Office Ally – PrimeWest Health

Through a partnership with Office Ally, PrimeWest Health is pleased to offer a free online claims entry option for 837P, 837I, and 837D claims. This process requires only an Internet connection and a standard browser. Office Ally will capture the claims you enter and forward them electronically to PrimeWest Health at **no cost to you**.

To sign up as a biller using Office Ally, go to **www.officeally.com** and click *Enroll Now*. Be sure to select *Office Ally's Online Claim Entry Tool* under "System Information." After registering, you will receive a confirmation email from Office Ally. Once you receive this confirmation, you can start using Office Ally. Refer to the tips below and your Office Ally booklet for instructions. (To access the Office Ally booklet, go to **www.officeally.com**, click on *Resource Center>Office Ally Forms & Manuals*, and then click on *Online Entry Tool Instructions* under the "Service Center Manuals/Instructions" header.) In addition, Office Ally will call you within one business day after registration is complete to walk you through the basics.

If you have any questions, please contact Office Ally's Customer Support by calling **1-866-575-4120** (toll free) or sending an email to **info@officeally.com**. If Office Ally is unable to resolve your issue, you can call the PrimeWest Health Provider Contact Center at **1-866-431-0802** (toll free).

Important Tips!

- **Start by entering and sending one or two claims.** The next day, check their status on your Office Ally account. (To learn how to do this, refer to the *Checking your Claim Status* section of the inside front cover of your Office Ally booklet.) Once your test claims show that they have been received **and** adjudicated, you can start sending all of your PrimeWest Health claims using the Office Ally service.

- **Avoid repetitive entry of information.** When entering new claims, you can use stored payer, rendering provider, facility, billing provider, and patient information!

- **Select the correct payer.** PrimeWest Health is listed as "61604 (Prime West Health System)." When you click on the grey box that says "OA Payers," a pop-up box that says "Payer Name, Starts With" will appear. In the blank field to the right of this text, type "prime w." This will bring up Prime West Health. Click *Select* to fill in Prime West Health as the payer.

- **Submit only one claim per "rendering provider."** Office Ally is currently unable to accept more than one rendering provider per claim.

- **Check to make sure the duplicate filter is turned off.** If PrimeWest Health denied your claim and you are trying to re-enter a previously submitted claim that went through in Office Ally, a setting in Office Ally intended to prevent accidental duplicate submissions may need to be turned off. You can make this a temporary or permanent change (making it permanent is recommended). See below for instructions on how to turn off this filter.
  - On the left-hand side of the screen, click on *Admin Section* under "My Settings" and select *Duplicate Filter Setting.*
  - Select the amount of time you want the duplicate filter to be disabled.
    - You can turn the filter off for 24 or 48 hours or turn it off permanently. Turning it off permanently is recommended.
  - Select the *Turn Off DeDuping* button.

Printing a Complete Office Ally *User Manual*

You may want to consider printing a complete Office Ally ***User Manual***, which includes additional helpful tips and information. To view the ***User Manual***, complete the following steps:

- On the Office Ally home page (**www.officeally.com**), click *Resource Center>Office Ally Forms & Manuals.* Scroll to the middle of the screen until you see the "Service Center Manuals/Instructions" header.
- Select *Office Ally User Manual*.

Note: The *Online Entry Tool Instructions* link located below the *Office Ally User Manual* link offers additional information on claim submission.

Helpful Claim Field Tips

- **Box 6 (Patient Relationship to Insured)**
  - In Box 6 of the claim's Patient Data section, "Patient Relationship to Insured" must be "**Self**." If "**Self**" is not selected, you will receive an error from Office Ally stating "Per Payer, Patient Relationship to Insured Must Be Self."

- **Box 24A/24H**
  - When submitting a **Child & Teen Checkup (C&TC)** claim through Office Ally, please submit the C&TC referral code in **Box 24H**.

- **Box 24J (Rendering Provider ID)**
  - **Box 24J: NPI** – Enter rendering individual's National Provider Identifier (NPI). Do not complete this portion if submitting only a Unique Minnesota Provider Identifier (UMPI).
  - **Box 24J: PIN** – Enter rendering individual's UMPI. Do not complete this portion if submitting only an NPI.

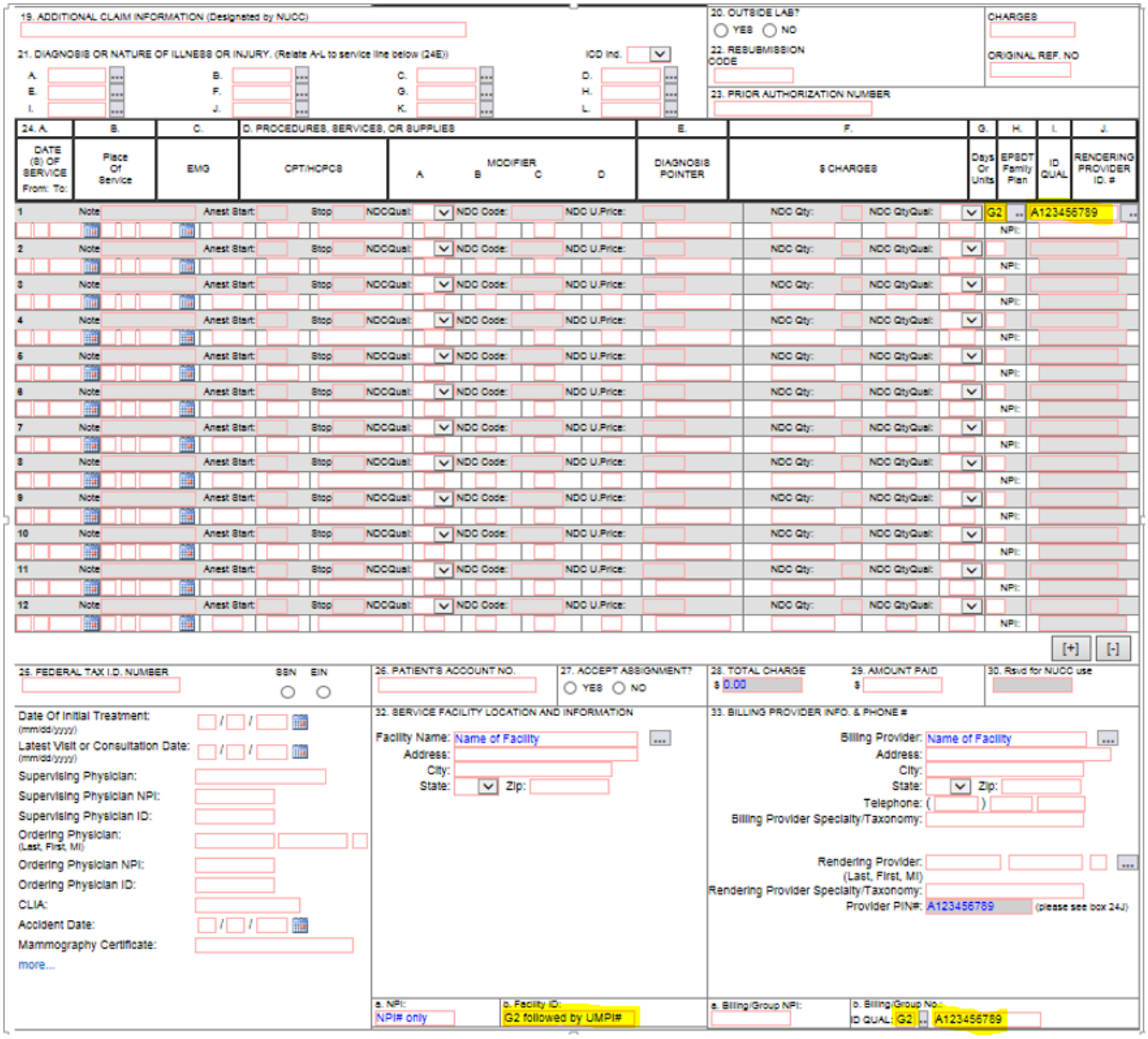
  Note: Line 1 of Box 24J will override any provider number entered in Box 24J of later claim lines. Therefore, if more than one individual provided services, please bill on different claims for Office Ally.

- **Box 32 (Service Facility Location and Information)**
  This is the information for the facility where services were rendered. This information is only required if the facility is different from the facility in Box 33. If the service was provided in the home, no indication of this is necessary in Box 32 (this should be indicated in the "Place of Service" field).
  - **Box 32 upper portion –** Complete fields with the facility information where services were rendered.
  - **Box 32A: NPI** – Enter rendering facility's NPI. Do not complete this portion if submitting only an UMPI.
  - **Box 32B: Facility ID** – Enter facility's UMPI preceded by the two-digit qualifier code "**G2**." Do not complete this portion if submitting only an NPI.

- **Box 33 (Billing Provider Information and Phone)**
  This is the information for the pay-to facility. **Note:** Office Ally requires more information in Box 33 than is typically required.
  - **Box 33 upper portion –** Complete fields with the pay-to facility information. The PIN will automatically populate for you if it was already entered in the shaded area in Box 24J.
  - **Box 33A: Billing Group NPI** – Enter pay-to facility's NPI. Do not complete this portion if submitting only a UMPI.
  - **Box 33B: Billing Group No**. – Enter pay-to facility's UMPI preceded by the two-digit qualifier code "**G2**." Do not complete this portion if submitting only an NPI.

- The ID qualifier will not save with your stored data. When using an UMPI, you will need to select "**G2**" for each claim. See the highlighted areas of the screen shot on the next page for reference.

CMS-1500/837P Office Ally Sample Form



Office Ally Questions and Answers

Q: I sent my claim through Office Ally. How do I know if it went through?

A: You can check the transmit status of you claim by viewing the "Download File Summary." This screen has a calendar with highlighted days showing where there are reports available for viewing. Clicking on a day that is highlighted will list your claims and indicate if they were accepted or rejected. There will typically be two days highlighted for each day you submitted claims. The first date reflects the report showing that the claims were forwarded to PrimeWest Health. The second date reflects the report from PrimeWest Health back to Office Ally confirming receipt of the claims.

Q: One of my claims was rejected by Office Ally. How do I fix and resubmit?

A: If you have received either an email from Office Ally or verification on your "Download File Summary" that a claim has been rejected, you can click on *Claim Fix>Repairable Claims.* This will bring up a calendar indicating dates highlighted in pink that have failed claims that can be repaired and resubmitted.

On the calendar, go back to the date of the rejection (which should be highlighted in pink). Click the date to show the claim line. Click *Correct* to bring up your original claim and get information on why the claim was rejected and what you need to update to correct it. Once your corrections have been made, click *Update* at the bottom. Office Ally will forward your claim back to be batched. At this time, you can print a copy of your updated claim for your records.

Note: You do not need to turn off the "DeDuping" feature when you are rebilling a claim you have corrected through Claim Fix.

Q: I forgot to print a copy of the claim and it has now been transmitted. Can I go back and print it?

A: Unfortunately, there is not a way to do this. You can print the confirmation report from Office Ally from the "Download File Summary" screen or from your confirmation email. However, you cannot bring up the actual claim image once it has been transmitted and accepted.

If you do need to print a copy of the claim, you will need to re-enter the claim in Office Ally, print it from the "Waiting to be Batched" screen, and then delete the claim so you do not send a duplicate. As a reminder, PrimeWest Health requires all claims to be submitted electronically.