

An Independent Licensee of the Blue Cross and Blue Shield Association



Objectives

At the end of this presentation, you will be able to:

- Understand the benefits of using the Electronic Appeal tool
- Identify how to access the Electronic Appeal Forms
- Use new features of Electronic Clinical Appeals
- Understand timely filing limits and guidelines
- Understand responses to a Clinical Appeal
- Understand appeals on behalf of a member/AOR Form
- Understand the task list associated with an Electronic Appeal
- Monitor the status of electronically submitted appeals and find reference numbers.



Benefits of Submitting an Electronic Appeal

Allows you to accurately follow status updates of the appeals in your task list.

Printable (AOR) Appointment of Representation form link for member to sign; attachment tool allows direct return of a signed form that allows providers to electronically appeal denied claims on behalf of the member.

Benefits

Reduces duplicate appeal submissions, time spent on the phone, and reduces paper volume and mailing costs.

Automated appeal decision logic for medical necessity, coding/billing (payment), failure to obtain authorization, and denied claims.

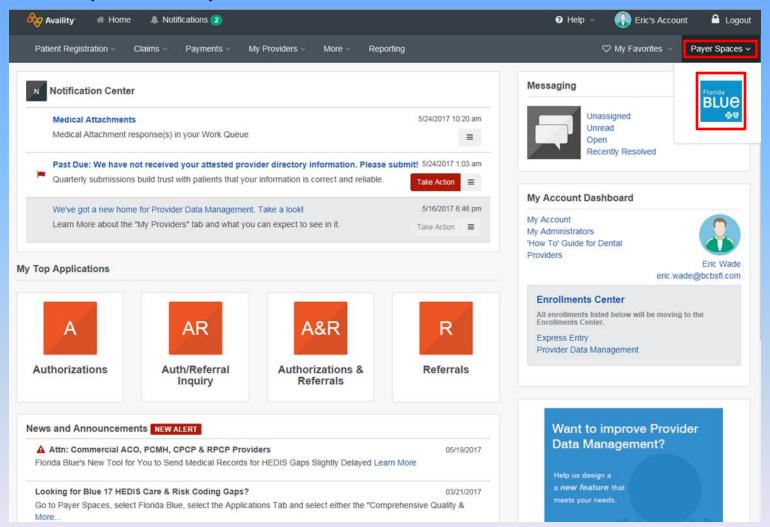


Appeal Descriptions and Examples

Appeal Type	Example
Clinical: Utilization Management	Claim denied because authorization was not obtained, or a precertification penalty applies
Clinical: Adverse Determination	Claim denied for medical necessity or experimental/investigational reasons, or contract exclusions
Clinical: Coding and Payment Rule	Claim denied for procedure bundling, down-coding, application of a procedure code modifier, and/or other reassignment of a code by Florida Blue
Non-Clinical: Administrative	Claim processed with an incorrect allowance, coordination of benefits, contractual issue or timely filing

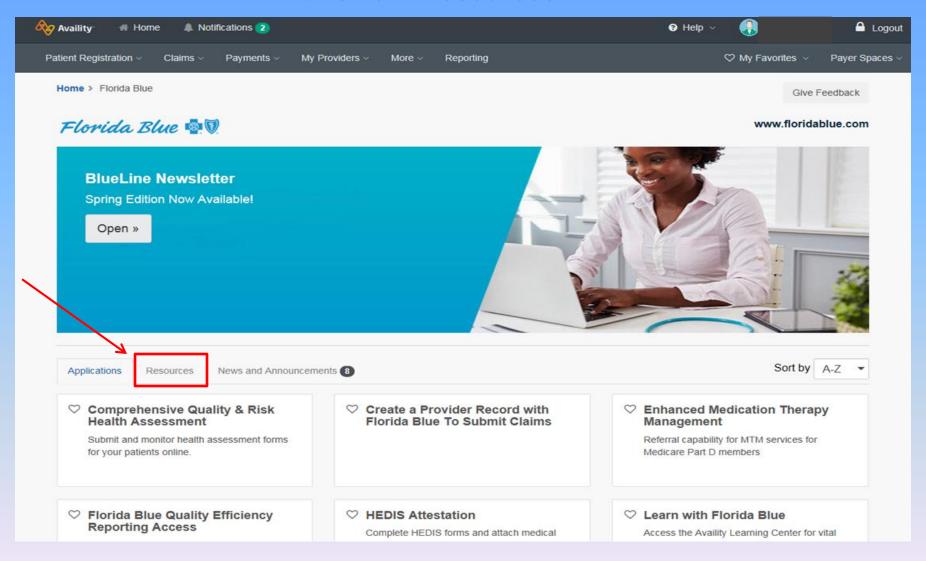


The navigation to PASSPORT recently changed. Select Payer Spaces drop down, then click on the Florida Blue tile.



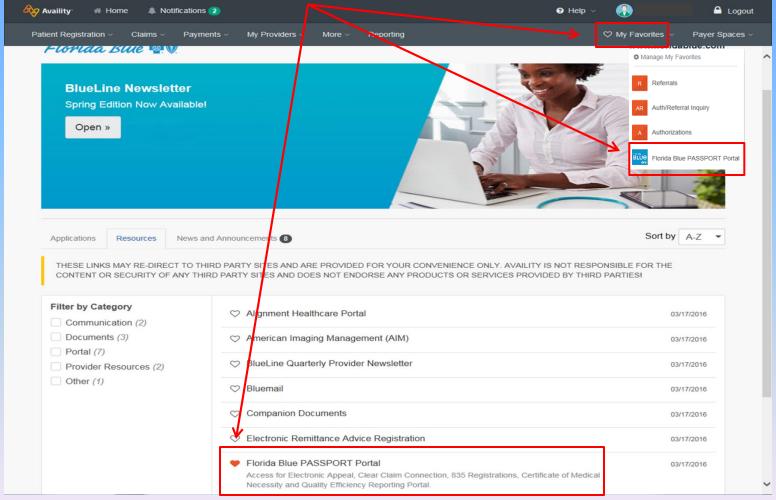


Click on "Resources"





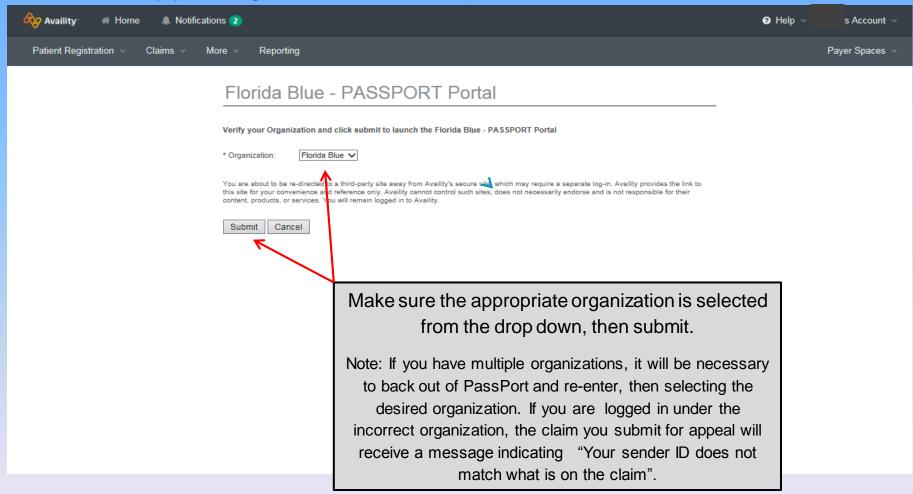
Click on the Florida Blue PASSPORT link in the list. To savetime, add it to your favorites by clicking on the Heart icon. When it turns red, you can quickly access PASSPORT from your "My Favorites" menu.





Accessing the Electronic Appeal Form

Verify your organization in the drop down box, and click submit.





PASSPORT Web Portal

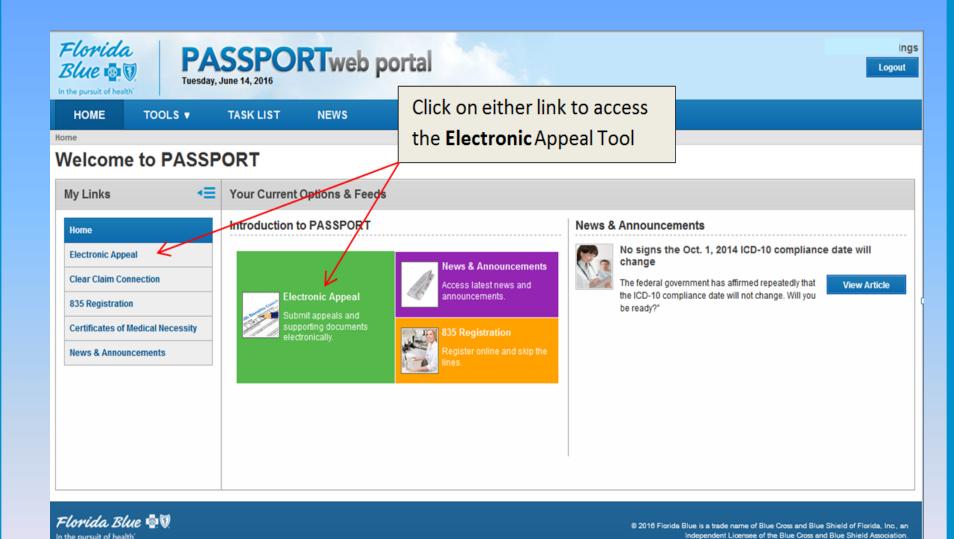
The Terms & Agreement page display. Click on "I Agree" to connect to the Electronic Appeals tool.





In the pursuit of health

Welcome to PASSPORT

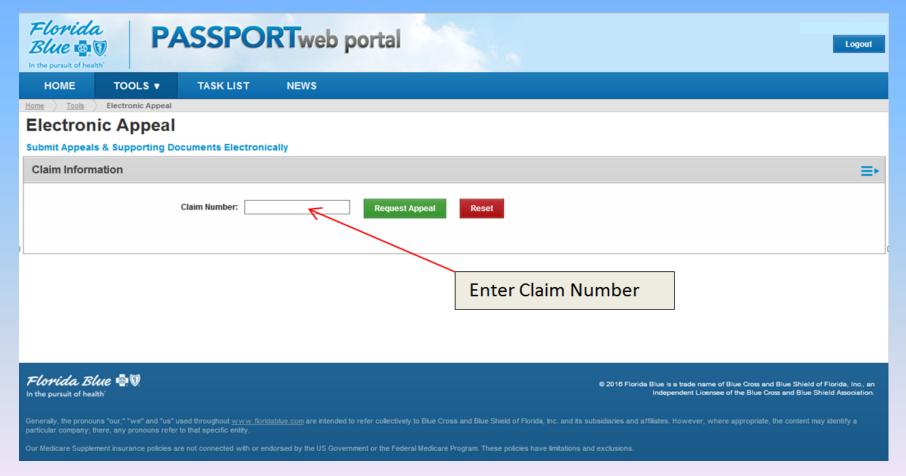




Electronic Appeals

Enter the entire claim number for the appeal. Click "Request Appeal."

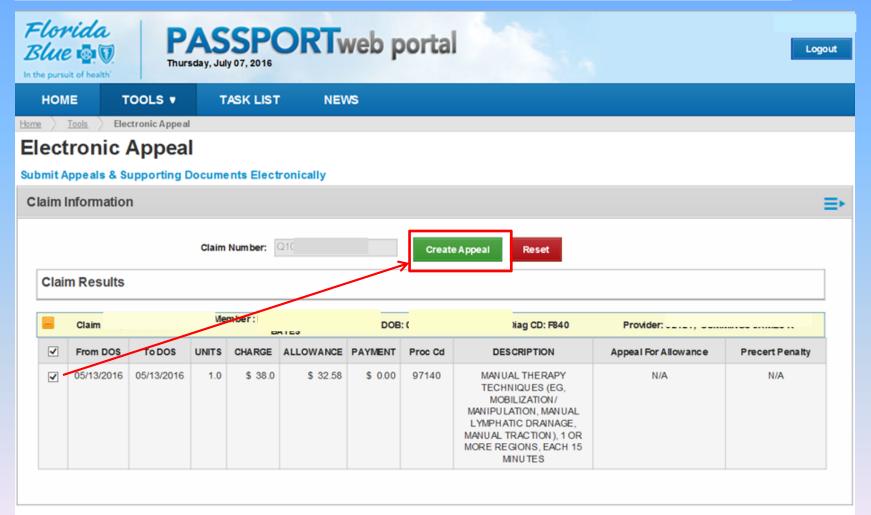
Note: BlueCard® and the Federal Employee Program are excluded. Appeal requests must be submitted in writing.





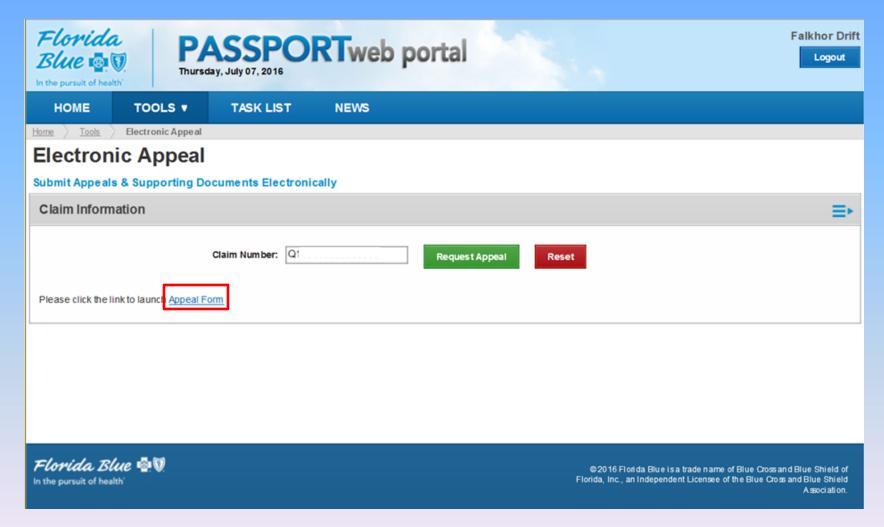
Automated logic streamlines electronic appeal decisions with real-time responses for claim denials related to medical necessity, coding & billing (payment), or failure to obtain authorization.

Next step is to place a check mark on the line item, then click Create Appeal.



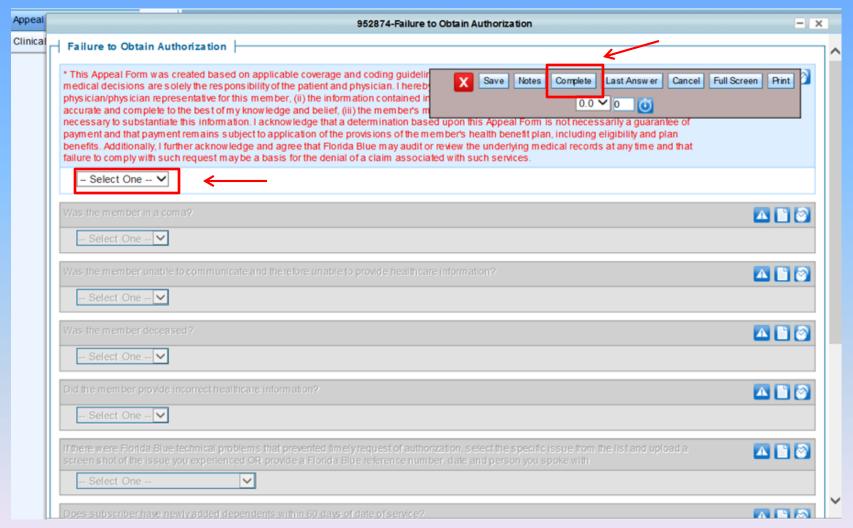


An electronic appeal form link appears; click on the link to activate the appeal form questionnaire.



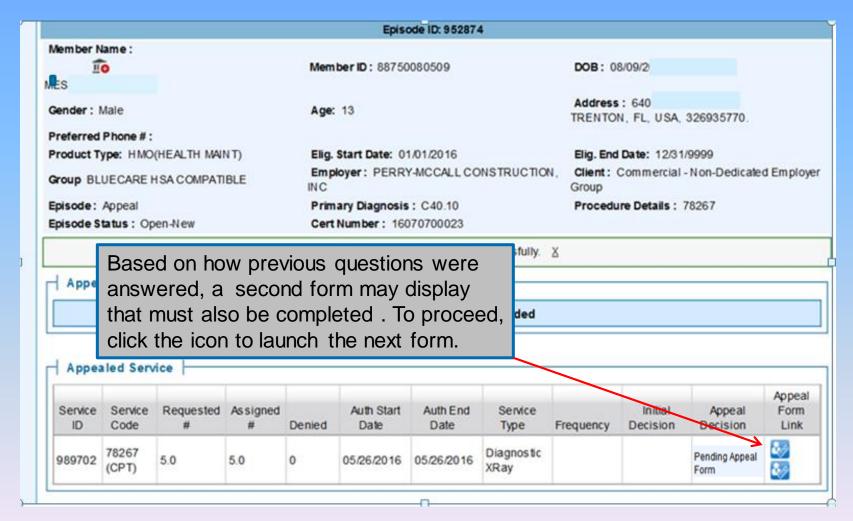


Accept the terms to activate the electronic form. It's very important to answer all questions, and click Complete to submit. The questionnaire may open additional questions based on answers to the previous question so all factors are included in the final decision.



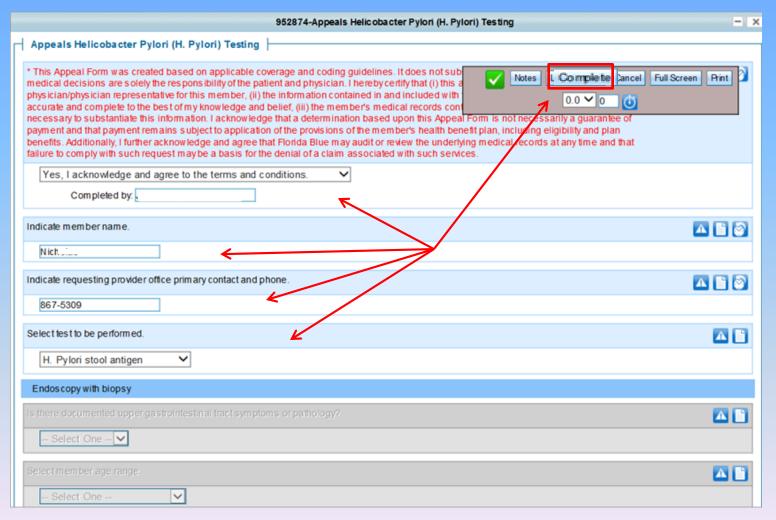


The claim line displays appeal form icons. In some cases a second appeal form may appear. Simply click on the icon to launch the next form.



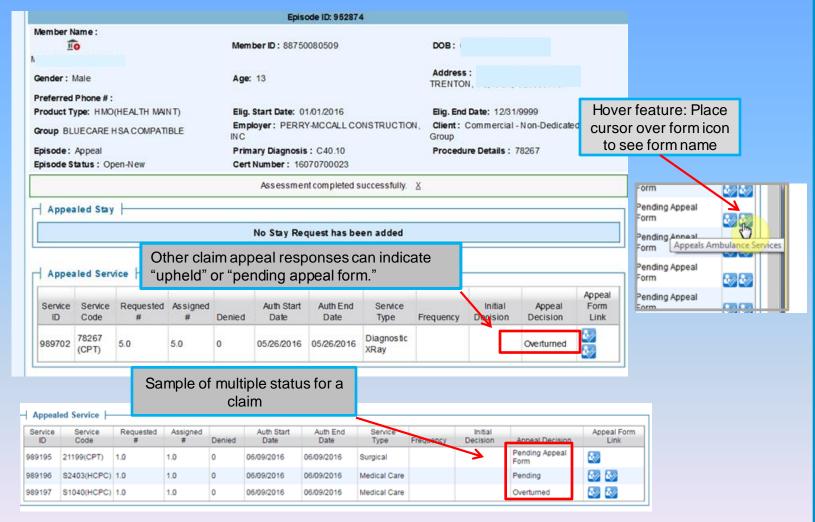


Select "I acknowledge and agree," answer all questions, and then click Complete to submit and receive a real-time decision.



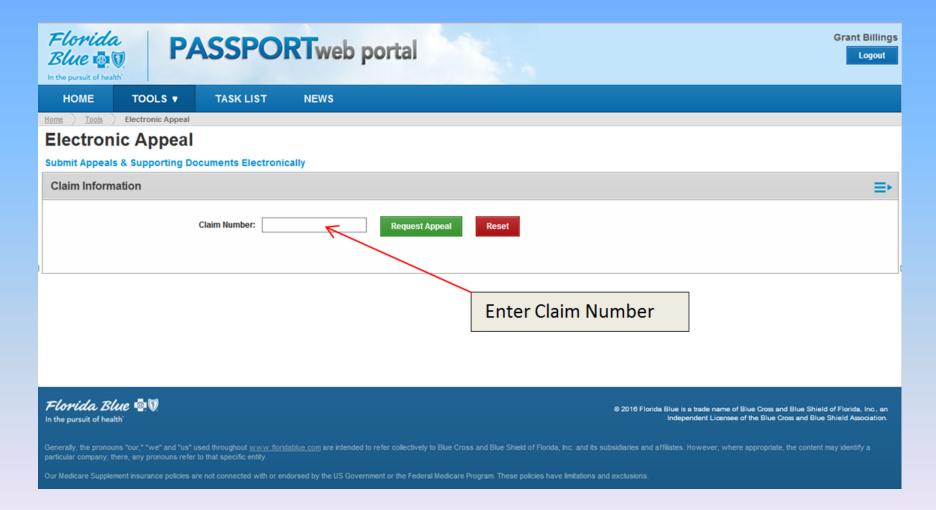


Decision logic is part of the Electronic Appeal and Clinical forms. The appeal decision example below shows that a claim denial was overturned. Note: Hover over the icon to see other features, status messages, and which appeal form is displayed.



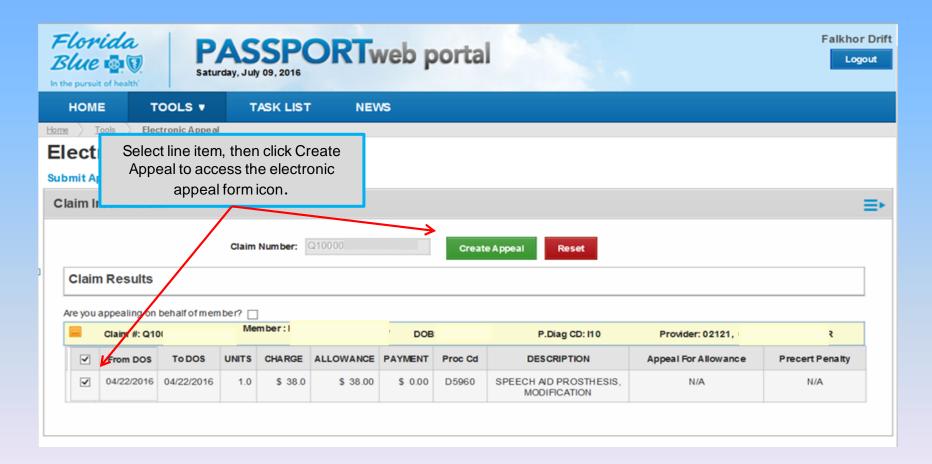


Submitting Electronic Appeals for a Denied Claim Related to Coding and Billing (Payment)



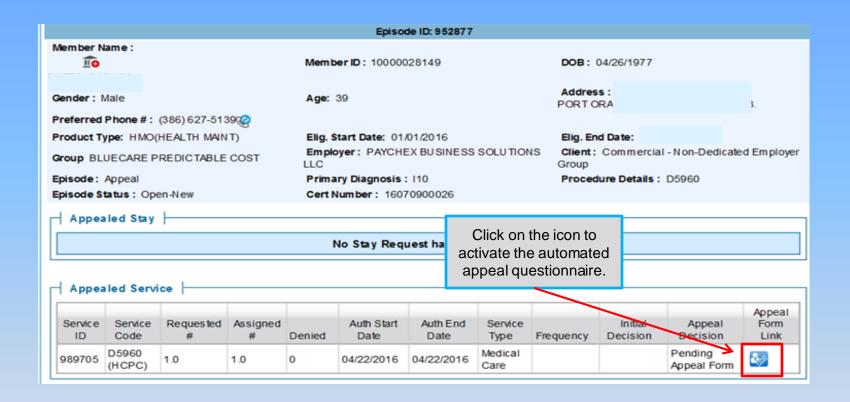


Submitting an Electronic Appeal Related to Coding and Billing (Payment) Appeals



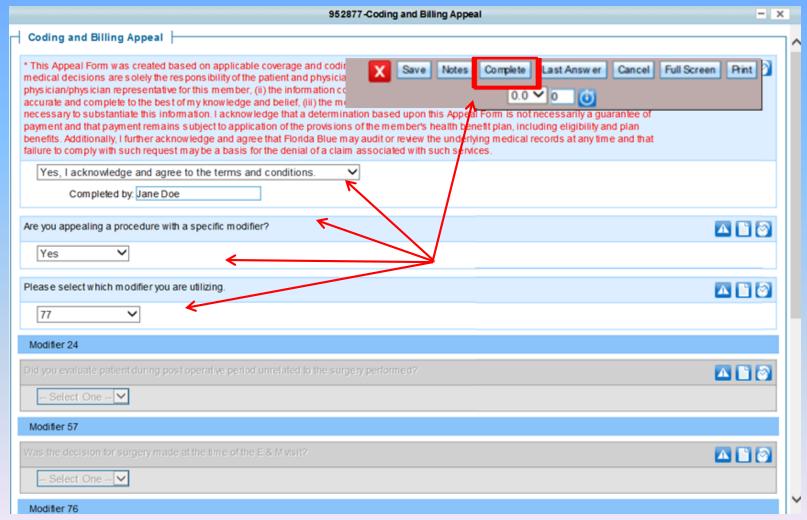


Automated Electronic Appeal Icon





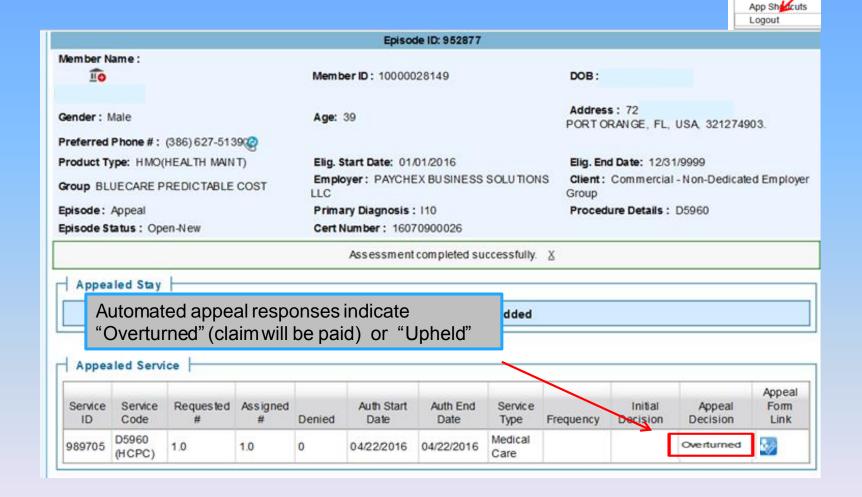
Accept the terms & conditions. Answer all questions. The questionnaire may open (non-grey) additional questions based on how the previous question was answered. This factors into the final decision via automated decision logic. You can click "SAVE" if you need to work it later, or when all questions are answered, click COMPLETE to submit. It takes a few moments to process, but the next screen provides the final appeal decision.





Decision logic is built into the Electronic Appeals and Clinical forms.

The coding and billing appeal example below shows the claim denial was overturned. On the upper right side of the screen select the drop down to log out of this screen.





My Profile

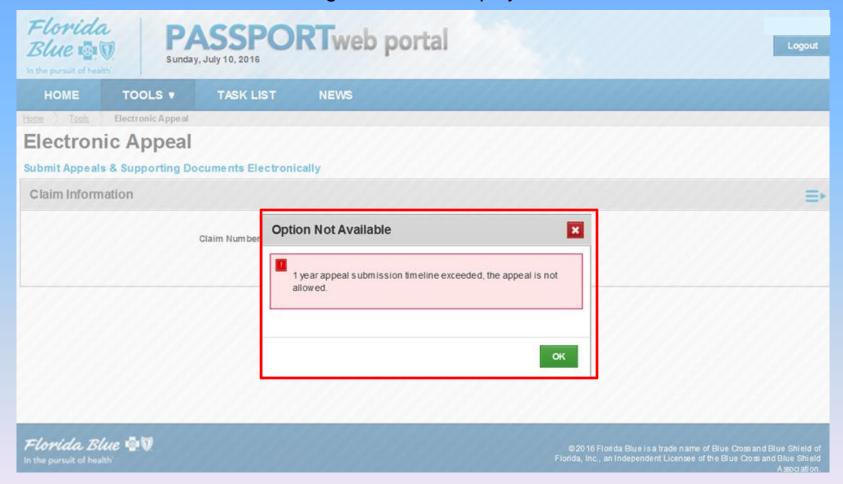
Timely Filing of an Electronic Appeal

Filing limitations for appealing a claim is one year (365 days) from the final processing date or the date the claim denied.



Timely Filing for Appeals

Appeals must be submitted within one year (365 days) from the date on the remittance advice, or the message below will display.





Submitting Electronic Appeals on Behalf of a Member

Not all providers will use this function.

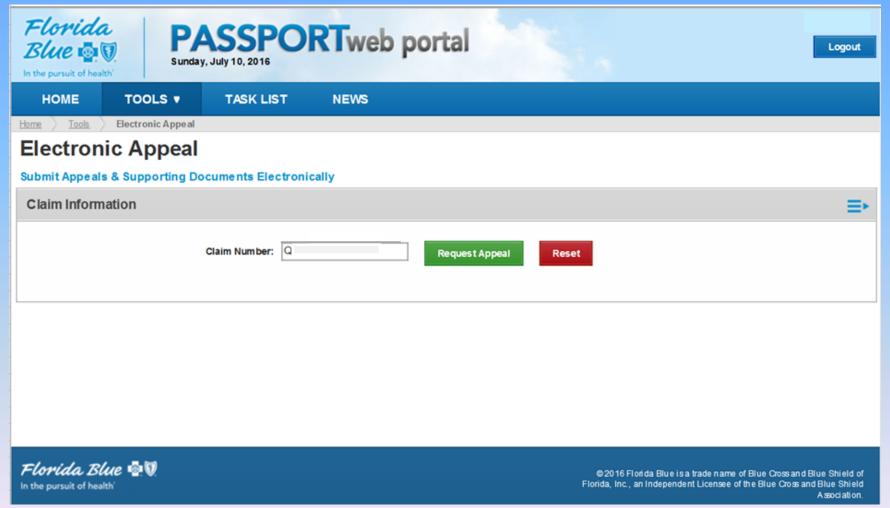
There may be times when a denied or processed claim is the member's responsibility to appeal. This tool allows a provider to appeal the claim on behalf of a member if they need help.

Note: This tools is not a replacement for the Member's Appeals process responsibility however if the members appeal is determined by the rendering provider and feel their medical view or input would be beneficial in assisting the member with their appeal, this would be the process to follow.



Electronic Appeal on Behalf of the Member

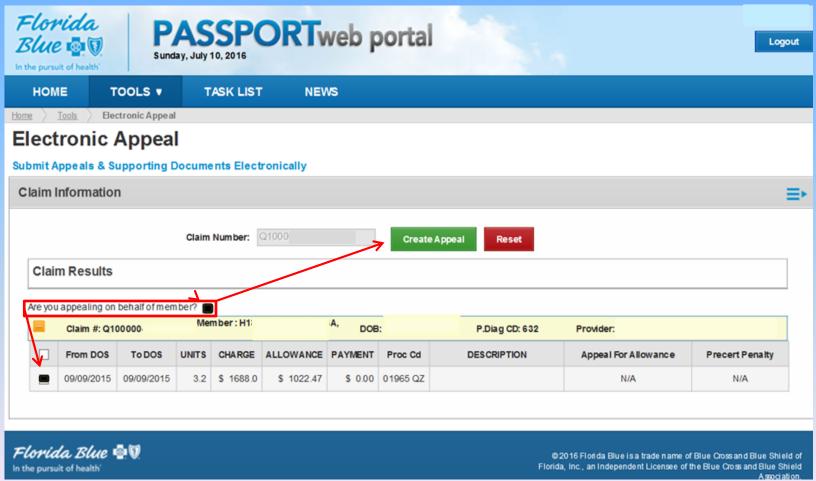
If a patient wants their provider to appeal a denied claim they feel processed incorrectly, the provider can appeal on behalf of the member. Be sure to enter the claim number and click the Request Appeal button to initiate. Note: BlueCard and the Federal Employee Program are excluded from the Electronic Appeal process. Requests must be submitted in writing.





Appealing on Behalf of the Member

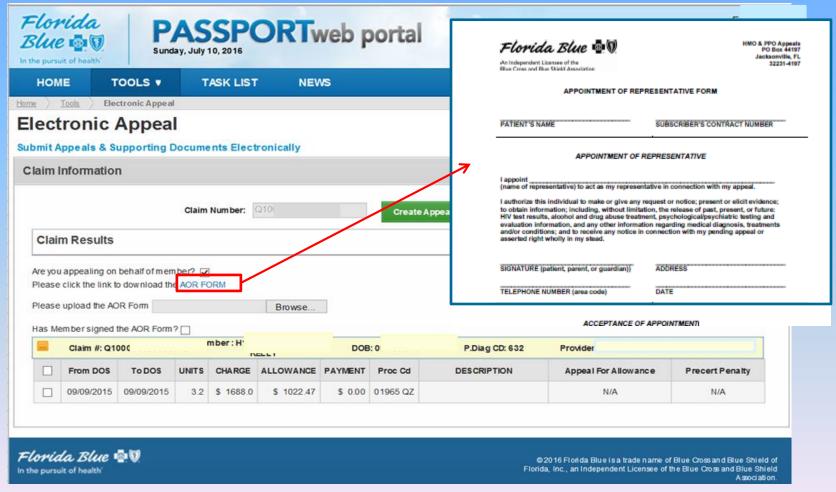
If you are appealing a denial for a member, you will see the question, "Are you appealing on behalf of the member?" Select the boxes next to the line item and question, then click "Create Appeal."





Appointment of Representation (AOR) Form

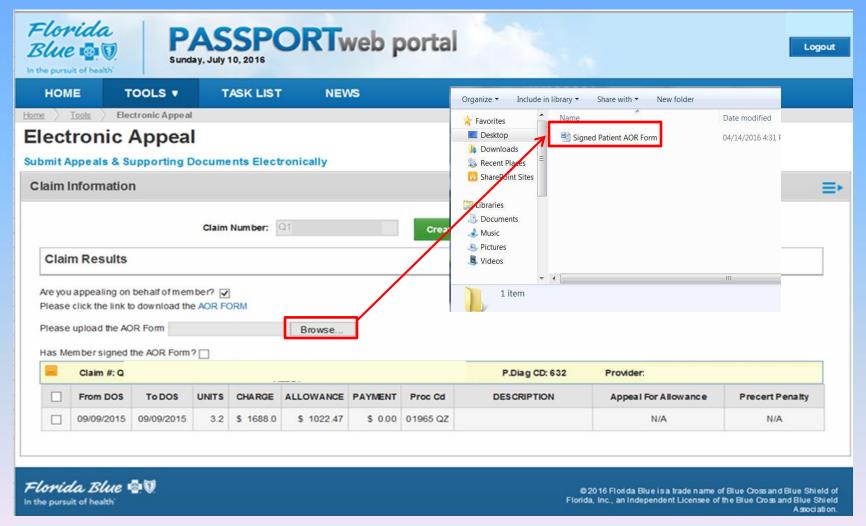
An AOR form link is available for your convenience so you can print a blank copy of the form (see link below). This form is required, and needs to be filled out and signed by the member. The signed form allows a provider to appeal on behalf of a member.





Attach the AOR Form

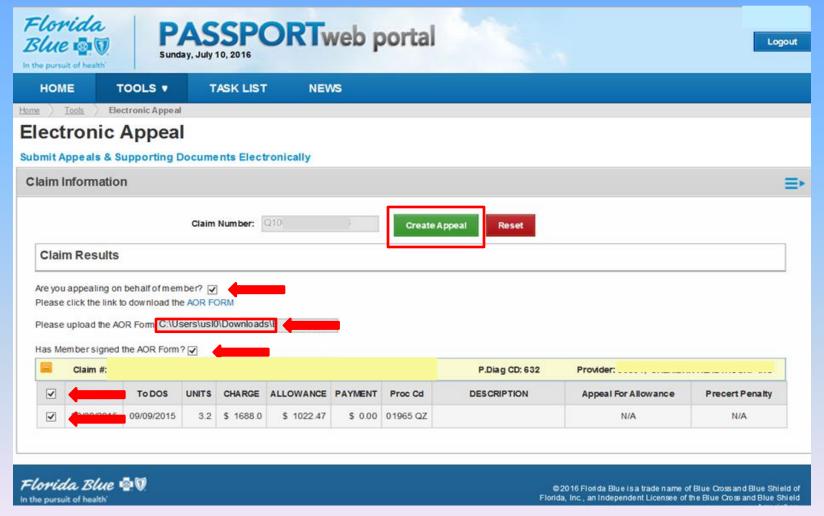
A signed copy of the form needs to be converted to a digital file and saved. Attach the file, click browse, find where you saved the form, and double click the file to attach it.





Submit the Electronic Appeal on Behalf of the Member

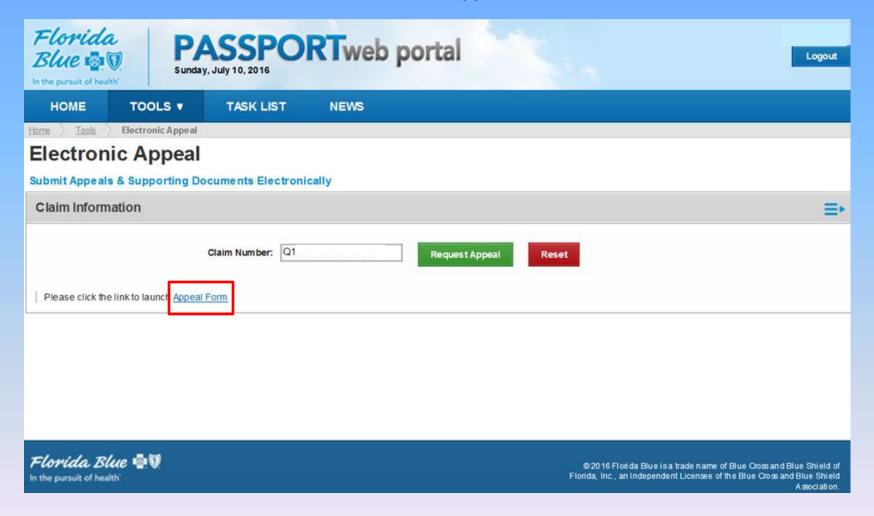
Before creating an appeal, verify that the AOR is attached, all boxes are checked, and then click on Create Appeal to launch.





Electronic Appeal on Behalf of the Member

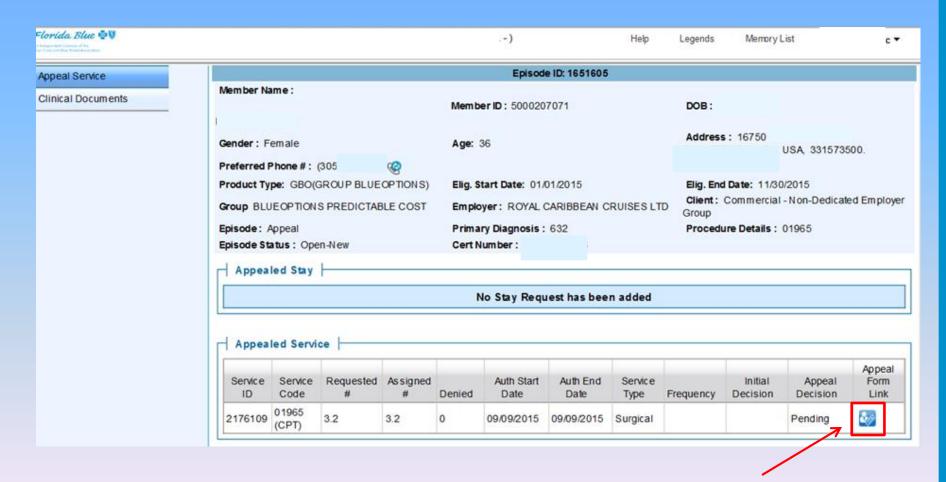
Here is the next screen you will see. Click on the Appeal Form link. This will take you to the denied claim line where the electronic appeal form icon is located.





General Appeal Form Icon

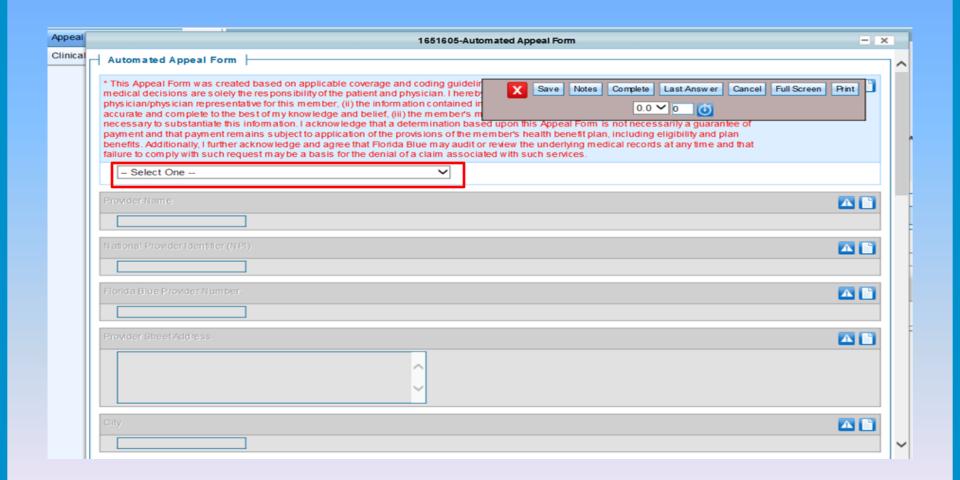
To launch the general automated appeal form, click on the small blue appeal form icon located on the right side of the claim line to open the form.





Automated Appeal Form

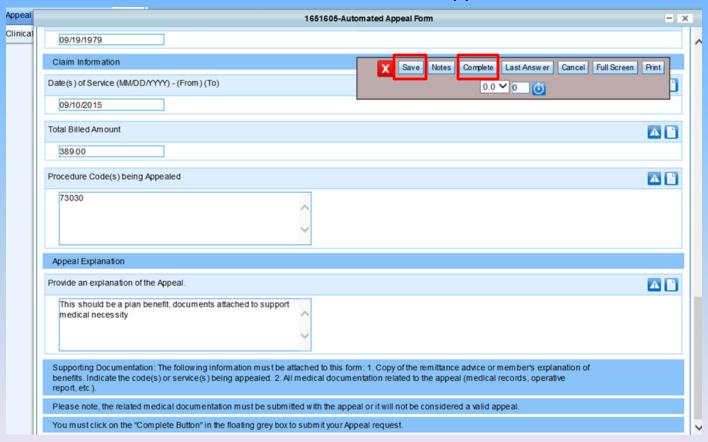
From the drop down box, select "I agree" to open the form.





Automated Appeal Form

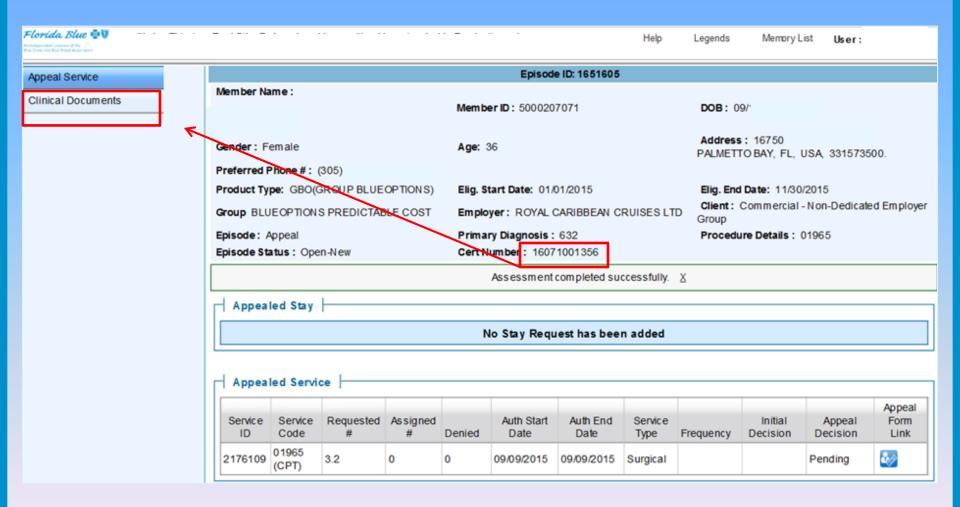
Type in a response for all fields, and add comments where applicable. If not all information is available, select Save. The form can be accessed later from your task list. Once all information is added, click on Complete to submit. This will bring the user to the next page where medical records can be attached to finalize the appeal.





Electronic Appeal Reference Number and How to Attach Records

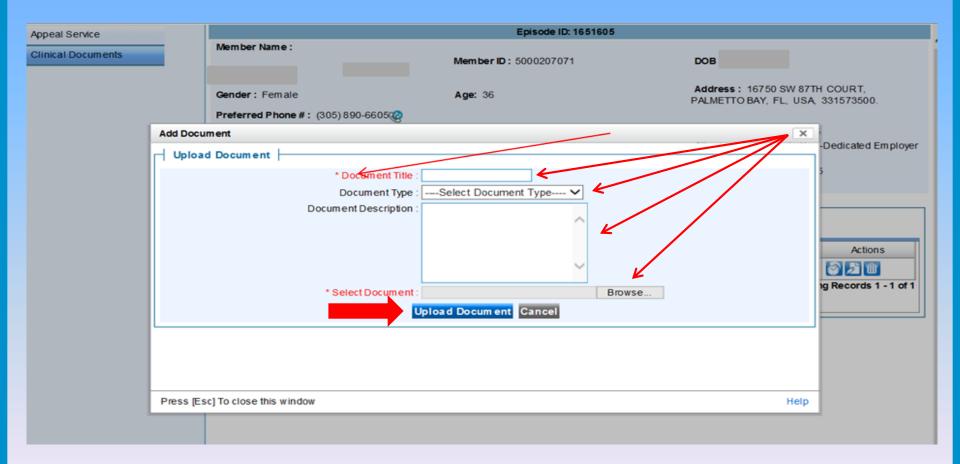
A reference number for the appeal will display. In the upper left side of the screen, click Clinical Documents to attach medical records or documents.





Attach Medical Records

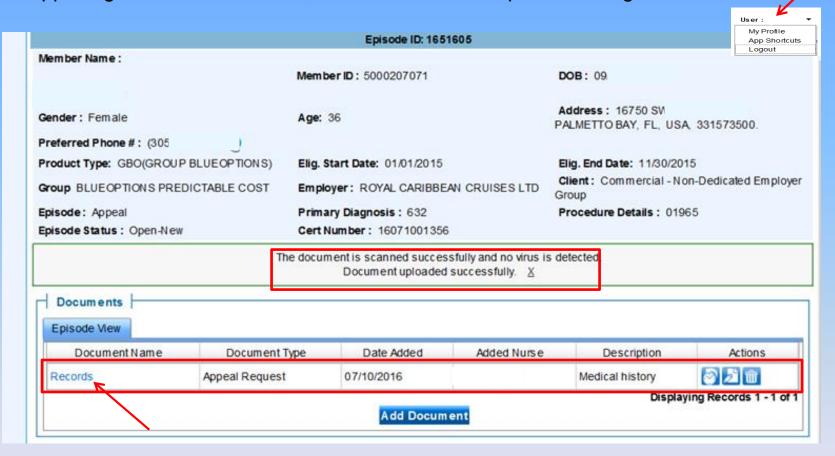
You must type in a title, select the document type (Appeal) from the drop down box, and type comments if needed. Browse and select the required medical records from your local drive, and then click Upload Document.





Attachment Confirmation

A note will say the upload was successful and displays the file. More documents can be attached. The document name is a hyperlink, and will open the file you just attached. On the upper right side of the screen, select the arrow drop down to log out of this screep.

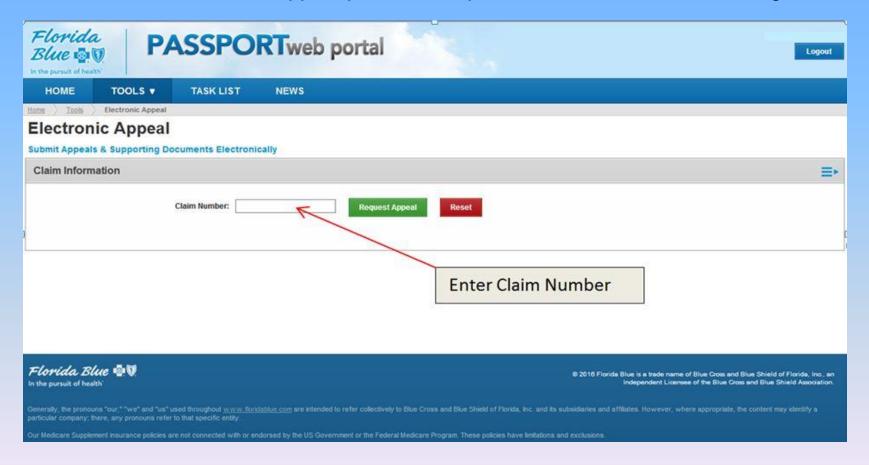




Administrative (Nonclinical) Appeals

Claims processed with an incorrect allowance, coordination of benefits, contractual issue, and timely filing denials, etc.

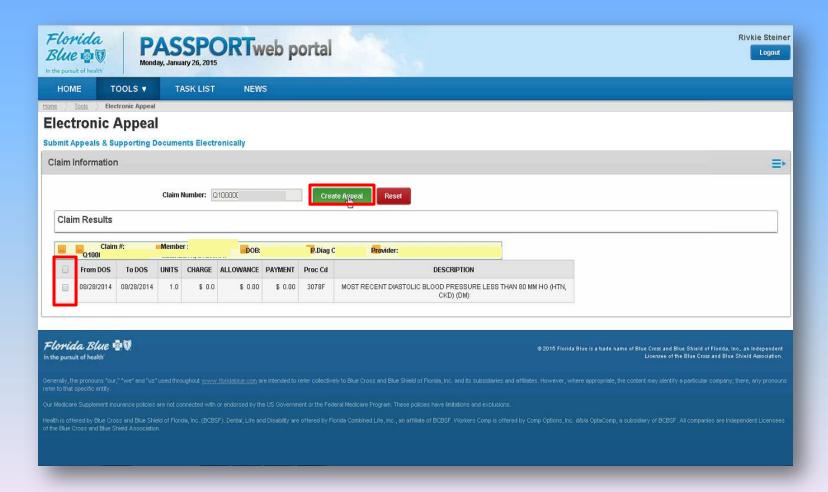
Enter the entire claim number for the appeal. Click "Request Appeal." This will access another general appeal form. Note: BlueCard and the Federal Employee Program are excluded from the Electronic Appeal process. Request must be submitted in writing.





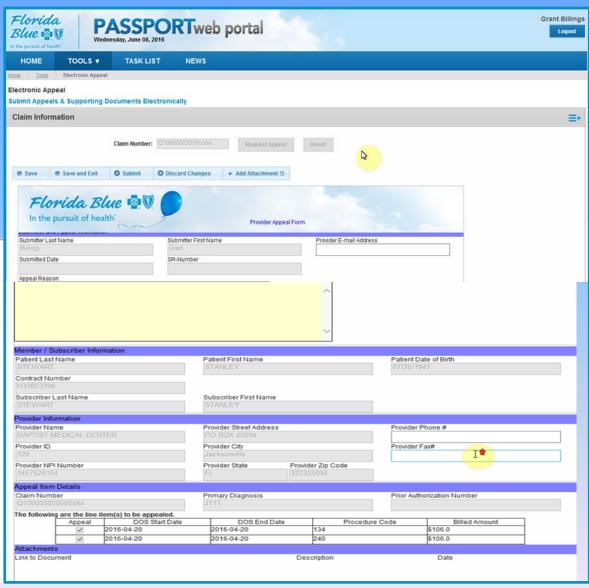
Administrative Appeal Form

Then, check the line item, and click "Create Appeal."





General Appeal Form

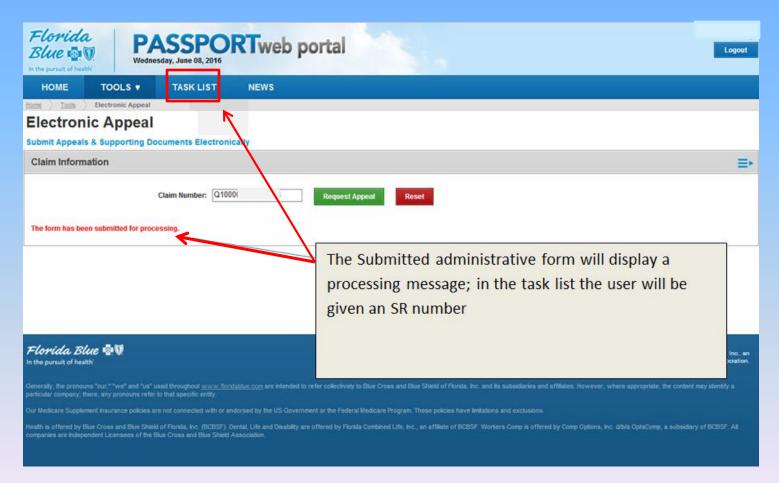


- Fill out all open data boxes with the required information. Enter Provider/Email address.
- In the appeal reason box, enter the reason for the appeal. Note: There is a 500 character limit in this space.
- Member/Subscriber Information section: Member information is pre-populated.
- Scroll down to view provider information. Provider information is pre-populated as well.
- Appeal Item Details section:
 The claim number is prepopulated along with diagnosis codes. Enter the prior authorization number if applicable. Select claim lines that need to be appealed.
- Add attachment: Upload the medical records or documents to support the appeal
- Save/Save & Exit: Allows saving data input so you can access it later in your task list if not all information is available when an appeal is being created.
- Submit: When all required fields have been filled out and all supporting documents or records are attached, click submit



Confirmation

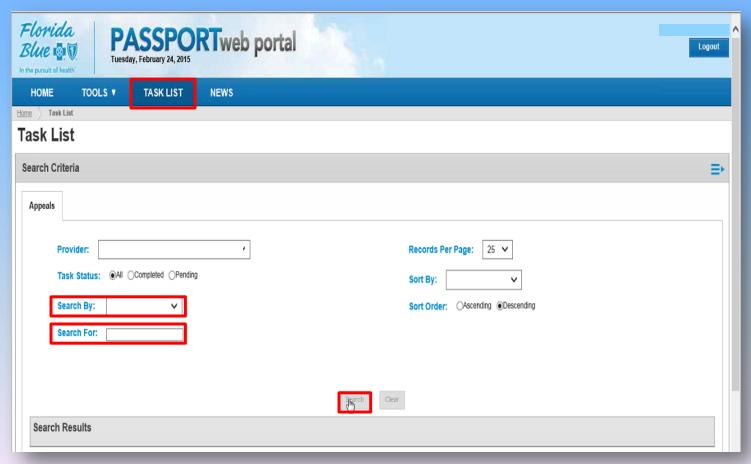
Providers will receive a confirmation notice once the appeal is submitted. Click on Task List to find the SR number.





Task List

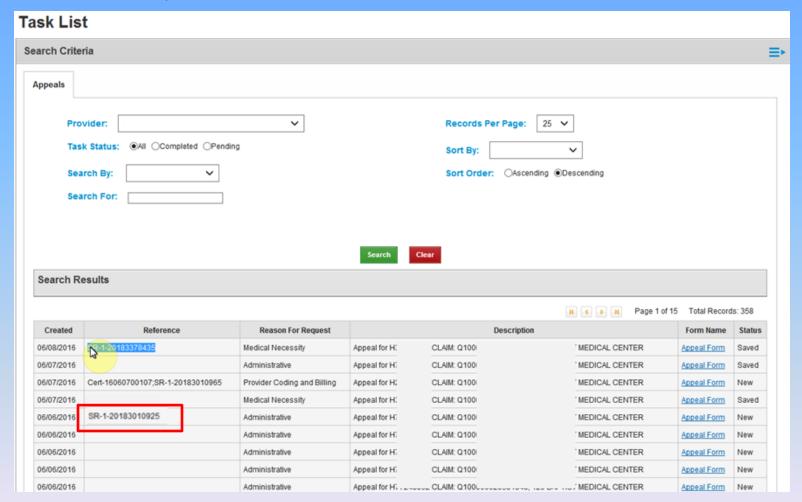
The Task List provides a history of your Electronic Appeal activities. A search can be performed by using the member or claim number.





Task List

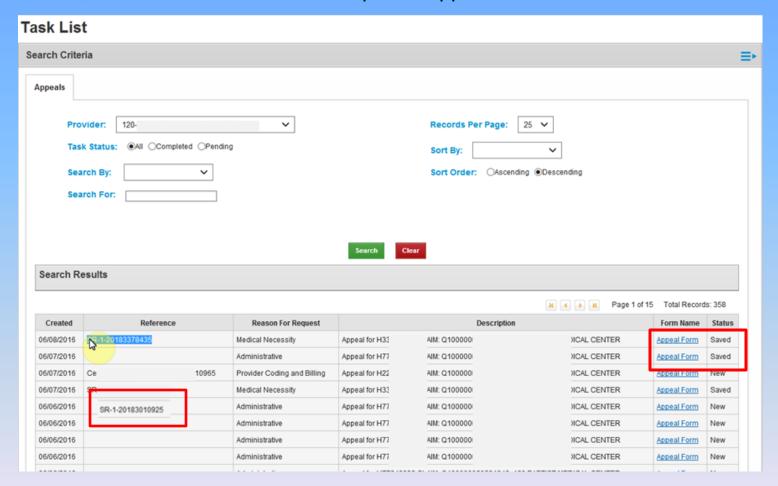
To determine if an appeal has been submitted and validated, look for an SR or reference number, and a "Submitted" status associated with the claim number.





Task List

If an appeal is incomplete, select the Provider Appeal link to edit information previously saved, or review the form for a completed appeal.





Task List Status for Submitted Appeals

PASSPORT will only display the following status updates: New, Submitted, Processing, Duplicate, or Finalized. Each status update is a link in PASSPORT, and will launch the provider portal so it displays the appeal decision or decision reason.

Created	Reference		Reason For Request	Description			Form Name	Status
07/05/2016	Cert-160 Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Duplicate		
07/05/2016	Cert-160	;SR-1-20185665185	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Duplicate
07/05/2016	Cert-160		Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Processing
06/23/2016	Cert-160		Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Processing
06/23/2016	Cert-160	;SR-1-20187523665	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/21/2016	Cert-160		Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Processing
06/17/2016	Cert-160	SR-1-20185958165	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185919035	Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	New
06/17/2016	Cert-160	;SR-1-20185897935	Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185897805	Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185897735	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185897645	MAM	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/17/2016	Cert-160	;SR-1-20185897595	Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185897465	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/17/2016	Cert-160	;SR-1-20185897145	Utilization Management	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/16/2016	SR-1-20	5	Administrative	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/16/2016	SR-1-20	5	Administrative	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/16/2016	Cert-160	;SR-1-20185665185	Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	Submitted
06/15/2016	Cert-160	;SR-1-20185423395	MAM	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/15/2016	SR-1-20	5	Administrative	Appeal for H	CLAIM: Q10000)2121	Appeal Form	Submitted
06/14/2016	Cert-160	;SR-1-20185081775	MAM	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/14/2016	Cert-160	;SR-1-20185078845	MAM	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/14/2016	Cert-160	;SR-1-20185079435	MAM	Appeal for H	CLAIM: Q10000	12121	Appeal Form	New
06/14/2016	Cert-160	;SR-1-20185079325	MAM	Appeal for H	CLAIM: Q10000)2121	Appeal Form	New
06/14/2016	Cert-160		Utilization Management	Appeal for H	CLAIM: Q10000	12121	Appeal Form	Processing



Summary

You should now be able to:

- Understand the benefits of using the Electronic Appeal form
- Identify how to access and submit the Electronic Appeal form
- Follow the steps for attaching records to an Electronic Appeal
- Save an appeal to access and complete at a later time
- Print an Appointment of Representation (AOR) form and upload it
- Understand the task list associated with an electronic appeal
- View the status of submitted appeals



Thank You

- Survey link:
- Follow us:







