

## How to submit a claim in Availity

## Washington | Medicaid

If you have any questions, contact Availity Client Services at **800.AVAILITY (282.4548)** or contact your Foundational Community Supports (FCS) manager at **844-451-2828**.

- 1. Go to Availity.com
- 2. Select the orange **Log in to Essentials** button in the top right corner.
- 3. Enter your user ID and password and then select Log In.
- 4. Select Claims & Payments at the top toolbar and then select Claims & Encounters.
- 5. You'll need to complete each section. Complete the *Insurance Company/Benefit Plan* section first.

**Note**: Select **Professional Claim** for claim type, **Wellpoint** for payer, and **Primary** for responsibility sequence. Navigate to the blue question mark if you need help with what to enter.

- 6. Enter the FCS enrollee's information in the Patient Information section.
- 7. Complete Subscriber Information section.
  - **Note:** Use the client's ProviderOne ID for their *Subscriber ID* and select **Yes** for *Authorized Plan to Remit Payment to Provider*. You will not add a secondary insurance plan.
- 8. Complete *Billing Provider Information* with your organization's information.

  Note: Your Availity administrator should setup *Manage My Organization*, so that your provider information auto-populates. You'll need to enter the primary taxonomy and NPI specific to FCS and associated with your NPI (some examples include Case Management 251B00000X, Case Manager/Care Coordinator 171M00000X, Community/Behavioral Health 251S00000X). If you can't remember what your taxonomy is, you can look it up on the NPI Registry at https://npiregistry.cms.hhs.gov/.
- 9. Complete Claim Information section.
  - **Note**: Patient Control number field is the internal number your provider office/organization uses to identify the enrollee in the office's billing records and computer system. This number is not assigned by Wellpoint. In *Frequency Type*, select 1) **Admit through Discharge Claim** if this is an initial claim. Select **Yes** for *Provider Signature on File*. If submitting a corrected claim enter the original claim number in the Patient Control Number and 7) Replacement of Prior Claim in the Frequency Type.
- 10. Complete Diagnosis Codes.

**Note:** Only use one of these two diagnosis codes for FCS services:

- Z599 Problem related to housing and economic circumstances, unspecified
- Z569 Unspecified problems related to employment
- 11. Continue completing claim information in the claim *Lines* section.

**Note:** The *Service From* and *Service To* date should be the same date since FCS services are billed for a single Date of Service (DOS).

Enter the **Procedure Code** with one of the three billing codes (HCPS codes) for FCS. Modifiers shouldn't be used for FCS services:

- H2023 (pre-employment)
- H2025 (employment sustaining)
- H0043 (supportive housing)

*Diagnosis Code Pointers* will populate in a drop-down format. Pick the appropriate code based on diagnosis code entered above in step 10.

In the Charge Amount field, enter the total charge amount (charge amount = rate x units). For example, if you're billing for 4 units of Supported Employment services (1 unit = \$27) on one service line, you would enter \$108 in the charges field (\$27 x 4 units). You'll only bill for one service date per service line. Supportive Housing services billing code is a per diem/daily rate, so the charges field will always be \$112:

- H2023 (pre-employment) + H2025 (employment sustaining): 1 unit = 15 minutes = \$27
- H0043 (supportive housing): 1 unit = daily rate = \$112

Select + Add a Line if you have another service line (date of service) to bill for the same enrollee. You can add multiple service lines for each enrollee you provided supported employment and/or supportive housing services to.

- 12. When you've entered all the services, select Continue.
- 13. Review all the information, and if no changes are needed, select Submit.
- 14. You will then see a *Claim Submitted* confirmation page with the transaction ID, submission date, and other claim details.

You can print the claim submitted detail page for your reference, enter a new claim, or close the window.

Visit the Provider Learning Hub to take an On-Demand Availity training course for claim submission.