening Began *	Admission Date *	Consumer Phone # *	
<input type="text"/>	<input type="text" value="07/15/2021"/>	<input type="text" value="10"/> : <input type="text" value="52"/>	<input type="text"/>	<input type="text"/>	
Gender *	Referral Source *	SSN *	<input type="checkbox"/> No SSN	Enrolled In Medicaid	
<input type="text"/>	<input type="text" value="01 - Self - no referral"/>	<input type="text"/>		<input type="radio"/> Yes <input checked="" type="radio"/> No	
Primary Language *	Secondary Language	Proficient In English *	Medicaid #	Medicaid # 2	
<input type="text" value="English"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Ethnicity *	Marital Status *	Pregnant	Race *	Competency Status *	
<input type="text" value="N= Not Hispanic Origin"/>	<input type="text" value="Single (Never Married)"/>	<input type="text"/>	<input type="text" value="White"/>	<input type="text" value="C - Competent"/>	
Legal Guardian *	Relationship *	Phone #	Consumer Unique ID	Employment *	
<input type="text" value="Self"/>	<input type="text" value="Self"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

At the bottom of the page, you are able to either save or submit the document. Until the document is submitted, it will remain on your queue on the **Patient** tile. Pressing the button sends the form to Alliance for processing. You will find the results of your enrollment application on the **Review** tile when a decision has been made.

Clinical Updates

This module allows you to request updates to patient information. To reach this screen, go to **Client Update**.



Saved client update requests (CURs) and submitted requests that are awaiting a decision by Alliance will appear here. To search for other CURs, click the **Filter** button. To create a new CUR, click the create button.

This will take you to a form identical to the enrollment form.

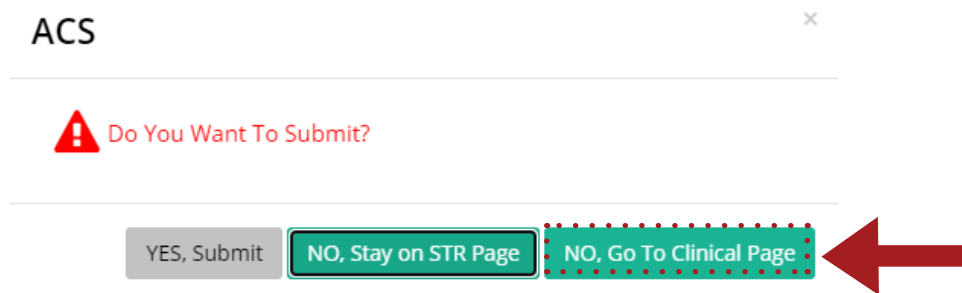
A screenshot of the 'Client Update Request Filter' form. The form is light gray with a white background and a dark gray border. It contains several input fields: Patient ID, Last Name, First Name, DOB, SSN, CUR ID, From Date, and To Date. The DOB, From Date, and To Date fields have calendar icons. There are also two dropdown menus: Status and Active/Inactive. At the bottom right, there are three buttons: Clear, Cancel, and Search.

Click the **Search** button at the bottom of the form to search for the client. When you select the client, their information will populate in all the fields.



If the client doesn't appear after you've entered their last name, DOB, SSN and insurance number, you may need to enroll them. Do this in the **Enrollment** module.

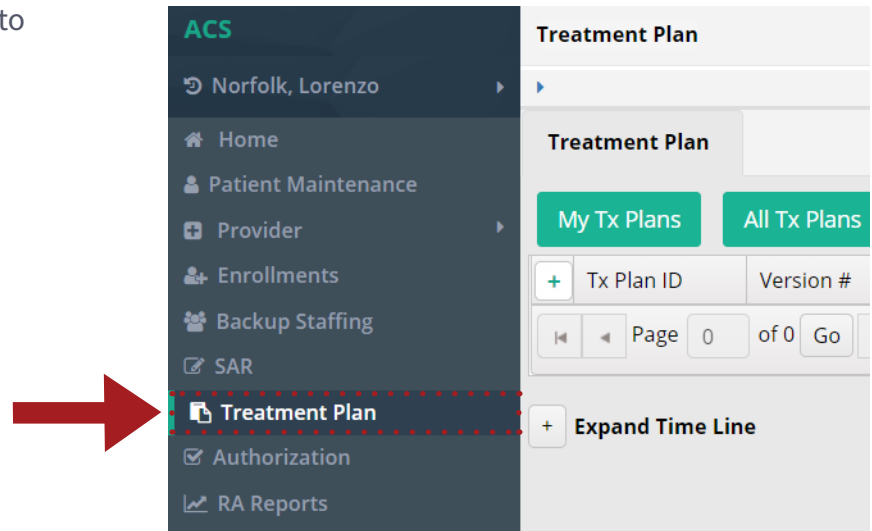
Make the necessary changes to the form. If you want to change clinical information for the client (e.g. target pop, diagnosis, substance abuse information, etc.), click the **Save** button at the bottom of the page. A message will appear asking you want to go to clinical section of the form. Click on this option.



When you've made any changes you want on either page, let Alliance know what changes you're requesting by entering the information into the **Comments** section at the bottom of the first page before hitting **Submit**. This CUR will now show on your queue, awaiting a decision by Alliance.

Treatment Plan

To enter treatment plans in the system, go to **Treatment Plan**.



The main screen will show plans that have been saved, or submitted plans that are awaiting a response from Alliance. To search for other treatment plans, click the **Filter** button. Click on the **Create** button to upload a new treatment plan.

Note the surrounding tiles will have information related to the patient you have uploaded the treatment plan for. You will receive a response from Alliance under the **Review/Comments** tile.

Click the arrow to the left of the **Tx Plan ID** to expand the record. Here you can **Take Assignment** of the plan, **Assign** it to another user if you have the permissions, or **Update** it if you are the assignee or have elevated permissions.

Click the **View** button to review the treatment plan.

View Treatment Plan ×

Tx Plan ID: 3091

Patient *

Patient ID: 1051 First Name: yHpjMNAg Last Name: ajkzahUN

Version #: 1 Provider: Rate Schedule - Dummy pr Tx Plan Type: ISP Reason:

Current Owner: Provider Notified Date: Assignment Date: Completed Date:

Meeting Date: Effective Date: 12/09/2020 End Date: Submitted Date:

Clinical Home Site:

Comments: test

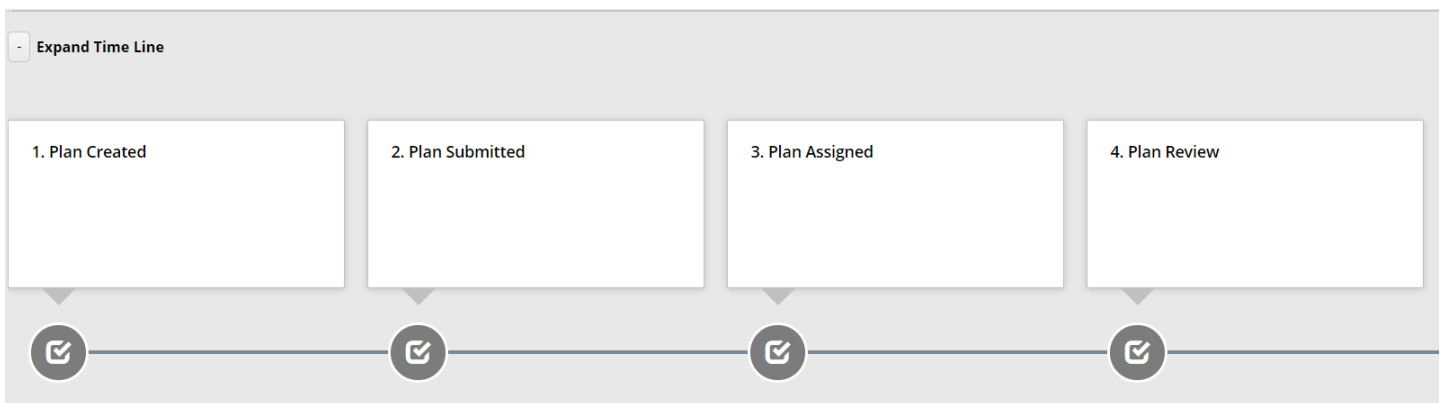
Status Created Approved Not Approved **Tx Plan Category** New Amendment

Clinical Documents

Active

Click **Create** to create a new treatment plan. Fill in the appropriate fields and upload any supporting documents in the **Clinical Documents** section.

When you're finished, click **Save** if you plan on making further changes. The treatment plan will show on **My Tx Plans** and you will be able to edit it. If you're done, click **Submit** to send it in for review. The plan will also show on the main screen but this will be for tracking purposes—you'll be able to see where the treatment plan is in Alliance review process but will not be able to edit it. Click **Expand Timeline** below the treatment plan box to view the steps and status of the treatment plan.



Authorizations

After creating a treatment plan, you're ready to get authorized for services. You can do this by filling out a Services Authorization Request, or SAR.

Completing the SAR

You can get to this module by going to **SAR**. This will open a screen with your SARs listed as the default view. Whichever line is highlighted on the **SAR** box is going to populate area below the title bar with information relating to that SAR. You can also click the arrow to the left of the SAR ID to view additional information and buttons.

SAR ID	SAR Service ID	Agency	Patient Name	Type	Expedited	Remaining Days	Status	Request Type	Placement Recomm	Service Code
712975	859645	Care Coordination ...	uewmCbdC_aCmPJWgR K	IDD	<input type="checkbox"/>	0	Saved	Reauth	All Ages	coord

SARs that have been saved, or have been submitted but are awaiting a decision by Alliance will appear in the queue. To search for other SAR's click the **Filter** button. To enter a new SAR, click the **Create** button. This will open the **Create SAR** window.

Logistics SAR ID 721840

Patient Details

Patient ID Patient Name SSN DOB Address City, State, Zip

Provider Details

Provider

Legal Guardian Name Relation Date of Initial Assessment 05/05/2021 EXPEDITED Retrospective

Voluntary Involuntary MH SA IDD Initial Request Reauthorization

LOCUS ASAM CALOCUS SNAP

Enter the necessary information. Note that in certain fields it will not let you enter text. In these cases, there will be a **Search** button which will allow you to search for and/or enter data into those fields.



Throughout the system, when you begin to type into certain text boxes, autofill options may appear. Simply click on the correct option and it will populate the field.

Use the **Clinical Documents** section to upload as much documentation as you feel is needed to support your case for authorizing the services you are requesting.

If you check the **EXPEDITED** checkbox, this will mark the request as high urgency for the reviewer. Do this **only** if the patient's life is in danger.



To submit the SAR for review, click the **Submit** button. If you plan on working on it further, click **Save**.

SAR Approval and Denial

Once a SAR has been created, you will be able to review the information by expanding the record. Click **View SAR Cycle** to see the status. Click **Details** for additional tabs and abilities to interact with the SAR. Alliance staff may contact you to ask questions about your SAR or request that additional information be uploaded to support the request.

SAR Select Provider: Care Coordination Pro... Alliance - QA Log out

1196 uewmCbdC, aCmPJWgR K Generic Address Generic City NC 99999 999-999-9999 03/19/1970

SAR

My SAR All SAR Filter Create

SAR ID	SAR Service ID	Agency	Patient Name	Type	Expedited	Remaining Days	Status	Request Type	Placement Recomm	Service Code
712975	859645	Care Coordination ...	uewmCbdC, aCmPJ...	IDD	<input type="checkbox"/>	0	Saved	Reauth	All Ages	coord

Inserted User: [User] Inserted Date: 07/15/2021 07:32:34 AM Last Updated User: [User] Last Updated Date: 07/15/2021 07:34:56 AM Current Owner: [User]

[View SAR Cycle](#) [Copy SAR](#) [View](#) [Update](#) [Details](#) [Rescind](#)

Page 1 of 1 Go 18 Items per page 1 - 1 of 1 Items

Once a decision has been made, you will find it under the **SAR > Details > SAR tab dropdown > Services**, which is the default view when you click **Details**. This will show whether Alliance has approved or denied your request, service by service.

21551 axENhQNV, ApmryxvJ Generic Address Generic City NC 99999 999-999-9999 07/16/1937

SAR

SAR ID	Agency	Type	Status	Remaining Days	Expedited	Current Owner
105489	VOICE Therapeutic Solutions, PLLC	MH	Approved - Decision Pending	-2871	No	Admin, System

SAR Clinical Docs Appeal

Services

SAR PC ID	Proc Code	Proc Description	Requested Units	Current Approval Stat...	Last Submitted Date	Site Name	Updated Date
209161	ALL	ALL	2	Approved - Decision P...	08/21/2013	VOICE Therapeutic-10...	07/12/2021

Page 1 of 1 Go

Appeals

If a decision is appealed, you can go to **SAR > Details > Appeal tab dropdown > Appeal** in the **SAR** module to see how it is progressing.

21551 axENhQNV, ApmryxvJ Generic Address Generic City NC 99999 999-999-9999 07/16/1937

SAR

SAR ID	Agency	Type	Status	Remaining Days	Expedited	Current Owner
105489	VOICE Therapeutic Solutions, PLLC	MH	Approved - Decision Pending	-2871	No	Admin, System

SAR Clinical Docs Appeal

Appeal

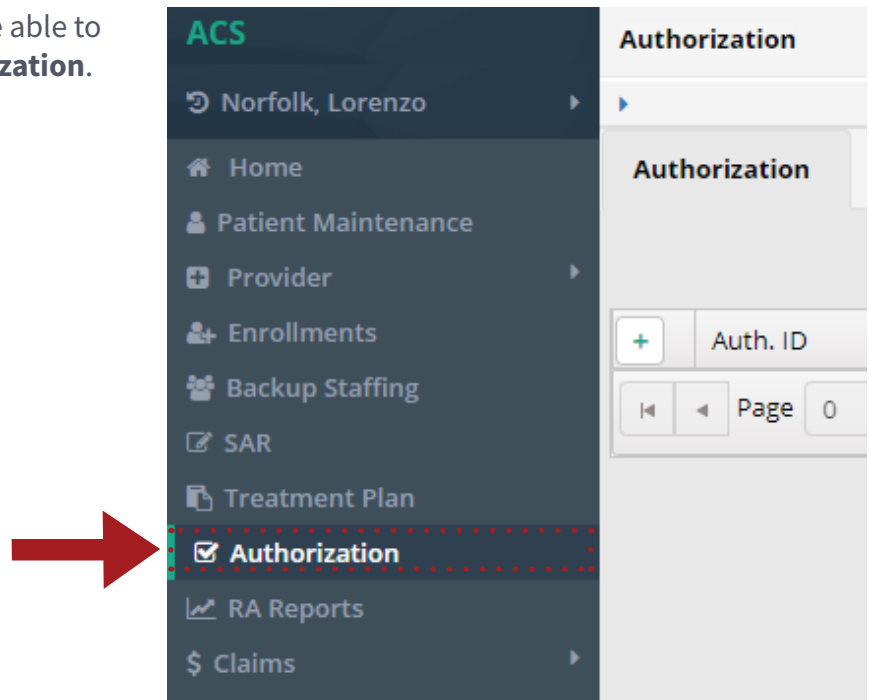
Appeal ID	Appeal Date	Appeal	Relation to Patient	Appeal Level
-----------	-------------	--------	---------------------	--------------

Guideline/Service Definition
Appeal
Appeal Comments History

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Printing the Authorization

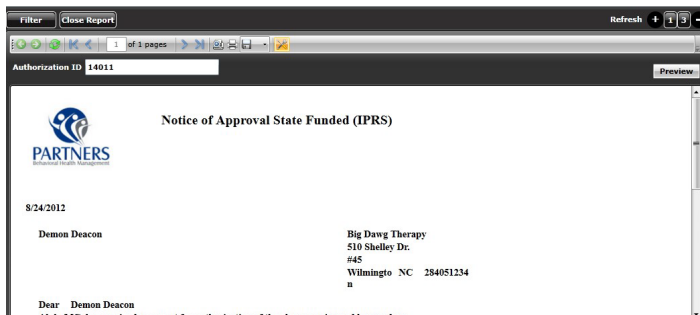
Once a service on a SAR is approved, you're able to print the authorization by going to **Authorization**. Filter for the patient.



The patient may have multiple authorizations. Make sure you have highlighted the one you want to print. Click on the arrow to the left of the **Auth ID** to expand the record and see the action buttons.



Click on the **Print** button to view the authorization.

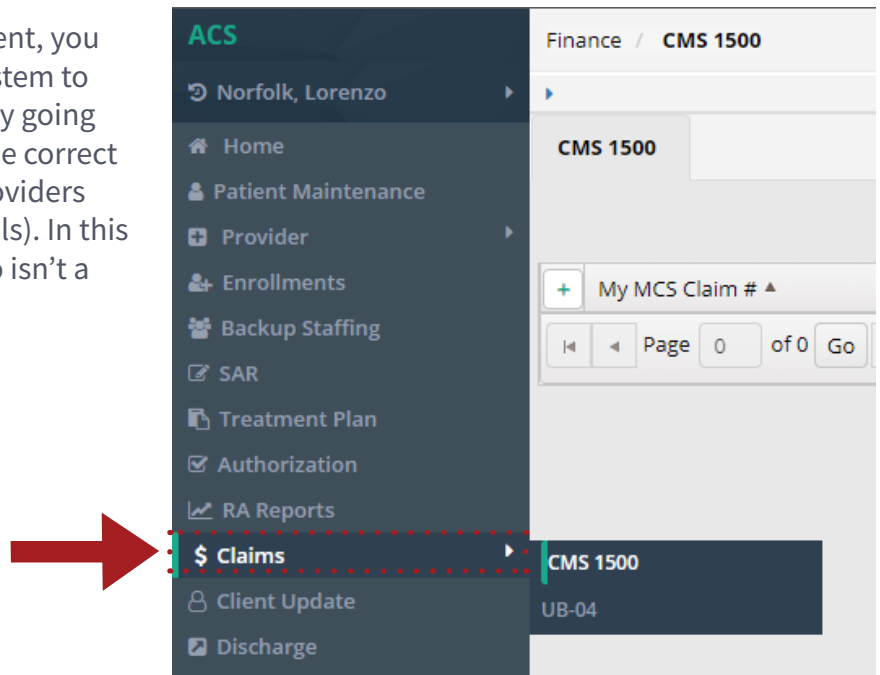


To print the letter, click the printer icon. You can also export the letter to a Word or PDF document to print.

To get out of this screen, click the **Close Report** button at the top of the window.

Claims

Once you begin providing services for a client, you will be able to enter claims through the system to be processed by Alliance. You can do this by going to **Menu**, then **Claims**, then by choosing the correct type of claim to process, **CMS 1500** (for providers who aren't hospitals) or **UB-04** (for hospitals). In this workflow, we act as if we're a provider who isn't a hospital.



The main screen will show you all claims that have been saved but not yet submitted. These claims will remain on this tile for 30 days, then they will be automatically deleted from the system. Click the arrow to the left of the **My MCS Claim #** to expand the record. Click **Details** to view the **Service** tab which will show what services are linked to that claim. Click the arrow to the left of the **Date From** field to view the **Status** box which shows you the status of the highlighted service.

▶ **412964 EZzrgus, AvVPSNFk** Generic Address Generic City NC 99999 999-999-9999 08/29/1981

CMS 1500

My MCS Claim #	Provider ID	Provider Name	Site ID	Site Name	Patient Name
2694460	1254	Southlight Healthcare	1265	Southlight - GARNER RD	EZzrgus, AvVPSNFk

Service

+ Date From	Date To	Service	Mod1	Mod2	Mod3	Mod4	POS
▶ 08/30/2019	08/30/2019	H0020					Office

EPSDT	Rendering NPI	Taxonomy	Status	COB Amount	COB Reason
False	1316268345	251500000X	Approved	0	

Status

Approved

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Click **Create** to enter a new claim.

At the bottom of the form, you will be presented with four options:

- **Print** will print the form.
- **Save** will keep the claim on your queue for 30 days.
- **Cancel** will cause you to leave the screen without saving.
- **Submit** will send the claim off to be processed.



If you ever want to see if a specific claim has been paid or denied, you can go to the main screen and search for it using the **Filter** button.



If you are entering a claim that is almost identical to one you have already entered, filter for the original claim, then hit the **Copy** button. It will copy the claim's info into a new form, where you can make any changes you want.

Replacing and Reversing Claims

To replace or reverse a claim, first filter for the processed claim you would like to replace or reverse. Once you've found the claim, click the **Copy** button.



This will display the claim in an editable format. This is also the process for submitting claims similar to past claims, since all you would have to do is make a few minor changes and hit **Submit**. The only difference is that to replace/reverse a claim, you would go to #22 and enter the action you're taking.

22. RESUBMISSION CODE	ORIGINAL REF.NO
<div data-bbox="107 667 521 972">A dropdown menu is open, showing two options: "7 - Replacement" and "8 - void/cancel".</div>	<div data-bbox="537 667 792 972">An input field for the original claim number. A red arrow points to this field from the right.</div>

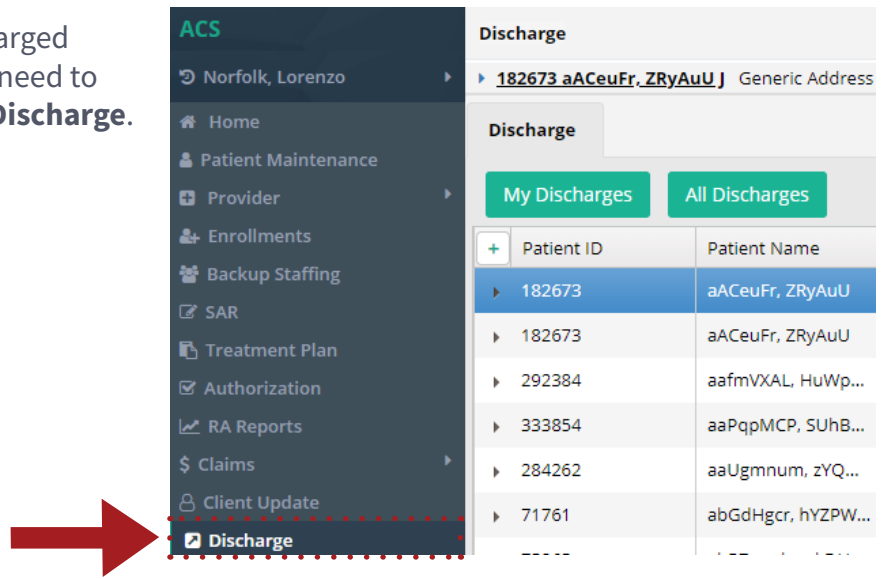
After you choose **Replacement** or **Void/Cancel**, enter the original claim number in the **Original REF. NO** field. This will tell Alliance which claim you're replacing or reversing. The original claim number can be found in the **Claim #** column on your RA or the **Claim Header ID** column on your daily claims dump.

- **Replacement:** Replacing a claim tells Alliance that the information you sent in the first time was incorrect and that this new claim has the correct info. If it was paid the first time, that money will be recouped by Alliance and you will be asking for it again in this claim. If it didn't pay, you are essentially just resubmitting the claim for Alliance approval.
- **Void/Cancel:** Reversing a claim tells Alliance you entered the wrong info in the original claim and you want them to recoup the money paid without sending another claim to try to recollect that money.

In the case of a replacement, make any necessary changes. Click **Submit**.

Discharge Requests

To request that a patient be listed as discharged from your company with Alliance, you will need to complete a discharge request. First, go to **Discharge**.



Note that any authorizations and claims will populate in the surrounding tiles if there is a pending discharge request. To create a request, click **Create**.

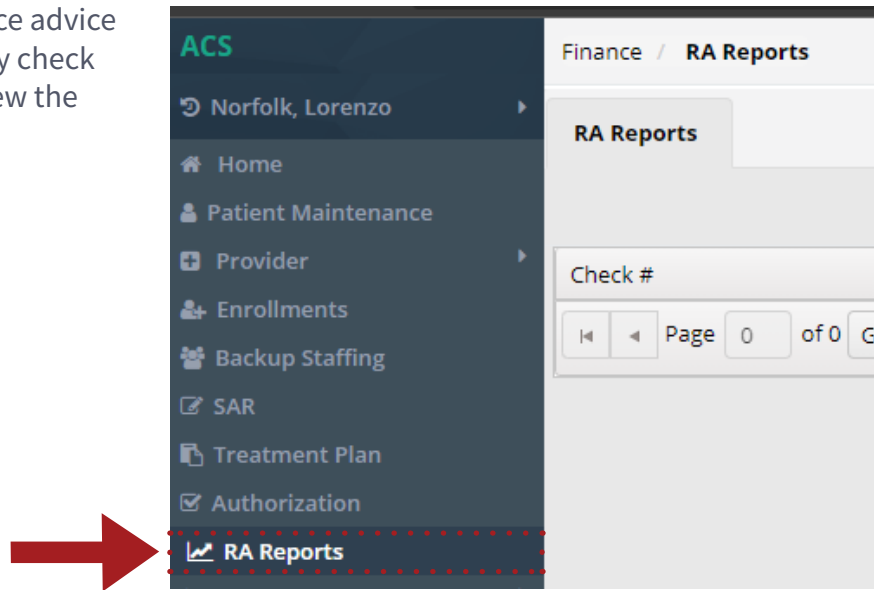
The screenshot shows the 'Create Discharge Request' form. At the top right, it says 'Discharge ID 664877'. The form is divided into several sections:

- Patient**: Fields for Patient ID, First Name, and Last Name. Includes 'Clear' and 'Search' buttons.
- Provider**: Fields for Provider ID (500) and Provider Name (Care Coordination Provider).
- Discharge Details**: Fields for Service, Discharge Date, Final LOC, Referral, Living Arrangement, Employment, # of Arrests in Last 30 Days, # of SHG class in Last 30 Days, Assigned To (0), and Discharge Reason.

Enter the necessary information and any comments. To save the request without submitting, click **Save**. To submit the request, click **Submit**.

RA Reports

This module allows users to view remittance advice (RA) reports from a certain time frame or by check number. Go to **Finance > RA Reports** to view the reports.



User Profile

This module allows users to reset their passwords and select when they want to be notified by e-mail in the event of Alliance taking action on something they have submitted.

