

The ABC's of our New Claim Status Tool

We have a new claim status tool in Availity^{®1}. As you begin to use this new tool, we want you to have a successful experience. Be sure to familiarize yourself with the following steps and helpful tips.

Access the Tool

Access the tool:

1. Log in to Availity at availity.com.
2. Get started by clicking on *Claims and Payments*, then *Claim Status (New)*.

Helpful Tip: For quicker navigation, click the heart icon to save this application to your favorites.

Start your search:

1. Once in the application, select the *desired payer, provider organization*, and click *continue*.
2. Select the *desired National Provider Identifier (NPI), Status, Date(s) of Service*, and any other optional fields as desired, then click search.

Helpful Tip: If you have accessed the tool and cannot find your organization's National Provider Identifier (NPI) in the drop down, click the help menu located next to the field for tips on how this can be resolved within Availity^{®1}.

Be Aware of the Details

View the details of a claim:

1. The screen defaults in a summary view of all claims. Click a claim summary card or use the button in the upper right corner to change the view to *Detail View*, to see the claim details.
2. Once clicked, the details are available in the right pane in the viewer. Review and scroll to see information about the claim detail lines, such as itemized distribution, HIPAA codes, Florida Blue remarks, revenue codes and other pertinent claim and claim line details.

Helpful Tip: You can hover over the (i) icons to see expanded descriptions of indicators and remarks.

3. To review the summary again, note the summary card, which is color coded based on status, remains in the left pane for the selected claim.
Helpful Hint: To return to the summary view of all claims, use the button to change the view in the upper right hand corner to "List View."

¹Availity, LLC is a multi-payer joint venture company. To register with Availity, visit availity.com.

Check Supporting Information

Denied for eligibility? To check the member's eligibility:

1. In the *detail view* for a claim, click *Get Eligibility and Benefits*, to see a basic eligibility response about the member on the claim, as of the date of service of the claim.
2. If more information is needed, link out to a full response by clicking *View in Eligibility and Benefits*.

Helpful Tip: *There is no need to enter the information for the member. The member's information has been saved for you in the left hand pane. Click the member's name to run the full Eligibility and Benefit response.*

Need more information about the remittance? To check remittance:

1. At the top right of the screen, select the *Go To* button and select *Remittance Viewer*.
2. Once clicked, the screen will exit the claim status tool and navigate to the *Remittance Viewer* so further research can be done.

Helpful Tip: *If you are not done in the claim status tool, you can open Remittance Viewer in a new tab and toggle back and forth. To do this, click Go To, then right click the Remittance Viewer and select Open in New Tab.*

If you need additional assistance, please access the [New Claim Status demo](#) or call Availability at 1-800-AVAILITY.