Release Communication
# Availity Portal Enhancements

<table>
<thead>
<tr>
<th>General</th>
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<tbody>
<tr>
<td>Arkansas</td>
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<tr>
<td>Florida</td>
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<tr>
<td>Idaho • Oregon</td>
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<tr>
<td>Minnesota</td>
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<td>Oregon</td>
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<td>Tennessee</td>
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<tr>
<td>Texas</td>
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# Availity Basic Clearinghouse Enhancements

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<th>EDI Implementations</th>
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<td>EDI Payer Name Changes</td>
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When noted and for the purpose of this release communication only, Availity refers to the following organizations by informal name:

- **Humana Inc.** – Humana
- **Blue Cross and Blue Shield of Minnesota, Inc.** – BCBSMN
- **Health Care Service Corporation** – HCSC or individually BCBSIL, BCBSNM, BCBSOK, BCBSTX
The following Availity Portal enhancements, and any Availity Help topic updates, are available with the release.

To access Availity Help, click Help & Training | Find Help at the top of Availity Portal.

If you do not see these enhancements upon login, ask your Availity administrator to grant you access to the feature. To identify your administrator, click My Administrators on the My Account page.

Note: These enhancements do not apply to Availity Revenue Cycle Management.
Availity Learning Center – Product Training Courses

Check out ways in the Availity Learning Center (ALC) to learn about Availity tools. Select Help & Training | Get Trained at the top of Availity Portal. The ALC opens in a new browser tab. Search the Catalog by keyword or filter by category, and then select the Enroll button to enroll for a course. New to Availity? Get the jump-start you need! Search the ALC Catalog by keyword onboarding. Find the onboarding program that’s right for you, and then select the Enroll button to get started.

UPDATED AND NEW COURSES

In the ALC, search the Catalog by course title. Look for these course titles:

- Availity Appeals – Training Demo
- New! Availity EDI Clearinghouse and Gateway Services – Training Demo
- Claim Status – Training Demo
- Eligibility and Benefits Inquiry – Training Demo
- New! Messaging a Payer - Training Program
  (includes Messaging from E&B and Messaging from Claim Status)
- New! Patient Cost Estimator – Training Demo
- Provider Data Management and Directory Verification – Training Program
  (updated Training Demo: Provider Data Management (Core PDM)
- Remittance Solutions – Training Demo
- New! Using Availity Tools for Medical Foster Care Providers in Florida – Training Program

LIVE WEBINARS

In the ALC, click Sessions and use the interactive calendar to find the live session. You can also search the Catalog by keyword (Live Webinar). We add new titles and dates often.

Look for these upcoming live webinar sessions.

- Availity Appeals
- Availity Attachments Tools for Florida Blue Providers
- Availity Training for Summit Community Care Providers (Search keyword PASSE)
- Introduction to Availity EDI Gateway Services for Providers Submitting to Anthem, Inc. and Affiliates (Search keyword SONG)

Find a session you want to attend? Enroll in the course. The ALC will send you information to join. You’ll also receive reminder emails.

Can’t make a live session? Sessions are recorded and available in the ALC. Search the ALC Catalog by webinar title or keyword On-Demand.

Looking for courses you’ve enrolled in?

In the ALC, click Catalog | Dashboard to find courses you enrolled for, started, and completed. Your Dashboard has two tabs — Enrolled Courses and Completed Courses.
HIPAA and Patient Privacy Training

ENROLL NOW

1. Click Help & Training | Get Trained at the top of Availity Portal.
2. In the Availity Learning Center, click Catalog in the upper left, and then click Store in the drop-down menu.
3. Choose the topic that best fits your needs:
   - HIPAA and Patient Privacy Training for Mental Health Providers and Staff
   - HIPAA and Patient Privacy Training for Surgical Practices and Staff
   - HIPAA and Patient Privacy Training for Medical Providers and Staff
   - HIPAA and Patient Privacy Training for Business Associate

DID YOU KNOW…?

The majority of breaches occur at the business associate level.

HIPAA violations from employees often cost 4 times more than data breaches from the outside.

Are your business associates getting required HIPAA training?

WHO IS A BUSINESS ASSOCIATE?

Business associates include medical transcriptionists, billing services, attorneys, CPAs, medical practice consultants, software vendors, etc. A business associate is not a healthcare entity.

HAVE YOU SEEN THE LATEST AVAILITY CONNECTION?

READ IT NOW
Availity is pleased to announce the following payers are now available for the specified transactions on Availity Portal.

<table>
<thead>
<tr>
<th>Payer</th>
<th>Regions</th>
<th>Eligibility &amp; Benefits</th>
<th>Claim Status</th>
<th>Professional Claims</th>
<th>Facility Claims</th>
<th>Encounter Claims</th>
<th>Dental Claims</th>
<th>Remittance</th>
<th>Referrals</th>
<th>Authorizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEVOTED HEALTH</td>
<td>Florida</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>✓</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HP ADMINISTRATIVE SERVICES LLC</td>
<td>All</td>
<td></td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Humana pilot users can now filter and search for overpayments by substatus. An overpayment that either has a main status of *Inquired* or *Disputed* can be filtered with a substatus to further refine the user’s search.

**USE THIS FEATURE**

1. On the Overpayments page, in the left-hand *Search By* field, select *Substatus*.
2. In the second *Search By* field, select the appropriate substatus.

**Note:** The substatuses are visible to all users, however, search results for each substatus will only display results for the Humana pilot users.
Pilot users can now filter and search for overpayments by line of business. An overpayment can have different types of health insurance, either federal and state funded, or those that are available to the commercial market.

Line of business options include Commercial, Medicaid, and Medicare.

**USE THIS FEATURE**

1. On the Overpayments page, in the left-hand **Search By** field, select **Line of Business**.
2. In the second **Search By** field, select one of the following options:
   - Commercial
   - Medicaid
   - Medicare
Summit Community Care Payer Space Now Available

Coming March 1, 2019

You will be able to access applications, information, and news and announcements specific to Summit Community Care from the Summit Community Care payer space.

ACCESS AND USE THE PAYER SPACE

A. At the top of Availity Portal, click Payer Spaces, and then click the Summit Community Care tile.

Read the Summit Community Care System User Agreement, and then click I Accept.

B. Click the tabs to find what you’re looking for:

- Click the Applications tab to access payer-specific applications.
- Click the Resources tab to access payer-specific resources and information.
- Click the News and Announcements to access payer-specific news and announcements.
View Summit Community Care Member ID Card from E&B Results

Coming March 1, 2019

You will be able to view the member ID cards for Summit Community Care members from the eligibility and benefits results.

To view a member ID card, click View Member ID Card near the top of the Eligibility and Benefits results page. The member ID card will display in a separate window.
Availity has enhanced the Clinical Quality Validation to provide a better Availity Portal experience for you.

**WHAT’S NEW?**

The following message now displays on the Clinical Quality Validation work queue for Florida Blue providers:

2018 CQV forms are no longer being accepted by Florida Blue. A notification will be sent when 2019 forms are available.

Note: This message is temporary and will be removed when 2019 forms are available.

When completing a form, be sure to fill out the appropriate sections of the form that correspond to the medical record documentation that you are submitting. Otherwise, processing takes longer and may affect the accuracy of your Stars and Commercial reports.
Modifier Field Now Validated for Florida Blue Authorizations

Values of the Modifier field for inpatient and outpatient authorization requests, for Florida Blue and Other Blue Plans (in Florida), will now be validated using the date of service. Requests with an invalid value of the Modifier field will be rejected.
Messaging Feature No Longer Available for Certain Members in E&B Results from Some Regence Payers

The **Message this payer** button no longer displays for Blue Card and FEP members on the eligibility and benefits returned by the following payers:

- Regence BlueShield of Idaho
- Regence BlueCross BlueShield of Oregon

The messaging feature was removed for Blue Card and FEP members because it currently cannot be supported.
Availity has enhanced the HEDIS Attestation for Maternity to provide a better Availity Portal experience for you.

WHAT’S NEW?

The BlueCross BlueShield of Minnesota HEDIS Attestation for Maternity work queue and form have been renamed for BCBSMN Blue Plus Medicaid providers.

‘BlueCross BlueShield of Minnesota’ has been removed from the title of the work queue and form.
Referred-to Provider Search for BCBSMN Now Supports Selecting Providers in Border Counties

When searching for a referred-to provider for a Blue Cross and Blue Shield of Minnesota referral request, participating providers in border counties can now be selected.

Note: Request only Blue Cross participating providers in Minnesota or Minnesota bordering counties when choosing a 'Referred-to-Provider'. Providers outside of that region appear grayed out below and cannot be selected. Use Manage Care Referral Form for these Providers.

FIND A PROVIDER

- Search by Clinic/Facility NPI
- Search by Legal Name of Clinic/Facility, Specialty or Condition
- Both

Search by Legal Name of Clinic/Facility, Specialty or Condition

Example: Pediatrics

Search Near

Enter a city or zip code

Search Radius

Within 5 miles

Find a Provider
On the eligibility and benefits results returned by Blue Cross and Blue Shield of Minnesota (BCBSMN), the feature to view a member's ID card is no longer supported. As a result, the **Patient ID Card** button no longer displays on the Eligibility and Benefits results page.
Send Messages to Regence BCBS of Oregon from E&B Results

You can now send messages and file attachments to Regence BlueCross BlueShield of Oregon from a member’s eligibility and benefits results.

SEND A MESSAGE TO THE PAYER

1. Near the top of the Eligibility and Benefits results page, click Message this payer.
2. Complete the fields in the Messaging window, and then click Send.
3. Review the confirmation information in the Messaging window, and then click Close Window.

Click Attach Files to attach files to your message.

Click messaging queue to view your messages in the messaging app.
Updated Fast Path Information in E&B Results for BCBST Members

Availity has updated the Fast Path information that displays when you complete a feedback survey from the eligibility and benefits results for a BCBS Tennessee member.

ACCESS FAST PATH INFORMATION VIA A FEEDBACK SURVEY

1. On the Eligibility and Benefits results page, click Give Feedback.
2. Complete the fields in the feedback window, and then click Send Feedback.

The Fast Path information for contacting BlueCross displays in a separate window. When you contact BCBS Tennessee, reference the Fast Path transaction ID displayed in the window.

Tip: You can also click Contact Payer | Call the Payer to access the Fast Path information.

For more help, contact BlueCross using Fast Path by calling 1-833-FST-PATH (1-833-378-7284) and provide transaction ID, 909247 during normal business hours.
Updated Fast Path Information in E&B Results for BCBST FEP Members

Availity has updated the Fast Path information that displays when you complete a feedback survey from the eligibility and benefits results for a BCBS Tennessee FEP member.

ACCESS FAST PATH INFORMATION VIA A FEEDBACK SURVEY

1. On the Eligibility and Benefits results page, click Give Feedback.
2. Complete the fields in the feedback window, and then click Send Feedback.

The Fast Path information for contacting FEP Customer Service displays in a separate window.

Tip: You can also click Contact Payer | Call the Payer to access the Fast Path information.
Availity has updated the Fast Path information that displays when you complete a feedback survey from the eligibility and benefits results for a BCBS Tennessee BlueCard member.

**ACCESS FAST PATH INFORMATION VIA A FEEDBACK SURVEY**

1. On the Eligibility and Benefits results page, click **Give Feedback**.
2. Complete the fields in the feedback window, and then click **Send Feedback**.

The Fast Path information for contacting BlueCard Eligibility displays in a separate window.

Tip: You can also click **Contact Payer | Call the Payer** to access the Fast Path information.
A new feature in the Provider Credentialing app enables you to search for specific credentialing applications.

**SEARCH CREDENTIALING APPLICATIONS**

A. Type the search criteria in the search field, and then click **Search**. You can search by:

- Practitioner or facility name
- Tax ID
- NPI
- City, state, or ZIP code associated with a service location

B. To clear the search criteria, click next to the **Search** button, and then click **Clear**.
New Sort Feature in Provider Credentialing App

A new feature in the Provider Credentialing app enables you to sort the order in which credentialing applications are listed.

## SORT CREDENTIALING APPLICATIONS

A. Select the following sort order in the Sort By field. You can sort in ascending or descending order by:
   - Provider name
   - Date credentialing application was submitted
   - Last updated
In the credentialing app, you can now complete the sections of a credentialing application in any order. Previously, you had to complete each section of a credentialing application in the order the sections were listed in the left navigation bar.
These Anthem providers in Texas can now dispute claims and use the new appeals application to manage their disputes:

- Amerigroup
- Dell Children’s Health Plan Medicaid
- Unicare

**DISPUTE A CLAIM**

1. Submit a claim status inquiry and select the claim that you want to dispute.
2. Click **Dispute Claim** to initiate a claim dispute.
3. On the confirmation window, click **Go to Appeals** to complete the dispute.
4. Navigate to the new Appeals page by clicking **Claims & Payments | Appeals**.

5. On the Appeals page, locate the dispute that you just initiated, and then select **Complete Dispute Request** from the action menu.

6. On the Complete Dispute Request window:
   - Fill in the requested information
   - Add any supporting documentation
   - Click **Submit Request**
The following EDI enhancements are either currently available, or will soon be available for Availity Basic Clearinghouse. For assistance or additional information on any of these enhancements, please contact Availity Client Services at 1.800.AVAILITY (282.4548).

For more information, access Availity’s EDI Guidelines.

**Note:** These enhancements do not apply to Availity Revenue Cycle Management.
EDI Implementations

This payer is now available for the transmission of certain EDI transactions via Basic Clearinghouse.

<table>
<thead>
<tr>
<th>Payer Name</th>
<th>Payer ID</th>
<th>270</th>
<th>276</th>
<th>278</th>
<th>837P</th>
<th>837I</th>
<th>837E</th>
<th>837D</th>
<th>835</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEVOTED HEALTH</td>
<td>DEVOT</td>
<td>✔️</td>
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</table>
EDI Payer Name Changes

This payer’s name has changed for the transmission of certain EDI transactions via Basic Clearinghouse.

<table>
<thead>
<tr>
<th>Old Payer Name</th>
<th>New Payer Name</th>
<th>Payer ID</th>
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</thead>
<tbody>
<tr>
<td>CONSUMERS CHOICE HEALTH SOUTH CAROLINA</td>
<td>HSB NHP</td>
<td>45321</td>
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<table>
<thead>
<tr>
<th>Old Payer Short Name</th>
<th>New Payer Short Name</th>
<th>Payer ID</th>
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<tbody>
<tr>
<td>MEDICARECA</td>
<td>MCAREA_CA</td>
<td>01111</td>
</tr>
<tr>
<td>MEDICARECA</td>
<td>MCAREB_SCA</td>
<td>01182</td>
</tr>
<tr>
<td>MEDICARECA</td>
<td>MCAREB_NCA</td>
<td>01112</td>
</tr>
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EDI Cancellations

These payers are no longer available for the transmission of certain EDI transactions via Basic Clearinghouse.

<table>
<thead>
<tr>
<th>Payer Name</th>
<th>Payer ID</th>
<th>Expiration Date</th>
<th>270</th>
<th>276</th>
<th>278</th>
<th>837P</th>
<th>837I</th>
<th>837E</th>
<th>837D</th>
<th>835</th>
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<tbody>
<tr>
<td>CLINICAL RESOURCE GROUP</td>
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<td>1/9/2019</td>
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<tr>
<td>HEALTH ECONOMIC LIVELIHOOD</td>
<td>66004</td>
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<td>INFORMED LLC</td>
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<td>OPERATING ENGINEERS LOCAL 139</td>
<td>66771</td>
<td>1/8/2019</td>
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<tr>
<td>HEALTH BENEFIT FUND</td>
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<td>✓</td>
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</tr>
<tr>
<td>TOUCHSTONE PSO (AMO)</td>
<td>AMC00078</td>
<td>1/16/2019</td>
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<td>✓</td>
<td></td>
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</tbody>
</table>
B2B Cancellations

This payer is no longer available for the transmission of certain B2B transactions via Basic Clearinghouse.

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<th>835</th>
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<tbody>
<tr>
<td>TOUCHSTONE PSO (AMO)</td>
<td>AMC00078</td>
<td>1/16/2019</td>
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<td>✔️</td>
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</tbody>
</table>
Contact Availity

Availity is committed to providing you with comprehensive customer service and enhancements that make your Availity experience a more enjoyable one.

For questions, send an email message to us using the Contact Us page. We look forward to hearing from you.

Call us at 1.800.AVAILITY (282.4548).