

# MOS FastEMC 8.03 AVAILITY Clearinghouse Change

RE: Illinois Customers currently submitting claims to THIN for Blue Shield/Medicaid/Commercial payors

This version has been adjusted to install the new communications features and programming for submitting to Availity Clearinghouse.

As of October 15, 2007, the THIN dial-up connection will be disconnected. Availity will require a Internet Service Provider to submit claims. So if you do not currently have WEB access it is important that you do so quickly to avoid a delay in payments.

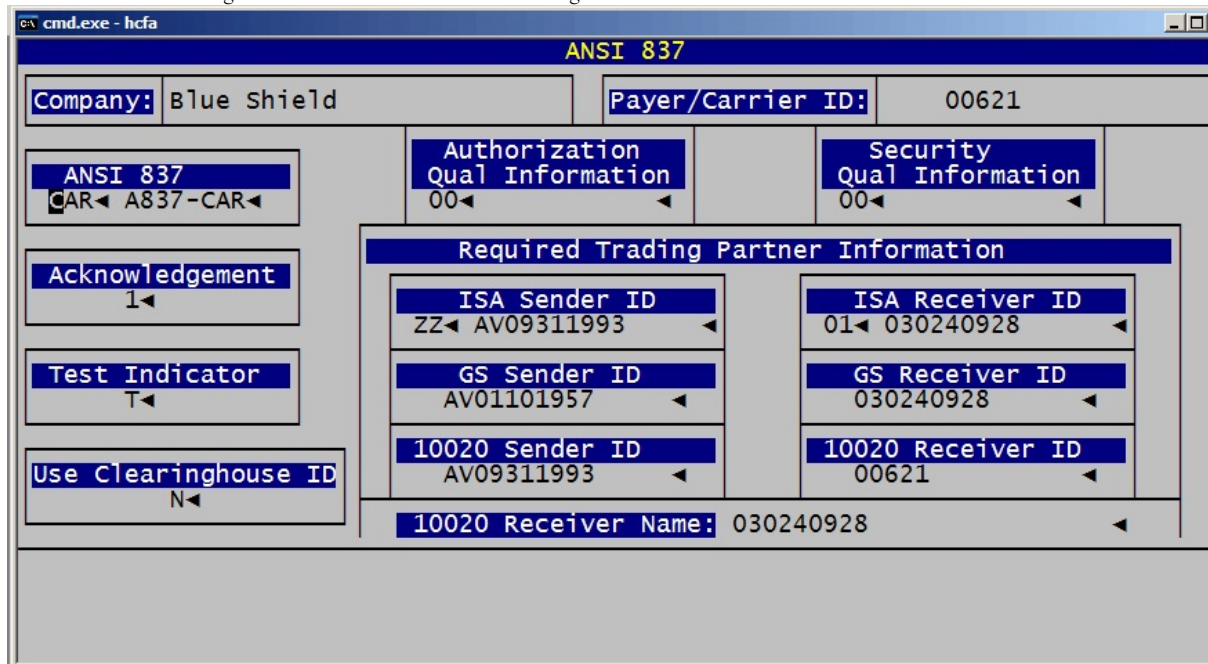
It is only necessary to install the electronic filing upgrade unless it has been some time since your last upgrade.

After completing the installation, it is necessary to make the following changes to the ANSI837 Submitter/Receiver Data on the MOS ANSI CLAIMS SHORTCUT MENU.

Only change carriers that do not represent Medicare.

## AVAILITY Setup

There are several changes that have to be made to the background screens of the Insurance files.



Company: Blue Shield		Payer/Carrier ID: 00621	
ANSI 837 CAR A837-CAR	Authorization Qual Information 00	Security Qual Information 00	
Acknowledgement 1	Required Trading Partner Information		
Test Indicator T	ISA Sender ID ZZ AV09311993	ISA Receiver ID 01 030240928	
Use Clearinghouse ID N	GS Sender ID AV01101957	GS Receiver ID 030240928	
	10020 Sender ID AV09311993	10020 Receiver ID 00621	
	10020 Receiver Name: 030240928		

The following fields will need to be addressed: Authorization Qual Information Put 00 in the first field and leave the second field blank Security Qual Information Put 00 in the first field and leave the second field blank ANSI 837 Put in CAR in the first field and A837-CAR in the second field.

**Acknowledgement** Put in a 1

**ISA SenderID** Put ZZ in the first field and put the following submitter ID

**AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
AV09311993**

**Isa Receiver ID** Put ZZ in the first field and put in the following Receiver ID

**AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
AV09311993**

**Test Indicator** Put in P (stands for production)

Control ID, Version Number, and Control number - leave blank

GS Sender ID AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
AV01101957

GS Receiver ID AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
030240928

10020 Sender ID AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
AV09311993

10020 Receiver name AVAILITY Commercial Claims/Illinois Blue Cross & Medicaid Claims  
030240928

**\*\* Don't forget to fill out one of these for each payer that you are currently sending to THIN.**

MEDICAID - Requires a Clearinghouse ID to work correctly. That would be supplied in the following two places:

The screenshot shows a software window titled "MOS DEVELOPMENT" with a status bar displaying "09/24/2007 13:31:51 ANSI 837". The main interface includes several input fields and sections:

- Company:** Medicaid
- Payer/Carrier ID:** 00621
- ANSI 837:** CAR A837-CAR
- Authorization Qual Information:** 00
- Security Qual Information:** 00
- Acknowledgement:** 1
- Test Indicator:** P
- Use Clearinghouse ID:** Y (with ID field containing IL621)
- Required Trading Partner Information:**
  - ISA Sender ID:** ZZ AV09311993
  - ISA Receiver ID:** 01 0302409328
  - GS Sender ID:** AV01101957
  - GS Receiver ID:** 0302409328
  - 10020 Sender ID:** AV09311993
  - 10020 Receiver ID:** 00621
  - 10020 Receiver Name:** 030240928

At the bottom, instructions read: **ESC** -To Record, **Ctrl-C** -To Cancel

This will also need to be added to the MOS Support Files - Insurance File data. Press "E-Electronic Data" and move to add the Network ID. When you enter "Y" a window will popup to request the Clearinghouse ID, enter it and press ENTER.

The screenshot shows a software window titled "MOS DEVELOPMENT" with a status bar displaying "Your Practice Name". The main interface includes a section titled "Medical Office System INSURANCE COMPANY FILE" and a sub-section titled "INSURANCE COMPANY Electronic Data".

The "INSURANCE COMPANY Electronic Data" section contains the following fields:

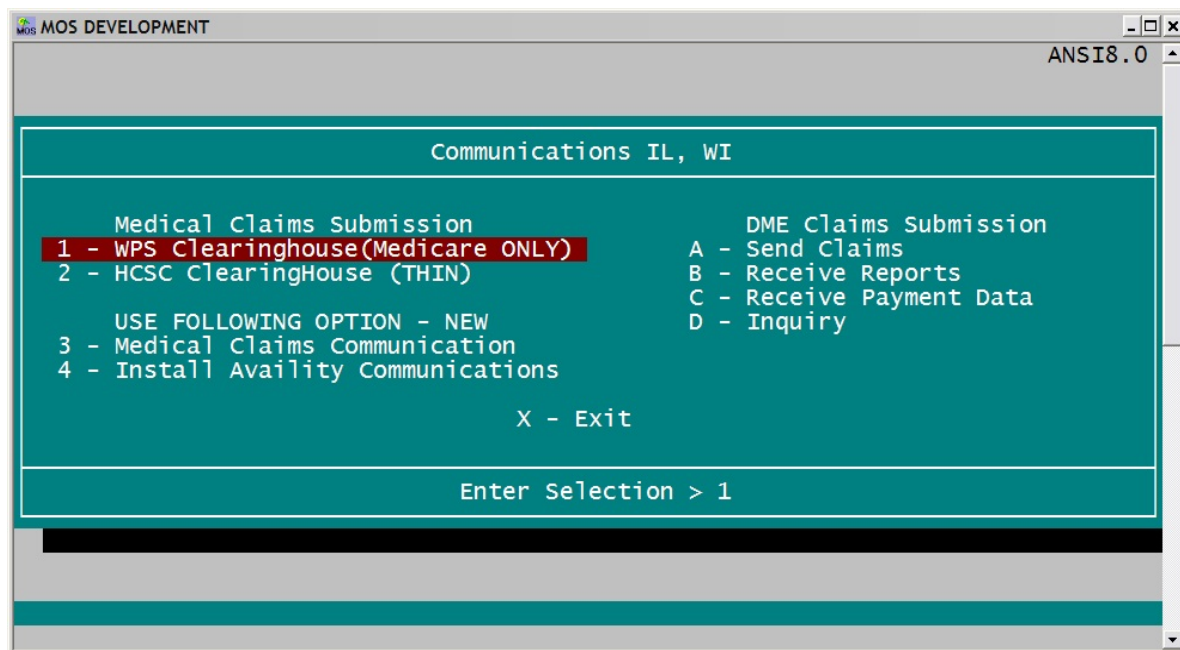
- Code: MDIL Xmt Y CO Y ID# Typ 2
- Name: Medicaid of Illinois
- Payor ID: 00621
- Claim Office #
- Group Number:
- Carrier Type: BNC
- Medigap Number:
- SOP: D
- Download Edits Qualifier: ANS
- Download Edits Filename: AN-ANSI
- Plan Name:
- Prod Line: NAIC: -
- Network ID Required: Y IL612

At the bottom, instructions read: **ESC** -To Record, **Ctrl-C** -To Cancel

**First Time that you access Communications to Carrier Menu.**

Communications to Carrier - IL Communicatons Menu

Select "4"-Install Availity Communications. This is only required the first time. All communications to Availity is done by first selecting "3-Medical Claims Communications". Then options for Medicare and



Availity are displayed. If Availity is not offered, then the setup has not been completed successfully. All payors, except Medicare, must have the new ISA Sender ID or the Availity choice may not be displayed.