

# **Auto Posting ERA's**

**ANSI 837P**

# EZClaim ERA (ANSI 835 file) Frequently Asked Questions

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**Q: What is an ERA?**

A: An ERA is an Electronic Remittance Advice file. It is the information you would usually receive on a paper EOB, in an electronic format. It is called an 'ANSI 835' file.

**Q: How do I receive the ANSI 835 files?**

A: If you have enrolled with your insurance carrier, your 835 file will be available from the Bulletin Board System (BBS), web page or FTP program. EZClaim/Capario customers contact your EDI representative.

**Q: Will I be able to receive an ANSI 835 file from all insurance companies?**

A: Check with your insurance company about receiving ERA's. Not all insurance companies return an ANSI 835 file.

**Q: How soon will I receive an ANSI 835 file?**

A: Once your claims have been submitted the ANSI 835 file will be available within approximately 5-10 days depending on your insurance company.

**Q: How do I view and then post payment information from an ANSI 835 file?**

A: EZClaim has a feature that allows you to analyze your 835 file, apply payments into EZClaim and run reports on the ANSI 835 file. See instruction below for Downloading and Posting payments.

**Q: Can I print the ANSI 835 file in an EOB format?**

A: Yes, when you analyze an 835 file through EZClaim EDI File Analyzer, under Reports, you can choose 'Print EOB'.

## Glossary

Please refer to data entry instructions for entering the following information.

- **Adjudication date** - The date of payment or denial by the primary payer.
- **Claim Adjustment Reason Code** - The code identifying the detailed reason the adjustment was made.
- **Allowed Amount/ Approved Amount** – The Allowed/Approved is the maximum amount the payer will pay for a specific service. This amount may be reflected on the Primary payer EOB.
- **Contractual** – Contractual Obligation (CO) is the difference between the billed amount and the allowed amount determined by the Primary payer. This amount is reflected on the Primary payer EOB.
- **CAS** – If required, the CAS segment is used to report the adjustment reason codes and amounts when submitting claims to a secondary payer.
- **Payer Paid Amount** - The amount paid by the primary insurer

# Downloading and Posting ANSI 835 Electronic Remittance Advice Files

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## Step 1 - Backup your database before importing payment data.

**WHY?** Back up your database before importing payment data as once Payments have been applied you **cannot** make adjustments on the Options screen or re-apply payments. You must first do a restore from your backup, edit the Options settings and then reapply your payments or else corrections will have to be made manually!

**Remote Users:** You may backup your database to your local drive then restore the database from your local drive if needed. ie. C on XXXXXX

### Auto-Posting the ANSI 835

If you receive ANSI 835 files from the payer, EZClaim can post the payment data back into EZClaim or into an Excel Spreadsheet. Only **primary** payments, **secondary** payments, and **adjustments** will be processed.

The trace number of the 835 file will be entered into the Ref # field on the Find Payments screen **only if the reference field is blank**. If the reference field already has data entered, it will not be overwritten with the trace number.

If the 835 payment amount does not match a payment already entered, the current payment **will not** be overwritten.

If the service line already has a zero (or negative) balance, the payment and adjustment data **will not** be transferred.

## Exceptions when Importing ANSI 835 Files

The EDI File Analyzer will only process claims with the following Claim Status Codes:

- 1 – Processed as Primary
  - 2 – Processed as Secondary
  - 4 – Denied
  - 19 – Processed as Primary, Forwarded to Additional Payer(s)
  - 20 – Processed as Secondary, Forwarded to Additional Payer(s)
- All other claims will be ignored

The EDI File Analyzer will only process adjustments with the following Group Codes:

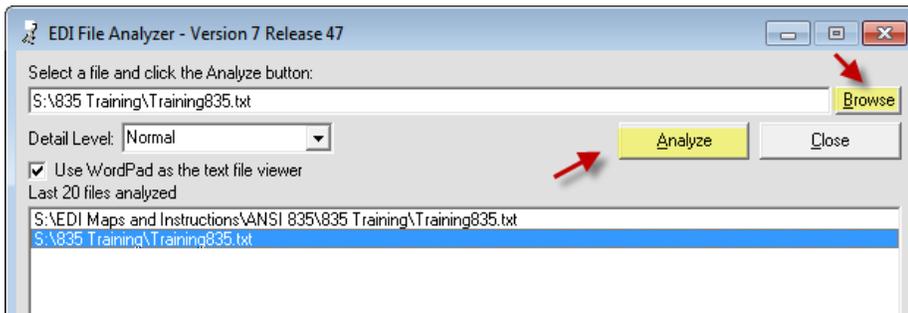
- CO** – Contractual Obligations – Adjustments will be entered as a Contract Adjustment.
  - OA** – Other Adjustments – Adjustments will be entered as an Other Adjustment. The Adjustment reason code will be entered into the Adjustment Code field.
  - PI** – Payer Initiated Reductions – Adjustments will be entered as an Other Adjustment. The Adjustment reason code will be entered into the Adjustment Code field.
  - PR** – Patient Responsibility – No amounts are entered. The line items balance will be changed to Patient Responsibility.
- Group Code **CR** (Correction and Reversals) will be ignored.

- Claim Level Adjustments are not posted. See Step 3 for further information.
- All service line payment and adjustment information will be included on the 835 Remittance report even if the option to ignore was previously selected.

**Note:** For a listing of the Claim Adjustment Reason Codes go to <http://www.wpc-edi.com/content/view/695/1>

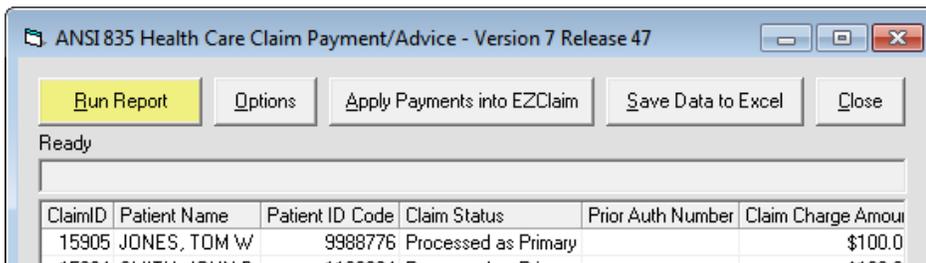
## Step 2 – Download the ANSI 835 File

1. Clear your screen by clicking on 'New Patient'.
2. If program is multi-user all other users must be out of EZClaim.
3. Return to the Web page, FTP or Bulletin Board System (BBS), or program where the claim file was uploaded by your insurance company.
4. Follow the Insurance Carrier or Clearinghouse instructions for downloading your electronic remittance advice file, sometimes referred to as an 835 file.
5. If you receive the message "Do you want to Analyze this file" after the file has been downloaded, always select "Yes".
  - **NOTE:** This screen will also give you the location (Path and Filename) of the downloaded file. Please note the filename and location.
6. If you do not receive the message re analyzing your file, you can Analyze the file manually. **Go to Tools>EDI File Analyzer.**
7. Use the Browse button to select your downloaded 835 file. Select file to analyze, click on the 'Analyze' button.

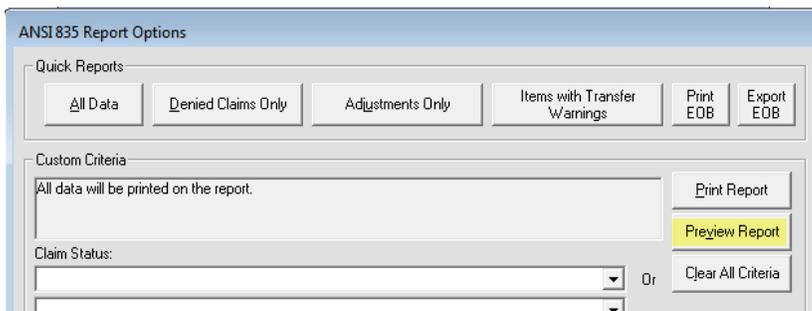


## Step 3 - Run Report Button

1. Click on 'Run Report' button to open Report options screen.



2. Preview Report to verify if Adjustments and Payments are correct.



3. Check report to verify information. When previewing the report before you apply payments, the report will display the warning message '**Not Transferred**' because you have not yet applied payments into EZClaim.

4. Select 'Close' when you are done previewing the report.

835 Filename: C:\pmsft\reports\SAMPLE835.txt

Service Dt	Procedure	Charge	Applied	Description	Warning Messages
Payer: <b>MEDICARE ID:</b>					
Payee: <b>COMPANY NAME ID: 123123123</b> Check or EFT Trace Number: <b>1111111111.22222</b> Payment Date: <b>07/12/2004</b>					
JONES, TOM HIC 9988776 P: AETNA US HEALTH S: MEDICARE					
Claim ID: 15905 \$21.31 ICN 000000685784600 1-Processed as Primary Bal: \$100.00					
05/24/04	H0036	\$21.31	\$16.31	Payment	Not Transferred
			\$5.00	Contractual Obligations A2 -Contractual adjustment.	Not Transferred
SMITH, JOHN HIC 1122224 P: UNITED HEALTH CARE S: MEDICARE					
Claim ID: 15934 \$127.86 ICN 000000685787610 1-Processed as Primary Bal: \$300.00					
05/26/04	H0036	\$127.86	\$117.86	Payment	Not Transferred

**Note:** See page 8 for further information on 'Reports'.

## Step 4 -Options Button

**Note:** Backup up your database before importing payment data. **Once you have Applied Payments you cannot make changes in the Options screen and re-apply payments without restoring from your backup and corrections will have to be made manually!**

**Note:** The following four 'Options' have been selected by default. When reviewing your analyzed 835 examine the Adj Group Code, Adj Reason Code and Adj Amount column's to determine which Adjustments should or should not be posted.

Check or uncheck to add or remove 'Options'.

Place a check next to the adjustments to apply and click the 'Save and Close' button. When viewing the transfer report, you will see 'Option Set to Skip Adjustment' next to any adjustment that was not set to transfer.

- **CO - Contractual Obligations** - Adjustments will be entered as a Contractual Adjustment in the Line Item Payments window.
- **CR – Correction and Reversals** - 'Correction and Reversals' is not enabled since the EDI File Analyzer will not transfer those adjustment types.
- **OA - Other Adjustments** - Adjustments will be entered as an Other Adjustment in the Line Item Payments window. The Adjustment reason code will be entered into the Adjustment Code field.
- **PI - Payer Initiated Reductions** - Adjustments will be entered as an Other Adjustment in the Line Item Payments window. The Adjustment reason code will be entered into the Adjustment Code field.
- **PR - Patient Responsibility** - No amounts are entered. The line items balance will be changed to Patient Responsibility. See 'Entering Payments and Adjustments for more information on balance responsibility.
- **Allowed Amount** - Set the Allowed Amount to help with secondary billing.

- **Ask To Assign a Value to Payment Reference 2** - Check if you want specific information in the Reference 2 field on the Line Items Payments screen. When you click Apply Payments Into EZClaim, a dialog box will come up asking you to enter the information.
- **Optional – Setting Contractual Obligation Codes**
- If the insurance company is returning ANSI 835 adjustments that are group coded as Contractual Obligations but should be Payer Initiated Reductions, you can enter Contractual Obligation reason codes into the Optional box. Only the reason codes found in the box will be categorized as contractual adjustments, all others will be categorized as Payer Initiated Reductions.

**Note:** Claim Level Adjustments are ignored but all service line payment and adjustment information will be shown on the report even if they were ignored during the transfer.

## Step 5 – Apply Payments into EZClaim

**Note:** Backup up your database before importing payment data. (Once you have Applied Payments you **cannot** make adjustments and re-apply payments without restoring from your backup.)

**Note:** The trace number of the 835 file will be entered into the Payment Reference 1 ONLY if the reference field is blank. If the reference field has data entered, it will not be overwritten with the trace number.

Payment Type	Amount	Date	Reference 1	Ref 2/Deposit #	Reason Code	Payment Note
Del Insurance Pmt	\$50.00	8/12/2011	Trace Number			
Del Contract Adj	\$10.00	8/12/2011			126	

1. Click on the 'Apply Payments into EZClaim' button.

ClaimID	Patient Name	Patient ID Code	Claim Status	Prior Auth Number	Claim Charge Amount
15905	JONES, TOM W	9988776	Processed as Primary		\$100.0
15934	SMITH, JOHN D	1122334	Processed as Primary		\$100.0
15934	SMITH, JOHN D	1122334	Processed as Primary		\$200.0

2. Once payments have been applied, you will have the option of printing a report from the 'Reports' dialog box.
  - If you do not run your report at this time, you will not get accurate payment information when you run it later. When you run the Report later, all your report warnings will indicate 'Not Transferred'.
  - Denied claims will be set as 'Denied' in the Claim Status drop down on the Charges screen.
  - If the 835 payment amount does not match a payment already entered, the current payment WILL NOT be overwritten.
  - Payment and adjustment data will not be transferred if the service line has a \$0.00 balance.

## Step 6 - Verify Payments

**Note:** To find a claim by Claim ID# see page 9.

To Verify Payments, go to the 'Charges' screen. Open the 'Line Item Payments' dialog box by clicking in the 'Applied Amt' box. Verify payments.

Payment Type	Amount	Date	Reference 1	Ref 2/Deposit #	Reason Code	Payment Note
Del Insurance Pmt	\$50.00	8/12/2011	Trace Number			
Del Contract Adj	\$10.00	8/12/2011			126	

## Step 7 - Re-Analyzing an Existing File

### Re-Analyzing an EDI File

**Note:** Although you are able to view a previously analyzed file, you will **NOT** be able to reapply payments. To reapply payments, see below.

The EDI File Analyzer shows the last ten files analyzed. If you downloaded a file and analyzed it but don't remember where it was saved, you can use the EDI File Analyzer to view the file.

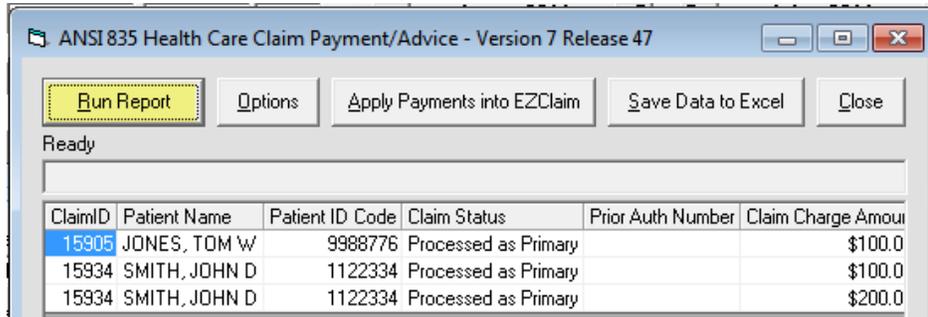
### Re-Applying Payments

1. Restore your database from your backup file.
2. Go to Tools>EDI File Analyzer, highlight your file and click Analyze.
3. Make any adjustments and re-apply your payments.

# EDI File Analyzer Options

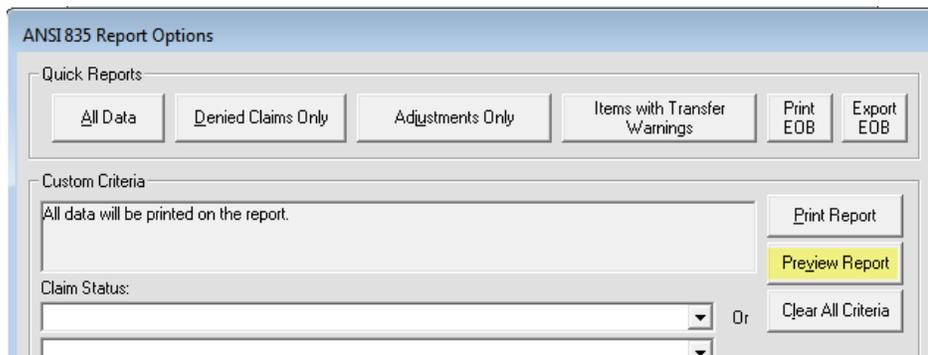
## Run Reports (Optional)

To preview how payments will be applied before importing the payments into EZClaim, click on the 'Run Report' button. The reports will show how payments will be applied.



Denied claim adjustments are not processed and the claim is simply marked as 'Denied'. You will also get this report after you have exported to EZClaim.

**Note:** If you preview the report before you apply payments, it will display the warning message 'Not Transferred' because you have not applied payments into EZClaim. Select 'Close' when you are done previewing the report.



Click one of the 'Quick Report' buttons to view the report or you can manually select criteria to limit the data shown on the report.

- **All Data** - This report will show all data from the downloaded 835 file.
- **Denied Claims Only** - This report will only show denied claims.
- **Adjustments Only** - This report will only show claims with adjustments
- **Items With Transfer Warnings** – This report will only show claims with Transfer Warnings.
- **Print EOB** – This option will print your 835 file in an EOB format.
- **Export EOB** - Will export the EOB to a PDF format.
- **Preview/Print Report** - You may print or preview the report you have selected.
- **Clear All Criteria** - Used to re-set report criteria.

To preview Reports using Custom Criteria, use the dropdown arrows to select 'Claim Status' and/or 'Adjustment Reason Codes' and/or 'Transfer Warning Message'. Click on 'Preview Report' or 'Print Report' button.

- **Claim Status** - You may select up to two claim status codes for the report.
- **Adjustment Reason Codes** - You may select up to four individual adjustment codes for the report.
- **Transfer Warning Message** – You may select one warning message.

## Warning Messages on Report

### 835 Electronic Remittance Advice

835 Filename: C:\pmsft\reports\SAMPLE835.txt

Service Dt	Procedure	Charge	Applied	Description	Warning Messages
Payer: MEDICARE ID:					
Payee: COMPANY NAME ID: 123123123 Check or EFT Trace Number: 111111111.22222 Payment Date: 07/12/2004					
JONES, TOM HIC 9988776 P: AETNA US HEALTH S: MEDICARE					
Claim ID: 15905 \$21.31 ICN 000000685784600 1-Processed as Primary Bal: \$100.00					
05/24/04	H0036	\$21.31	\$16.31	Payment	Not Transferred
			\$5.00	Contractual Obligations A2 -Contractual adjustment.	Not Transferred
SMITH, JOHN HIC 1122224 P: UNITED HEALTH CARE S: MEDICARE					
Claim ID: 15934 \$127.86 ICN 000000685787610 1-Processed as Primary Bal: \$300.00					
05/26/04	H0036	\$127.86	\$117.86	Payment	Not Transferred
			\$10.00	Contractual Obligations A2 -Contractual adjustment.	Not Transferred
COMPANY NAME		\$134.17	Total Payments in 835		2 Payment Messages
Pmt Trace Num:		\$15.00	Total A djustments in 835		2 Adjustment Messages
111111111.22222					
		\$134.17	Total Payments in 835		2 Payment Messages
		\$15.00	Total A djustments in 835		2 Adjustment Messages

- **Not Transferred** – This is shown when the payment or adjustment has not been transferred. An item may not be transferred because it had a status or code that is ignored (see below).
- **Mismatched Payment/Adjustment Entered** – This is shown when a payment or adjustment exists in EZClaim but does not match the amount in the 835 file.
- **Service Line Already Paid** – This is shown when the service line already has a balance of \$0.00 (or a negative balance).
- **Option Set to Skip Adjustment** – This is shown when the adjustment has been skipped because the option was set to not apply the adjustment. Click the Options button on the ANSI 835 screen to view import options.
- **Could Not Find Service Line** – This is shown when the service line to apply the payment or adjustment could not be found. The Analyzer will attempt to find the service line by matching the Claim ID, procedure code, and date.

## Finding a Claim using Claim ID#

### Claim ID's

- EOB/Reports - Patient Account Number. The Claim ID# is the numbers to the left of the dash. See examples below.

D I L L E D U

ACNT 15905-8395

Capario's Id      Patient Account  
Payor Ref #

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867540531      974-88

- Go to the 'Claims' menu and choose 'Find Claim by ID'. Enter the Claim ID and click OK. This will take you to the charges screen for that claim. You can also verify the claim ID at the top left of the charges screen under the patient's name.

Patient Name: SAMPLE, MIKE S  
Claim ID: 190

- Electronic Claims – you can sort by the column heading 'Claim ID'.

## Save Data to Excel (Optional)

ClaimID	Patient N	Patient ID	Claim Stat	Prior Auth	Claim Cha	Claim Pay	Patient Re	Procedure	Modifier	Service D	Line Char	Line Paym	Adj Group	Adj Reaso	Adj Reaso	Adj Amou	Adj Qty	Payer Clai	Fac
15905	JONES, TC	9988776	Processed as Primar		\$21.31	\$21.31	\$0.00	H0036		#####	\$21.31	\$16.31	Contractu	Contractu	A2	\$5.00	0	0	
15934	SMITH, JO	1122334	Processed as Primar		\$127.86	\$127.86	\$0.00	H0037		#####	\$100.00	\$100.00						0	
15934	SMITH, JO	1122334	Processed as Primar		\$127.86	\$127.86	\$0.00	H0036		#####	\$127.86	\$117.86	Contractu	Contractu	A2	\$10.00	0	0	

Using the features of Excel, review or manipulate data.

**Note:** To save data to an Excel spreadsheet for further review, click on the 'Save Data to Excel' button. You will now be able to view the information received in an 835 Remittance file. Use the bottom scroll feature to view all data.

### Manually Analyzing EDI Files

If an EDI file already exists, you can manually analyze it with the EDI File Analyzer.

1. Click the Tools menu and select EDI File Analyzer.
2. Click the Browse button to select the file.
3. Click the Analyze button.