



BlueCross BlueShield
of New Mexico



Blue Cross
Community CentennialSM
A Centennial Care Plan

2/27/2014

Electronic Options

- Electronic Fund transfer
- Clearinghouses (Payer Path & Availability)
- Other Electronic Options

Services are funded in part under a contract with the State of New Mexico.

Blue Cross and Blue Shield of New Mexico refers to HCSC Insurance Services Company (HISC), which is a wholly owned subsidiary of Health Care Service Corporation (HCSC), a Mutual Legal Reserve Company. Both HISC and HCSC are Independent Licensees of the Blue Cross and Blue Shield Association.

Note: Materials are subject to change based on ongoing feedback, newly communicated information and internal revisions.

Electronic Fund Transfer

Electronic Fund Transfer (EFT): A convenient, direct deposit of claims from BCBSNM into your designated bank account.

How long does the EFT enrollment process take?

- 24 to 48 hours; followed by a 10-day testing period with your financial institution.
- During the testing period, a zero-balance transfer is sent to test the process prior to going live with your EFT payments.
- The BCBS Electronic Commerce Services department will send you an approval letter.

The EFT Agreement form (example below and included in your handout)

- Required if you want claims payments delivered electronically to your company bank account.



**BlueCross BlueShield
of New Mexico**

Electronic Funds Transfer (EFT) Authorization Agreement

This EFT Authorization Agreement must be fully completed, signed and returned via U.S. Mail or fax to:

Blue Cross and Blue Shield of New Mexico (BCBSNM)
Electronic Commerce Services
300 E. Randolph St., 6th Floor
Chicago, Illinois 60601
Fax: 312-546-8642

A voided check from the provider's account or a letter from the financial institution on financial institution letterhead specifying the provider's name, the account and financial institution routing/ABA number must be included with the signed EFT Authorization Agreement.

If you have any questions regarding the EFT enrollment process, contact our Electronic Commerce Center at 800-746-4614. Additional information, including how to obtain the status of your enrollment, is available on our website at bcbnm.com/provider.

See page 2 for *Other Data and Terms and Conditions*.

Complete all fields on pages 1 and 2 of this form. To fill out online, use the tab key to advance from field to field. Once completed, print, sign and fax or mail your form to BCBSNM Electronic Commerce Services, along with required documentation, as noted above.

PROVIDER INFORMATION

Provider Name:				
Provider Address:	Street:	City:	State/Province:	Zip Code/Postal Code:

PROVIDER IDENTIFIERS INFORMATION

Provider Identifiers:	
Provider Federal Tax Identification Number (TIN) or Employer Identification Number (EIN):	

Electronic Fund Transfer

Electronic Funds Transfer (EFT)

When using EFT, your payments are delivered directly to your financial institution. Therefore, your funds are available as soon as the payment is deposited. The following schedule should be used as a guideline to help you determine when funds will be available at your bank:

Claims Processed	Bank Transfer Occurs*	Funds Become Available*
Monday	Tuesday	Thursday
Tuesday	Wednesday	Friday
Wednesday	Thursday	Monday
Thursday	Friday	Tuesday
Friday	Monday	Wednesday

*Add one day if the normal day falls on a bank holiday.

Non-EFT: Paper checks are generated every Tuesday and Thursday

Electronic Fund Transfer

Contacts for Issues:

- EFT Enrollment or ERA Issues:

Electronic Commerce Center

1-800-746-4614

- If your issue isn't resolved, please contact your lead representative.

South Region (all) & Central Region (A-L)	North Region (all) & Central Region (M-Z)
Patricia Deluna 505.816.2240 Patricia_deluna@bcbsnm.com	Casandra Romero 505.816.2223 Casandra_romero@bcbsnm.com

Electronic Fund Transfer

- The Electronic Solutions link (<http://www.bcbsnm.com/provider/claims/era.html>) provides you with:
 - Electronic Options Tutorial (Atypical providers, please enter “Atypical” in the NPI number field in order to view the tutorial)
 - EFT Agreement
 - Frequently Asked Questions
 - Medicare Crossover Non-par EFT Agreement

Availity or Payer Path

Web portals for submitting claims

The following systems allow providers the capability to submit their claims electronically:

- Payer Path: HSD supported system through Xerox
- Availity: BCBS Clearinghouse

Payer Path Contact (HSD/Xerox system)

- Call **505-246-0710** or **800-299-7304** - to directly reach all provider help desks including Provider Relations, Provider Enrollment, the HIPAA/EMC help desk and TPL. For all contact, Claims, and Correspondence Addresses information go to the following link on the New Mexico Medicaid Web Portal:
- • <https://nmmedicaid.acs-inc.com/nm/general/loadstatic.do?page=ContactUs.htm>
- • Email: NMPRSupport@acs-inc.com
- Contact Xerox

Payer Path

Registration is required for Payer Path:
http://www.hsd.state.nm.us/mad/pdf_files/HIPAA/PPRegistrationformAddDelete.pdf

View an introduction to Payer Path:
<https://nmmedicaid.acs-inc.com/static/PDFs/TrainingPresentations/Payerpath.pdf>

Availity

Availity

Availity optimizes the flow of information between health care professionals, health plans, and other health care stakeholders through a secure, collaborative internet-based exchange. The Availity Health Information Network encompasses administrative, financial, and clinical services, supports both real-time and batch transactions via the Web, Business to Business (B2B) integration with vendors and electronic data interchange (EDI).

Through Availity, providers and other health care professionals can conduct transactions at no charge. Transactions include eligibility and benefits, authorizations and referrals, claims, claim status, remittance with multiple payers, and much more.

Availity is required to be utilized if you want to take advantage of the ERA and EPS for BCBSNM Claims

■ Information Found in Availity

Eligibility and Benefits

Auths and Referrals

Claims Management

Claim Status Inquiry

Professional Claim

Facility Claim

Claim Research Tool

Claim Reconciliation Tool

Remittance Viewer

Refund Management-eRM

Remittance Review

Research Procedure Code Edits

Fee Schedules

Online Batch Management

Medical Records Management

NDC Units Calculator Tool

- **Register and Login for existing users at:**
www.availity.com

aTypical Variations: Upon registration, simply check mark the box that says "NPI is not required for this organization"

- Once access is received, aTypical providers would first need to add their provider information such as; name, address, tax ID, and taxonomy/specialty under "Manage Provider" section in Availity (see below).

Note: The reason why the provider must do this first is because these transactions require an NPI. For the provider to bypass the NPI requirement and have their tax ID populated instead, they must choose their provider from the "Express Entry" option.

Availability

- Allow 24 hrs for the aTypical provider name will appear in the "express entry" option in the Eligibility and Benefits and Professional Claim transactions.
- aTypical providers will only be able to verify Eligibility under "Eligibility and Benefit Inquiry" (1st screen shot below) and submit electronic claims under "Professional Claims" (2nd screen shot below)

Availity

Availity/Access Channel Contacts

A dedicated team of BCBSNM Provider Education Consultants is available to provide customized training for your organization as well as answer any additional questions that you may have about electronic issues.

Please email your questions or request to PECS@bcbsnm.com. They should respond within 24 hours.

- BCBSNM will also be offering an Availity Workshop on March 25-26.
- Atypical providers – if you'd like a tip sheet on using Availity (currently in process), please email the Access Channel.

Other Options

Electronic Refund Management (eRM) is an online tool that centralizes a provider organization's refund management and reconciliation process. It is accessible through the Availity portal.

Advantages of using eRM:

- Receive electronic notifications of overpayments
- View detailed overpayment requests
- Inquire/Dispute/Appeal a request
- Deduct from future payments or pay by check
- Submit unsolicited refunds
- Receive check alerts

Note: BCBSNM offers complimentary training webinar's for eRM every week. Visit our website at www.bcbsnm.com to register for your session today!

Other Options

The first time Refund Management-eRM is accessed, users will be prompted to complete and submit a brief onboarding form.

User's will receive a validation email approving their access within 24 hours.

- Eligibility and Benefits
- Claims Management**
 - Claim Status Inquiry
 - Professional Claim
 - Facility Claim
 - Claim Reserach Tool
 - Claim Reconciliation Tool
 - Refund Management-eRM**
- Availity Payer List
- Enrollments
- My Account
- Administrative Reporting
- Payer Support

[Home](#) [eRM](#) [Close Window](#)

Home

Onboarding Form

Completion and sign off of the Onboarding Form indicates the provider's agreement that their designee has financial authorization to request and approve the issuance of refund checks and/or automated offsets from the provider's claim payment advice. Agreement and sign off also indicate that the on-line notification will be the primary notice of overpayments due HCSC and thereby waive mandated written notification requirements for overpayments.

If you have already submitted this form, please email ermonboardingfinancialoperations@bcbsil.com for information regarding the status of your request.

Provider Details

* = required

Provider Name*	<input type="text"/>
BCBS Plan*	<input type="text"/>
UPP Provider*	<input type="text"/>
Authorized By (Name/Title)*	<input type="text"/>
Primary Contact #*	<input type="text"/>
Primary Contact Extension #	<input type="text"/>

User Details

User Name*	<input type="text"/>
User Type*	<input type="text"/>
Contact #*	<input type="text"/>

Other Options

The Refund Requests tab will allow user's to efficiently handle their overpayment reconciliations in one centralized location.

Home

eRM

Welcome, Cristy's Test

Logout

Financial Management

System Bulletin
 Thank you for joining eRM, the on-line interactive tool helping providers simplify the reconciliation process. You are cordially invited t.... [more..](#)

Create and Submit Refund to HCSC
 If you've identified a credit balance regarding a claim payment for which no related RFCRs are submitted in the section below, please submit the refund by clicking on "[CONTINUE](#)".

Refund Requests

InBox

Claim Inquiry Resolution

Check Alerts

Saved Sessions

Checks Not Received

Transaction Report

Maintenance Alerts

New

Open

In Process

Closed

All

	Request ID Assign To	Patient Account	Patient	Service From Date	Service To Date	Amount Request Amount	Balance	Description	Paid Amount	Charges	IPI	Created
<input type="checkbox"/>	00J2990011	000000000000000000	J DOE	02/01/2013	02/01/2013	100.00	100.00	Cancelled Member	100.00	100.00	1203245985	04/25/2013

Deduct from UPP Statement

Deduct from Future Payment (Recoup)

Pay by Check

Dispute

Appeal

Export

Refresh

Print

Other Options

- Electronic Remittance Advice (ERA) is your claims payment and remittance information. (HIPAA compliant, can be automatically posted to your patient accounting system, increases accuracy compared to manual data process)
- Electronic Payment Summary (EPS) is an electronic version of the Provider Claim Summary (PCS). The EPS arrives faster and easy to archive.
- Any cost? BCBS NM does not charge for set up or delivery of the ERA to your mailbox on the Availity portal. However, you may incur fees for translation software, or, if you have designated a billing agent to receive the ERA on your behalf, they may charge a fee to deliver your files to you. If you utilize a software vendor, billing service or clearinghouse, it is very important to contact them so that you are aware of any fees for products or services they provide.