

PORTAL STATUS INQUIRY GUIDE

STATUS INQUIRY

Status Inquiry is an application to allow providers to search for a claims status if the claim has been submitted in the last 6 months.

STATUS INQUIRY PERMISSIONS

A Provider Administrator must add Status Inquiry to the appropriate Provider User staff. Open User Maintenance, under the Administration tab. Select the user you would like to add the permissions to. Click Update, then click Next. In the “Permissions Available” select Status Inquiry. Once selected click the arrow that is pointing to the right to move these options to the selected users’ permissions and click “Update”

Permissions Available	Permissions Selected
<input checked="" type="checkbox"/> Select All	<input type="checkbox"/> Select All
<input checked="" type="checkbox"/> Status Inquiry	<input type="checkbox"/> H.Home - RA
	<input type="checkbox"/> Medicaid Remit Advice
	<input type="checkbox"/> Negative Balance Report
	<input type="checkbox"/> PCP - Case Load
	<input type="checkbox"/> PCP - Claims Paid
	<input type="checkbox"/> PCP - RA
	<input type="checkbox"/> Claim Submission
	<input type="checkbox"/> Claim Submission View

Once permissions are updated the user will see Status Inquiry under the Claims tab



STATUS INQUIRY

Under the Claims menu, hover over the Claims tab with your mouse and select Status Inquiry



This will bring you to the Claim Status Inquiry Screen:

Administration
Eligibility
Reports
Communications
Claims

Claim Status Inquiry

Searches are limited to claims associated with the billing NPIs that match your profile. If no results are displayed, please verify the information you have entered. If this persists, please contact your Provider Admin to update your profile NPI or call the Telephone Service Unit for more information.

Only claims submitted within 6 months of today's date will be available for search results.

Search Option # 1 :

Search Option # 2 : * Denotes a required field. You may select one or multiple Servicing NPIs. When searching HCFA, Procedure Code is Optional.

Select a Claim Type*

In Patient

Out Patient

LTC

HCFA

Xover

Billing NPI *

Select One

- 1234567897
- 1223344559
-
-
-

Servicing NPI *

Select All

Recipient ID *

Dates of Service *

From To

Reference Number	Billing NPI	Servicing NPI	Recipient ID	Procedure Code	From Date	To Date	Patient Account	Status	Remittance Date
No data available!									

Row count:

There are two available search options

SEARCH OPTIONS

Reference Number Search (Search Option #1)

Enter the 14-digit reference number here and hit Search

Claim Status Inquiry

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Search Option # 1 :

Search Option # 2 : * Denotes a required field. You may select one or multiple Servicing NPIs. When searching HCFA, Procedure Code is Optional.

Select a Claim Type*

In Patient

Out Patient

LTC

HCFA

Xover

Billing NPI *

Select One

- 1234567899
-
-
-
-

Servicing NPI *

Select All

Recipient ID *

Dates of Service *

From To

Reference Number	Billing NPI	Servicing NPI	Recipient ID	Procedure Code	From Date	To Date	Patient Account	Status	Remittance Date
20192080500010	1234567899	1234567899	999000111	93922	09/10/2019	09/10/2019		Paid	10/2/2019

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Claim Details Search (Search Option #2)

With this type of search the following items are required.

Claim Type (Choose One)

- In Patient
- Out Patient
- LTC (Long Term Care Claim)
- HCFA (Professional Claim)
- Xover (Medicare Crossover Claim)

Billing NPI

Select One

Servicing NPI

Select One, Select Multiple, or Select All

Recipient ID

Enter Recipient's 9-digit South Dakota Medicaid ID

Dates of Service

From and To dates are required

NOTE: You may search for any date of service, but the search will only look back 6 months from today's date.

Procedure Code – This is an option search field when searching for a HCFA claim

Claim Status Inquiry

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Search Option # 1 : Reference Number

Search Option # 2 : * Denotes a required field. You may select one or multiple Servicing NPIs. When searching HCFA, Procedure Code is Optional.

Select a Claim Type *

In Patient

Out Patient

LTC

HCFA

Xover

Billing NPI *

Select One

1112233344

1223344455

Servicing NPI *

Select All

1112233344

1333455566

Recipient ID: 999000123 *

Dates of Service: 07/02/2019 * 07/02/2019 *

Procedure Code: 99213

Reference Number	Billing NPI	Servicing NPI	Recipient ID	Procedure Code	From Date	To Date	Patient Account	Status	Remittance Date
20191877000110	1112233344	1333455566	999000123	99213	07/02/2019	07/02/2019	ABC123	Paid	8/14/2019
20192015701210	1112233344	1333455566	999000123	99213	07/02/2019	07/02/2019	ABC123	Denied	9/11/2019
20192227802110	1112233344	1333455566	999000123	99213	07/02/2019	07/02/2019	ABC123	Debit Adjusted	9/25/2019
20192228703590	1112233344	1333455566	999000123	99213	07/02/2019	07/02/2019	ABC123	Credit Adjusted	9/25/2019

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STATUS INFORMATION

Paid

This claim has been paid, please reference the remittance advice for more information.

Denied

This claim has been denied, please reference the remittance advice for more information.

Voided

This is the reference number of the void of a paid claim.

Credit Adjusted

This is the reference number of the “take back” portion of an adjusted claim.

Debit Adjusted

This is the reference number of the new claim that was received as an adjustment.

In Process

This claim is currently pending and/or waiting for adjudication.

If results show No data available; Please check your search criteria, including NPI combinations. If response persists, please contact our Telephone Service Unit:

In-state: 1.800.452.7691

Out-of-state: 605.945.5006