Submit claims disputes online and view status

A dispute is a request to reconsider a claim that has been denied, adjusted, or contested.

What you’ll need to get started:

• Username and password to log in to your Provider Connection account.

• Access to claims data.
  • All Account Managers have access to claims data.
  • Account managers can enable claims access for Users at Account Management > Manage user accounts.
  • You must be linked to the Tax ID (or SSN) and Provider ID (TIN/PIN) of the claim for which you are searching.

• New dispute, not previously filed with Blue Shield.

• Claim number(s) and supporting documentation.

• Email where you will receive automated notifications.

* Do not use the online dispute functionality to attach documents to a finalized claim. Click the link provided to access instructions for this activity.

* For dispute fundamentals, go to Claims issues & disputes and scroll to Learn more about the dispute process.
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There are four steps (screens) to filing a claim dispute online. You will enter:

1. Claim info
2. Dispute info
3. Contact info
4. And then review your entry and submit.

Disputes can be filed for a single claim or multiple claims in a bulk dispute for the same type of issue. Use the table of contents below to navigate to instructions for each option.

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2. Click **Claims** in the top menu, then click **Check claim status**.

3. Enter data into one or more search fields and click **Search**.

4. Results will display in the table below the blue header. Click the claim number that displays under this column.

5. The **Claim detail** displays. Click **Resolve claim issue or dispute**.
6. The *Resolving a claim issue* pop-up displays. It includes other options for consideration before you initiate a dispute.

7. To continue filing your dispute online, click **online dispute form**.
Dispute process – Step 1: Claim info

Claim information screen

1. Claim details display.
   - The claim number will automatically populate. You can enter a new claim number and click **Update** if desired.
   - Filing a dispute for one claim is the default selection.
   - To see additional details about the claim, click **View more**.

2. Click **Next**.

The Dispute info screen displays – see next page.
Dispute information screen

3. Describe the dispute and your expected outcome.

4. Review and answer the question(s). Questions will vary depending on the type of claim you are disputing. Your answers will help route the dispute to the correct team.

5. Attach supporting documents in the order you would like them reviewed.
   - Select up to five (5) files at a time for a total of 20 files.

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<th>All plan types except BlueCard</th>
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<tr>
<td>PDF, Excel, Word</td>
<td>50 MB</td>
<td>20</td>
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| BlueCard                       | PDF          | 10 MB                | 20             |

Continued next page.
6. After dragging/dropping or selecting your supporting documentation, a pop-up box displays for each file.

7. Select a type for each file, then click **Attach**. Options are:
   - Medical record
   - Contract/pricing
   - Itemized bill
   - Other, with a field to add a description

8. Click **Next document** until you have identified all document types.

9. All documents will load in the supporting document section.

10. Click **Next**.

The **Contact info** screen displays – see next page.
Dispute process – Step 3: Contact info

Contact information screen

11. Make edits to contact information if necessary.
   - Provider contact information can be updated in your Provider Connection profile so that corrected information populates in the future.
   - Ensure an email address is included so that you receive notifications when dispute related documentation – acknowledgement, determination, update, etc. – is accessible on Provider Connection.

12. Click **Next**.

   The **Review** screen displays – see next page.
Dispute process – Step 4: Review

**Review screen**

13. Review your submission in full.
   - If needed, click **Edit** to return to a specific step and make changes. Page back by clicking the **Next** button.

14. Click the **checkbox** to consent to receiving electronic correspondence by email.
   - **Medicare note:** If you are not contracted with Blue Shield and you are submitting a Medicare dispute for a denied claim, a **waiver of liability checkbox** – CMS required – will also display, which you must check.

15. Enter your full name in the electronic signature field and select or enter the date in this format: MM/DD/YYYY.
   - **Note:** Your e-signature must be an EXACT match of the name entered in the **Contact Information** section.

16. Click **Sign and submit**.
17. A confirmation screen displays with a case number for the submitted dispute.

- For each dispute you file whether initial or final, a new case number is assigned.

- A digital PDF copy of the dispute generates within 15 minutes of submission.
  - For a bulk filing, one case is created with an acknowledgement and determination letter.

- All dispute-related correspondence is available online under Submitted disputes.

- The View all disputes button will take you directly to Submitted disputes.

Next page: Bundle disputed claims in a bulk file.
Dispute process – Step 1: Bundle disputed claims in a bulk file

Bulk submission bundling rules

• Non-contracted providers cannot submit Medicare claims via a bulk file – they must be submitted individually.

• Bundle claims by plan type – do not mix plan types. (i.e., claims for Commercial and FEP members cannot be bundled together.)

• All claims in a bulk dispute must be for the same or similar issue.
  ▪ For FEP and BlueCard bulk submissions, all claims must be for the same or similar issue AND the same member.

The option to bundle claims is on Step 1: Claim Information screen. To bundle:

• Enter or copy/paste claim numbers up to 50
  OR

• Create and upload a CSV file up to 500 claims.

Continued next page.
Enter or copy/paste claim numbers up to 50.

1. Change the default from No to Yes. The Enter claim numbers field displays.

2. Enter or copy/paste claim numbers in the left-hand column.

3. Click Add. Each claim populates on the right.
   a) A yellow banner will display if your claim attachment does not comply with the bulk bundling rules. You can click the X to remove non-compliant claim(s), or they will be removed for you when you click Next.

4. Click Next.
   • The Dispute info screen displays. Continue to Step 2: Dispute info.
Dispute process – Step 1: Bundle disputed claims up to 500

Upload a bulk file

Create a CSV file of claims you are disputing.

1. Click the **Upload a file** tab.

2. Drag/drop or select to upload the CSV file containing the claim numbers you are disputing.

   • **CSV instructions:** In Excel, export or save your file as a CSV (comma-separated values) file.
     - Include claim numbers in the first column and a header row at the top. In the header, label the first column *Claim number* or *ICN*. Claim numbers from the first column of your list will be checked against our records.

   • **To confirm plan types on your claims list, upload a CSV file.**
     - We’ll return your list with plan types identified. You can then organize your list by plan type to submit for processing.
3. The Claims list accepted message displays.

Note, if the attached claims do not comply with bundling rules, a “Some fixes are needed” message displays – see example. To address:

a) Download your submitted CSV file. Claims will be labeled by plan type to help you sort and separate them. Save the corrected file(s).

b) Click the X to remove the original CSV file with the errors and activate the Select a file button.

c) Drag/drop or select to upload the corrected CSV file. If no additional messages display, the Next button will activate.

4. Click **Next**.

   • The Dispute info screen displays. Continue to **Step 2: Dispute info**.
View the status of submitted disputes

1. Click **Claim issues & disputes** from the Claims section’s blue sub-menu bar after log in.

2. Click **View my disputes**.

3. Enter data related to the dispute(s) in one or more fields and click **Show results**.
   - New field: Search by method of submission: Online (by me), Online (by others), By mail, and Other.

4. Results display under the light blue banner.
   - Click the arrow in a column to sort records in ascending or descending order.

5. Click the dispute case number to access dispute case details including letters.

Continued next page.
Dispute case details screen

6. This screen displays all information and documentation connected to the dispute case number you selected.

   a) Dispute form and claim list (if bulk submission).

   b) Claim numbers included in the dispute submission.

   c) Each supporting document uploaded by you with option to add additional documents to an open claim.

   d) Correspondence and determination documentation related to the claim.