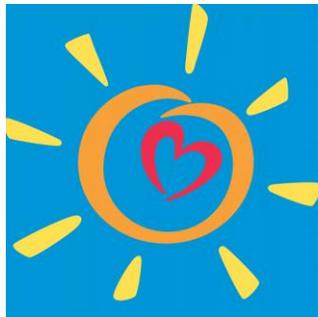


L.A. Care Provider Portal

Claims Search & View Reference Guide



L.A. Care
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For All of L.A.

Provider Claims Search & View Quick Reference Guide

The *Provider Portal Claims Search & View Reference Guide* is a tool created to assist providers through the step-by-step process of searching, viewing, managing, and tracking claims on the portal.

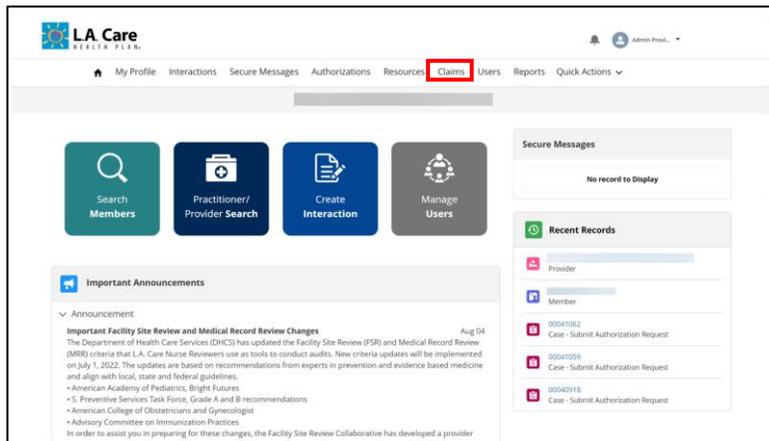
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Search and View Claims – Homepage

Claims functionality allows providers to search and view claims, manage and track claims details on the Provider portal. Note that Claims detail is **only visible by users with a Billing / MSO / Claim User role assigned**.

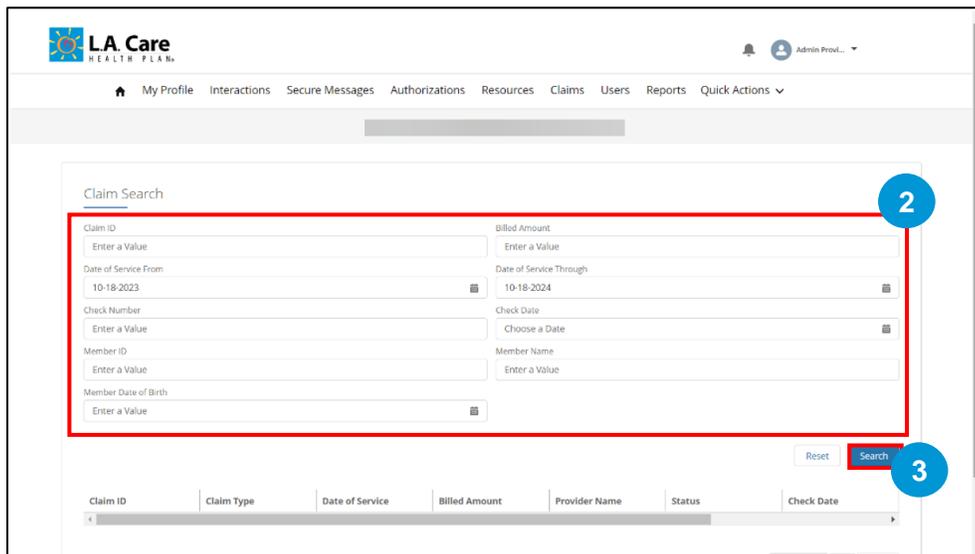
Step 1: Click the **Claims** menu item on the Provider Portal Homepage to access the Claims Search page.



Step 2: The **Claim Search** page displays. Here, you can enter search criteria in the **Claim ID, Billed Amount, Date of Service From, Date of Service Through, Check Number, Check Date, Member ID, Member Name, and Member Date of Birth** fields.

Note: The **Date of Service From** and **Date of Service Through** fields are mandatory and the date range entered in these two fields should not exceed one year.

Step 3: Click **Search** to view the search results. You can click **Reset** to reset the values in all the fields to default values.



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Please note that you will have access to the claim details for the Claim IDs where the logged in user account is listed as the Pay to Provider. For all other claims, the links to access the claim details will be disabled.

Step 3: Based on the search criteria entered, the search results appear under the Search Criteria fields. Click the **Claim ID** from the search result to access the **Claim Details** page and view the claim details.

Claim Search

Claim ID: Enter a Value | Billed Amount: Enter a Value

Date of Service From: 10-18-2022 | Date of Service Through: 10-18-2023

Check Number: Enter a Value | Check Date: Choose a Date

Member ID: Enter a Value | Member Name: Enter a Value

Member Date of Birth: Enter a Value

Reset Search

Claim ID	Claim Type	Date of Service	Billed Amount	Provider Name	Status	Check Date
23310000004	PROFESSIONAL	Nov 18, 2022	\$200.00	KIM, MEE SOOK	PAID	Jan 10, 2023
22355E100301	PROFESSIONAL	Nov 19, 2022	\$200.00	KIM, MEE SOOK	PAID	Jan 10, 2023
22312E022518	PROFESSIONAL	Oct 28, 2022	\$2,500.00	KIM, MEE SOOK	DENIED	Nov 14, 2022
22312E022478	PROFESSIONAL	Oct 28, 2022	\$250.00	KIM, MEE SOOK	PAID	Nov 28, 2022
22312000108	PROFESSIONAL	Oct 28, 2022	\$250.00	KIM, MEE SOOK	DENIED	Dec 20, 2022

Previous 1 Next

The **Claims Details** page displays to users with the Billing / MSO / Claim User role assigned. Here, you can view details of the selected claim in different sections.

- 1. Highlights Panel:** You can view **Claim Header, Date of Service, Pay to Provider, Claim Status, Member Name, Billed Amount, Paid Amount, and Date Received.**
- 2. Header:** You can view **Patient, Patient Control #, Member ID, Date of Birth, Claim ID, Authorization ID, and Member Plan.**

22355E100339
Claim Header

Date of Service: 2022-11-18 | Pay to Provider: | Claim Status: PAID | Member Name: | Billed Amount: \$200.00 | Paid Amount: \$0.00 | Date Received: 2022-11-18

Detail

Header

Patient: | Patient Control #: |

Member ID: | Date of Birth: 2000-05-17

Claim ID: 22355E100339 | Claim Status: PAID

Authorization ID: | Benefit Plan: MCLA Medi-Cal Benefit Plan

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Claims Search & View Reference Guide

- Billing / Payment Details:** You can view **Vendor No, Vendor Name, TIN, Check No, Check Amount, Check Date, Tax Withhold, Offset Amount, Total Net Amount, and FFS/CAP.**
- Claim Payment Details:** You can view **Provider, Member Responsibility, Vendor No, Total Net Billed Amount, Total Net Affordable Amount, Total Net Deductible, Total Net Co-Ins, Total Net Co-Pay, Total Net Interest / Other Adjustments, Total Net Amount, Procedure Code, Procedure description** and other claim payment related details.
- Payment Offset Amount Details :** You can view **Member ID, Patient Name, Claim ID, Requested Amount, Offset Amount, Collected To Date, Offset Amount, and Outstanding Amount.**

3 Billing / Payment Details

Vendor No	Vendor Name
TIN	Check No
Check Amount	Check Date
TAX Withhold	Offset Amount
Total Net Amount	FFS / CAP

4 Claim Payment Details

Provider	Member Responsibility		
Amount	Adj Reason Code	Claim Adj Group Code	Units

Line #	DOS From DT	DOS Thru DT	Serv Code	Mod Code	Rev Code
1	2022-11-18	2022-11-18	99238		

Total Net Billed Amount	Total Net Allowable Amount
Total COB Amount	Total Net Deductible
Total Net Co-Ins	Total Net Co-Pay
Total Net Interest / Other Adjustments	Total Net Amount

Procedure Code	Procedure Description
----------------	-----------------------

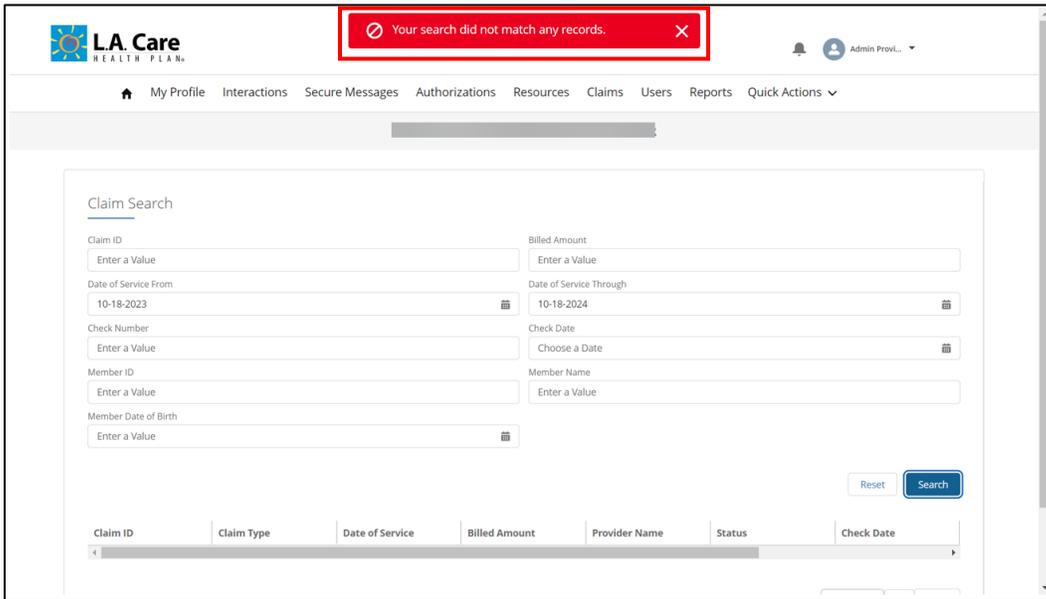
5 Payment Offset Amount Details

Member ID	Patient Control #	Patient Name	Claim ID	Requested Amount	Offset Amou
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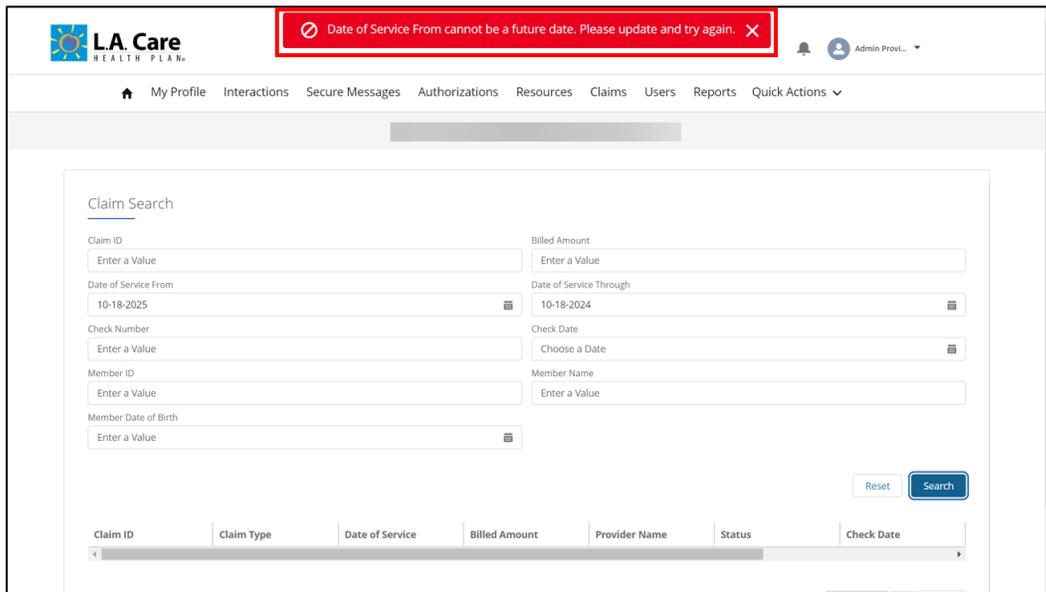
Claims Search & View – Errors

When entering the search criteria, it is crucial to ensure that you input accurate and complete information. Failure to do so will result in the following errors:

- The search criteria doesn't match with any record in the system.



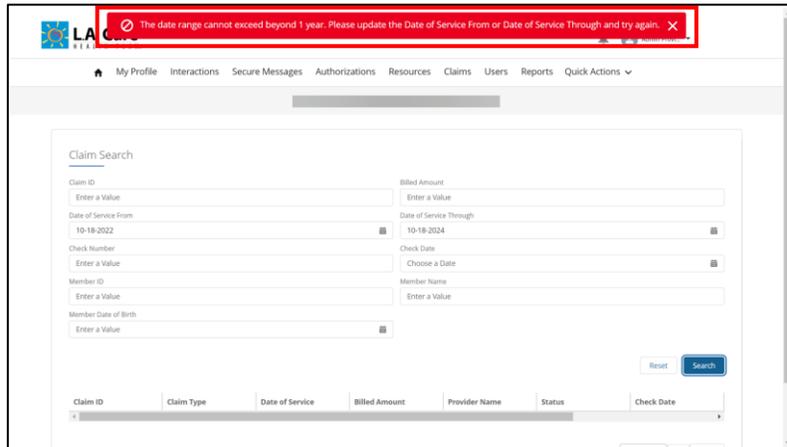
- The date entered in the **Date of Service From** field is a future date.



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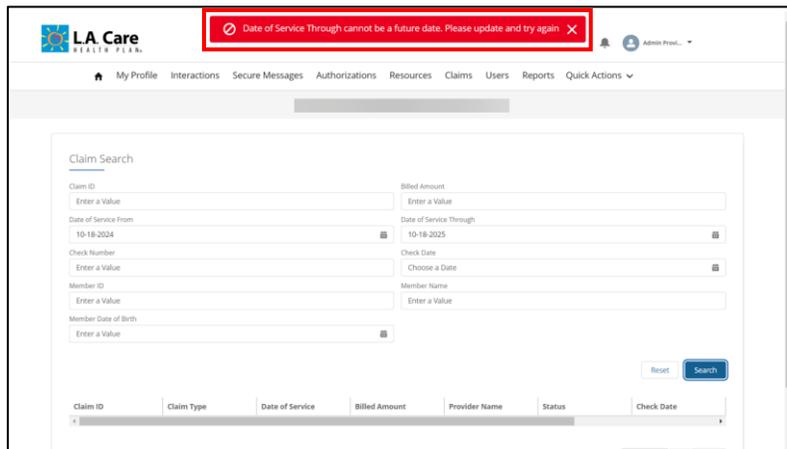
Claims Search & View Reference Guide

- The date range entered in the **Date of Service From** and **Date of Service Through** fields exceeds one year.



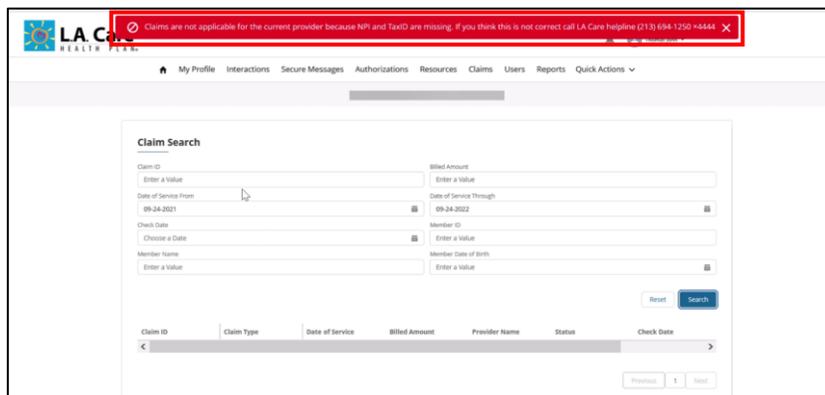
The screenshot shows the L.A. Care Provider Portal Claim Search form. A red error message at the top states: "The date range cannot exceed beyond 1 year. Please update the Date of Service From or Date of Service Through and try again." The form fields include: Claim ID, Billed Amount, Date of Service From (10-18-2022), Date of Service Through (10-18-2024), Check Number, Check Date, Member ID, Member Name, and Member Date of Birth. A table below the form shows columns for Claim ID, Claim Type, Date of Service, Billed Amount, Provider Name, Status, and Check Date.

- The date entered in the **Date of Service Through** field is a future date.



The screenshot shows the L.A. Care Provider Portal Claim Search form. A red error message at the top states: "Date of Service Through cannot be a future date. Please update and try again." The form fields include: Claim ID, Billed Amount, Date of Service From (10-18-2024), Date of Service Through (10-18-2025), Check Number, Check Date, Member ID, Member Name, and Member Date of Birth. A table below the form shows columns for Claim ID, Claim Type, Date of Service, Billed Amount, Provider Name, Status, and Check Date.

- When a user logs into the Provider Portal and the selected account has either a **TAX ID** or **NPI**, the user will be able to search for claims. However, if the account lacks both an **NPI** and a **TAX ID**, the user will encounter the highlighted error message as shown below.



The screenshot shows the L.A. Care Provider Portal Claim Search form. A red error message at the top states: "Claims are not applicable for the current provider because NPI and TaxID are missing. If you think this is not correct call LA Care helpline (713) 694-1250 x4494." The form fields include: Claim ID, Billed Amount, Date of Service From (09-24-2021), Date of Service Through (09-24-2022), Check Date, Member ID, Member Name, and Member Date of Birth. A table below the form shows columns for Claim ID, Claim Type, Date of Service, Billed Amount, Provider Name, Status, and Check Date.

L.A. Care Provider Portal

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Search and View Claims – Member 360

When you search a member, you will land on the Member 360 page where you can navigate to the **Claims** tab and perform the following steps to view the Claim details:

Step 1: Under the **Claims** tab, on the **Claims Search** page, enter the search criteria in the **Claim ID**, **Billed Amount**, **Date of Service From**, **Date of Service Through**, **Check Number**, and **Check Date** fields.

Note: The **Date of Service From** and **Date of Service Through** fields are mandatory and the date range entered in these two fields should not exceed one year.

The screenshot shows the Member 360 interface. On the left, there are sections for Member Information and Plan Card. The main area has tabs for Detail, Member Plan, Coverage, Claims, Authorizations, and Documents. The 'Claims' tab is active and highlighted with a red box. Below the tabs is the 'Claim Search' form with fields for Claim ID, Billed Amount, Date of Service From (10-18-2023), Date of Service Through (10-18-2024), Check Number, and Check Date. A 'Search' button is at the bottom right of the form. A blue circle with the number '1' is positioned to the right of the search form.

Step 2: Click **Search** to view the search results. Then, click the **Claim ID** from the search result to view the **Claim Details** page.

The screenshot shows the same Member 360 interface, but now displaying search results. The 'Search' button from the previous step is highlighted with a red box. Below the search form is a table with columns: Claim ID, Claim Type, Date of Service, Billed Amount, and Provid. Two results are shown, both for 'PROFESSIONAL' claims on 'Sep 16, 2020' with a 'Billed Amount' of '\$1,457.00'. The first Claim ID is '20318E023877A1' and the second is '20318E023877'. A blue circle with the number '2' is positioned to the left of the search results table.

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On the **Claims Details** page, you can view details of the selected claim in different sections.

- 1. Highlights Panel:** You can view **Claim Header, Date of Service, Pay to Provider, Claim Status, Member Name, Billed Amount, Paid Amount, and Date Received.**
- 2. Header:** You can view Patient Details such as **Patient, Patient Control #, Member ID, Date of Birth, Claim ID, Claim Status, Authorization ID, and Benefit Plan.**
- 3. Billing and Payment Details:** You can view **Vendor No, Vendor Name, TIN, Check No, Check Date, Check Amount, TAX Withhold, Offset Amount, Total Net Amount, and FFS / CAP.**

22355E100339
Claim Header

Date of Service	Pay to Provider	Claim Status	Member Name	Billed Amount	Paid Amount	Date Received
2022-11-18		PAID		\$200.00	\$0.00	2022-11-18

Detail

▼ Header

Patient	Patient Control #
Member ID	Date of Birth
	2000-05-17
Claim ID	Claim Status
22355E100339	PAID
Authorization ID	Benefit Plan
	MCLA Medi-Cal Benefit Plan

▼ Billing / Payment Details

Vendor No	Vendor Name
TIN	Check No
	50218765
Check Amount	Check Date
\$74.64	2023-01-10
TAX Withhold	Offset Amount
\$0.00	\$0.00
Total Net Amount	FFS / CAP
\$37.22	FFS

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- 4. Claims Payment Details:** In this section, you can view **Provider, Member Responsibility, Vendor No, Procedure Code, Procedure Description** and other claim related details.
- 5. Payment Offset Amount Details:** In this section, you can view **Requested Amount, Collected To Date amount, Offset Amount, Outstanding Amount** related to patient claim. You can use horizontal scroll bar to view complete details.

▼ Claim Payment Details

Provider	Member Responsibility \$0.00
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Amount	Adj Reason Code	Claim Adj Group Code	Units
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Page Size: 5 | << First | < Previous | Showing 1 of 1 Page(s) | Next > | Last >> | Total Records: 0

Vendor No

Line #	DOS From DT	DOS Thru DT	Serv Code	Mod Code	Rev Code
1	2022-11-18	2022-11-18	99238		

Page Size: 5 | << First | < Previous | Showing 1 of 1 Page(s) | Next > | Last >> | Total Records: 1

Total Net Billed Amount \$200.00	Total Net Allowable Amount \$37.22
Total COB Amount	Total Net Deductible \$0.00
Total Net Co-Ins \$0.00	Total Net Co-Pay \$0.00
Total Net Interest / Other Adjustments \$0.00	Total Net Amount \$37.22

Procedure Code	Procedure Description
99238	Hospital inpatient or observation discharge day management

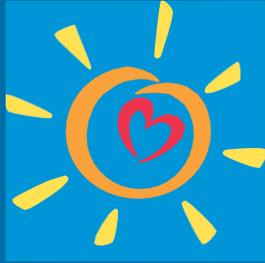
Page Size: 5 | << First | < Previous | Showing 1 of 1 Page(s) | Next > | Last >> | Total Records: 1

▼ Payment Offset Amount Details

Member ID	Patient Control #	Patient Name	Claim ID	Requested Amount	Offset Amos
				\$200.00	\$0.00

Page Size: 5 | << First | < Previous | Showing 1 of 1 Page(s) | Next > | Last >> | Total Records: 1

A1 Claim/Service denied.
Page Size: 5 | << First | < Previous | Showing 1 of 2 Page(s) | Next > | Last >> | Total Records: 7



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