

Government and Commercial eClaim User's Guide

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You can file online claims for hundreds of carriers including Medicare and Medicaid, as well as commercial payers like Aetna and Healthnet, electronically on eClaim. Eyefinity even provides assistance with government carrier enrollment. If you are currently filing on paper, switching to electronic filing enables you to better track your claims with our eClaim tracking feature. There are also several time-saving features that fill in important information for you, such as billing codes and provider numbers. Eyefinity abides by all HIPAA regulations.

Creating Your Carrier List

You can submit claims to hundreds of insurance carriers with Eyefinity. However, to make submitting claims easier, you can create a customized Carrier List of those carriers with whom you most often work. This section includes the following topics:

- [Adding Carriers to Your Carrier List, 1](#)
- [Removing Carriers from Your Carrier List, 3](#)

Adding Carriers to Your Carrier List

1. Click the **eInsurance** tab.



The eClaim screen opens.

2. Click **Edit Your Carrier List**.

3. Select a search method.

- Select **View entire list** to view all carriers available to you.
- Select **View Commercial carriers only** to view only commercial carriers.
- Select **View Government carriers by State** to select a state for which you want to view government carriers.
- Select **Search by Carrier Name** to enter the name of the carrier you want to view.

4. Click **Go**.

5. Carriers meeting your search criteria appear under **Carrier Search Result**.

- A check in the **Eligibility** column means you can check eligibility for that carrier (not available with all carriers).
- A check in the **Claim** column indicates the carrier offers online electronic claims submission.

6. Select the carrier you want to add and click **Add to Your Carrier List**.

The carrier appears in Your Carrier List.

7. Click **Save Changes**.

8. A confirmation message appears. Click **Continue**.

The carrier you selected appears in the Carrier List on the eClaim screen.

Removing Carriers from Your Carrier List

1. Click **Edit Your Carrier List**.
2. Under **Your Carrier List**, select the carrier you want to remove and click **Remove from Your Carrier List**.

	Eligibility Claim
VSP	✓
1199 National Benefit Fund	✓
742 ACCEL	✓
Acclaim	✓
Advantra Freedom	✓
Aetna	✓

Remove from Your Carrier List

Save Changes

The carrier is removed from Your Carrier List.

3. Click **Save Changes**.
4. A confirmation message appears. Click **Continue**.

The carrier you selected is removed from the Carrier List on the eClaim screen.

Submitting Government and Commercial Carrier Claims

Once you have created your Carrier List, you are ready to start filing your government and commercial claims online through Eyefinity. Here's how to file claims (other than VSP claims) using eClaim.

1. Select the doctor who provided services from the **Doctor List**.
2. Select the carrier you wish to file with from your Carrier List.
3. Under **Start New Claim With Insured ID**, select whether you wish to file a **Claim Only** or a **Claim with Lab Order**.
4. Type the **Insured ID** and click **Insured ID Go**.

Start New Claim With Insured ID/Retrieve Existing Claim By Number

☒ Claim Only ☐ Claim with Lab Order ☐ Claim with Marchon Direct Order

Insured ID GO Tracking # GO

Enter an insured ID or claim tracking number

The Eyefinity Claim Form for Government & Commercial Claims opens.

5. Enter the **Patient** information.

NOTE

- Click **Save** at any time to save your work on this claim and finish later.
- Click **Sections** and select a section to view it.

The screenshot shows the 'Eyefinity Claim Form' for 'Government & Commercial Claims'. The 'Patient' section includes fields for: Last Name, First Name, Middle Initial, Jr/Sr, Date of Birth (mm/dd/yyyy), Gender (M/F), Address (no., street), Address 2, City, State, Zip Code, and Phone Number. There is also a dropdown for 'Patient Relationship to Insured' with options: Self, Spouse, Child, and Other.

6. Enter the **Rendering Provider ID**.

7. Enter **Diagnosis** codes for the claim. You can type the codes, or follow these steps to select codes from a list.

- a. Click the blue button next to the diagnosis code field.

A grid of 12 buttons labeled 'ICD Code 1' through 'ICD Code 12'. Each button has a colored square icon to its left: A (red), B (blue), C (green), D (yellow), E (orange), F (purple), G (brown), H (pink), I (grey), J (light blue), K (dark blue), and L (light green).

- b. Click the **ICD9 Codes** or **ICD10 Codes** tab to view a list of codes.

- c. Select a code from the list.

- d. Click **Use This Code**.

The 'Diagnosis Codes' dialog box has two tabs: 'ICD9 Codes' and 'ICD10 Codes'. The 'ICD10 Codes' tab is selected, showing a list of codes. The code 'E10.21 — Type 1 Diabetes Mellitus with Diabetic Nephropathy' is highlighted. At the bottom, there are 'Close' and 'Use This Code' buttons.

8. Enter service information. Follow these steps to enter Point of Service (POS) codes or Procedure (PROC) codes.
 - a. Click the button next to the POS or PROC field to view lists of codes.

List Point-of-Service Codes

List Procedure (CPT) Codes

	* FROM	* TO	* POS	EMG	* PROC	* DIAGNOSIS	* CHARGES	* UNITS	EPSDT
1	02/20/2016	02/20/2016	11			A			
2	mm/dd/yyyy	mm/dd/yyyy							
3	mm/dd/yyyy	mm/dd/yyyy							

- b. Select a code from the list.
 - c. Click **Use This Code**.
9. Enter the **Insured** information. This information is pre-populated with the information you entered for the patient. If the insured is different from the patient, manually enter the insured's information.
10. If there is another health benefit plan for eyecare, click the **Yes** button at 11d. The screen will take you to the **Other Insured** section, where you can record the other insured's insurance information.

Insured

* 1a. Insured ID
123456

* 4. Last Name
4 Last Name

* First Name
First Name

Middle Initial
Middle Initial

Jr/Sr
Jr/Sr

* 7. Insured's Address (no., street)
7. Insured's Address (no., street)

Address 2

* City
City

* State
State

* Zip Code
Zip Code

Phone Number
Phone Number

11. Insured's Policy Group or FECA Number
11. Insured's Policy Group or FECA Number

11a. Insured's Date of Birth
mm/dd/yyyy

Gender
M F

11c. Insurance Plan Name or Program Name
11c. Insurance Plan Name or Program Name

* 11d. Is there another health benefit plan for eyecare? (If yes, complete Items 9, 9a and 9d)
YES NO

11. Record the **Facility & Billing** information.
12. Make the appropriate selections to indicate whether **Signatures** are on file.
13. Record the **Additional Information Detail**.
14. When you have filled in all required information, scroll to the top of the form and click **Submit**.

SAVE SUBMIT View Report Sections Return to Claim Menu

Eyefinity Claim Form Government & Commercial Claims

15. Click **Yes** to confirm that you wish to submit the claim.

Tracking and Reporting with eClaim

You can track and report on claims filed through eClaim.

1. Click **eClaim Tracking**.



2. To check the status of a specific claim, type the **Claim Tracking Number** and click **Search**.
3. To search for claims by status:
 - a. Select a **Claim Status** and **Doctor**.
 - b. If desired, select to search by **Date Claims Were Submitted**, **Insurance Carrier**, or **Insured ID Number**.
 - c. Click **Search**.

NOTE

Because most insurance carriers have a slightly different process there are several ways to search claims. Many carriers provide a claim status message that can be integrated with the eClaim tracking system. Those messages are attached to your claim number on the search result page.

4. Check for an integrated message from the clearinghouse or carrier by the green arrow next to the claim.
5. Click the **Claim #** to retrieve and edit the claim.
6. Clicking on the Archive Claim check box will remove the claim from the immediate list. Archived claims are still stored electronically and can be retrieved by searching for Archived Claims from the Search screen.