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## CLAIM EDI Version 10.1

**Claim EDI** is a utility program to load Professional claims (837P) and Institutional claims (837I) from ANSI files (both 4010 and 5010 standards) into the Plexis Claims Manager™ (PCM) system. After the claims are loaded, Member, Provider and Facility information is validated against the information within PCM. Manual corrections can be made if any incorrect or missing information is flagged. After validation has been completed the claims are then exported into the PCM system for processing.

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## REQUIREMENTS

**Claim EDI 10.1** requires the following:

- Operating Systems:
  - Windows XP SP 3
  - Windows 7
- .NET Framework Version 2.0
- Plexis Claims Manager version 7.0 or later
- EDIDev Framework Runtime version 5.5
- A live internet connection to ABCT.COM in order to validate licensing.

## Installation page

Select the Claim EDI link to go to the installation page.

The screenshot shows the ABCT Inc. website interface. At the top, the logo for ABCT INC. Management Services is displayed. Below the logo is a navigation menu with links for Home, About Us, Affiliates, and Links. A user is logged in as APLAN, with a Logout link. The main content area features a sidebar with a link to Applications. The central content displays the following information:

**Name:** Claim EDI  
**Version:** 10.0.0.37  
**Publisher:** ABCT Inc.

The following prerequisites are required:

- .NET Framework 2.0

If these components are already installed, you can [launch](#) the application now. Otherwise, click the button below to install the prerequisites and run the application.

[Install](#)

At the bottom of the page, there is a copyright notice: Plexis Claims Manager™ is a Trademark of Plexis Healthcare Systems. Encoder-Plus for 95XPTM is a Trademark of Micro-Dyn Medical Systems, Inc. Copyright © 2010, ABCT, Inc. All Rights Reserved.

## Login page

The ABCT.com page has your license information available to you. Login using the Username and Password that were supplied to you by ABCT.

**ABCT INC.**  
Management Services

Home About Us Affiliates Links

**ABCT Applications:** ABCT Programming & Development has used Plexis Healthcare Systems software for claims processing many years. We have developed several useful utilities that we have made available for evaluation and purchase by other users of Plexis Claims Manager™.

Login  
Name:   
Password:

**Download Demo Applications**

You may download any of these applications for evaluation purposes. Each program is limited in some way for evaluation. Once purchased, a License Key will enable full functionality. If you desire to purchase them, please contact ABCT Programming & Development at, or by sending an email to [ABCTDevelopers@abct.com](mailto:ABCTDevelopers@abct.com).

- [Claim EDI](#)
- [Fee Schedule Loader](#)

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Encoder-Plus for 95/XP™ is a Trademark of Micro-Dyn Medical Systems, Inc.  
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## Applications Page

This page lists the available applications, and show which you are licensed to use and the date of expiration of that license.



The screenshot shows the ABCT INC. Management Services website. The header features the ABCT INC. logo with 'Management Services' underneath. A navigation menu includes 'Home', 'About Us', 'Affiliates', and 'Links'. A user is logged in as 'APLAN' with a 'Logout' link. The main content area is titled 'ABCT Applications:' and includes a 'Change Your Password' link. A section titled 'Download Demo Applications' provides instructions on how to use demo applications and contact information for purchasing. A list of applications is shown, including 'Claim EDI' (licensed) and 'Fee Schedule Loader'. The footer contains trademark information for Plexis Claims Manager and Encoder-Plus for 95XPTM, and a copyright notice for 2010.

[License Keys](#)

**Download Demo Applications**

You may download any of these applications for evaluation purposes. Each program is limited in some way for evaluation. Once purchased, a License Key will enable full functionality. If you desire to purchase them, please contact ABCT Programming & Development at, or by sending an email to [ABCTDevelopers@abct.com](mailto:ABCTDevelopers@abct.com).

- [Claim EDI](#) You are a licensed user. License Expires [7/1/2011]
- [Fee Schedule Loader](#)

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Encoder-Plus for 95XPTM is a Trademark of Micro-Dyn Medical Systems, Inc.  
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- Applications

## License Keys

This page shows your licensed applications and the license information to enable full functionality.

The screenshot displays the ABC INC. Management Services web interface. At the top, the logo for ABC INC. is shown with the text "Management Services" below it. A navigation menu includes links for Home, About Us, Affiliates, and Links. A user is logged in as APLAN, with a Logout link. The main heading is "Application License Key Information". On the left, there is a link for "Applications". The main content area is titled "Registered License Keys" and contains a section for "Claim EDI" with the following details:

Licensed To:	Amazing Health Plan
User:	APLAN
License Date:	7/1/2011
Authorization Key:	7fa44b2e4525284007c517c998ec83aa

At the bottom of the page, there is a footer with the following text: "Plexis Claims Manager™ is a Trademark of Plexis Healthcare Systems. Encoder-Plus for 950XPTM is a Trademark of Micro-Dyn Medical Systems, Inc. Copyright © 2010, ABC, Inc. All Rights Reserved."

- License Keys

## CONFIGURATION

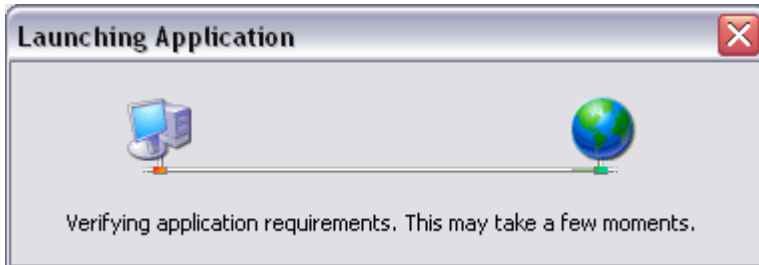
### Configure Plexis Claims Manager

In Plexis Administrator, set your permissions to allow you to import/export information.

- In Plexis Administrator, Click on Components, then Edit System Tables
- Choose Table Batch Code Assignments
- User Name/Login – Network or SQL Username
- Batch Code – user initials
- Select Batch Types – Configure the user for CLAIM IMPORT

## LAUNCH *Claim EDI*

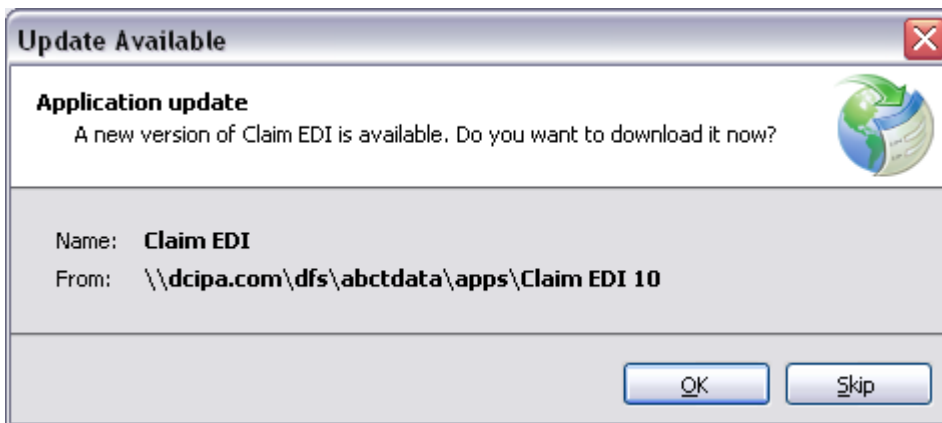
Start **Claim EDI** (in All Programs > ABCT Inc). When **Claim EDI** is first launched, the following dialog will appear. At this point, Claim EDI is checking for updates.



- Launching Claim EDI

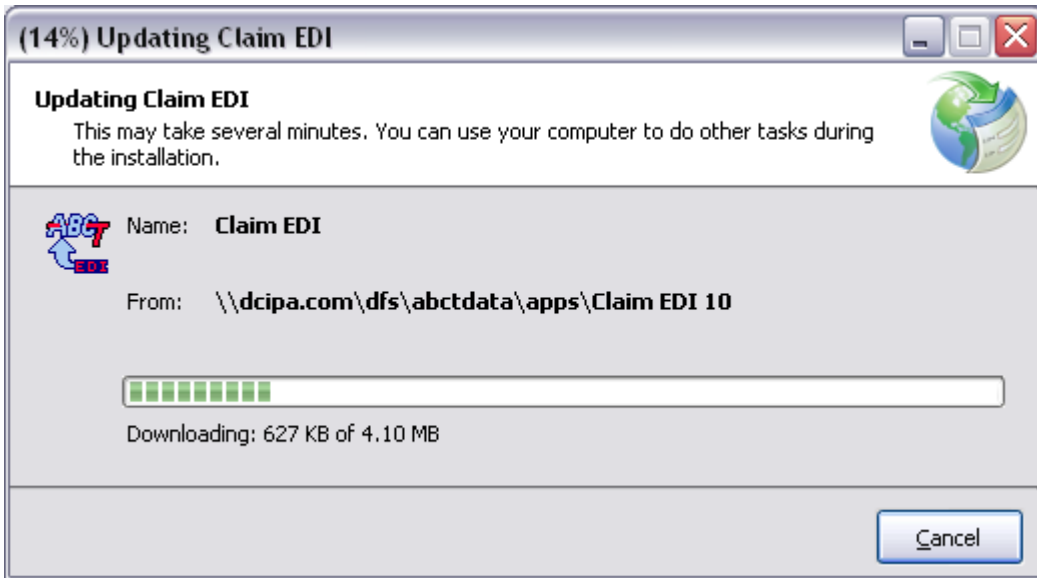
## UPDATE *Claim EDI*

If **Claim EDI** has been updated, the following confirmation dialog will appear. The user should almost always choose OK here.



- Application Update Dialog

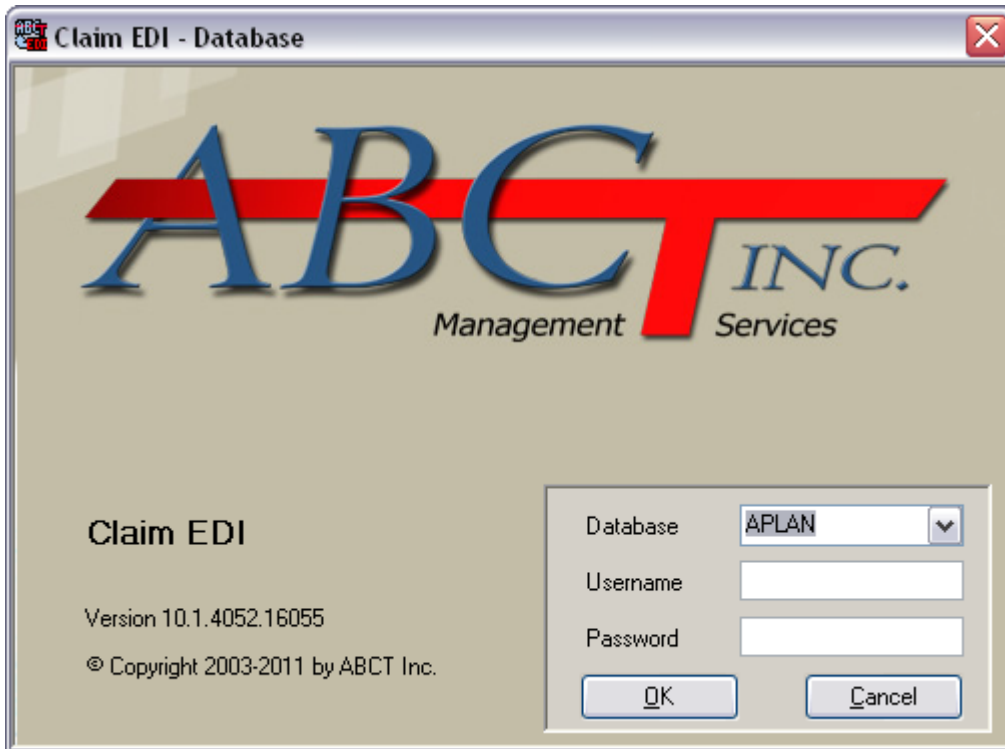
When OK is selected, the following dialog shows update progress.



- Update Progress Dialog

## Database Connection

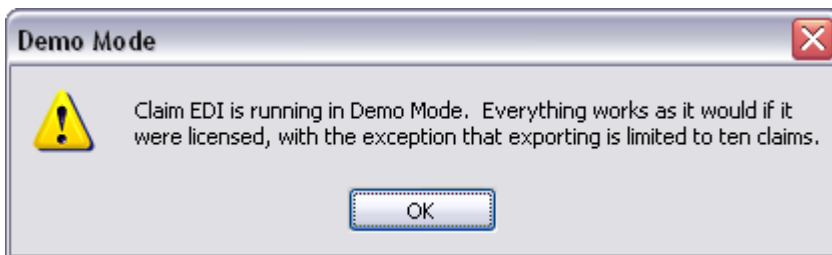
This dialog allows you to select the database you wish to work with, entering logon information if not using Windows Authentication. Click OK



• Database Connection Dialog

## Demo Mode

If **Claim EDI** has not been registered you will get the Demo Mode warning after you connect to a database. If you have purchased a license, see ABOUT > License Information for details of enabling the full functionality of **Claim EDI**.



• Demo Mode Warning

# DATA

After database selection, the main form is displayed with the **Data** tab active.

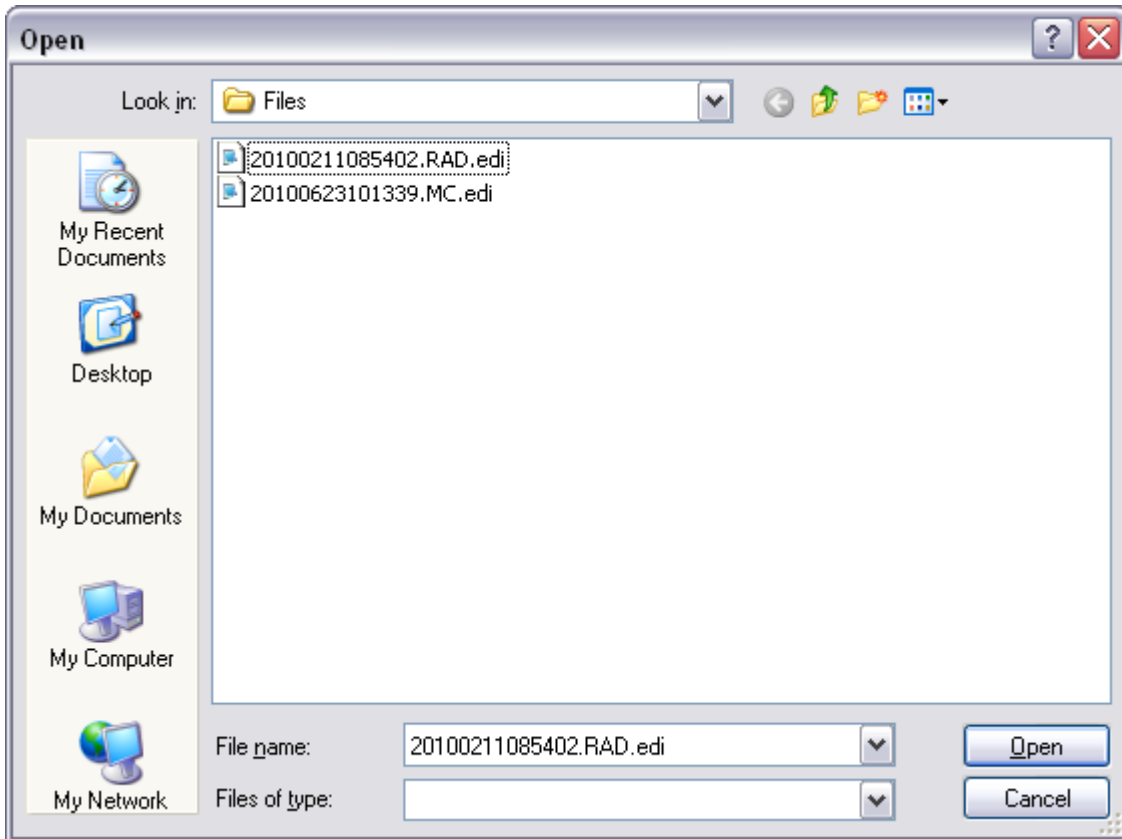
The screenshot shows a Windows-style application window titled "Claim EDI version 10.1.4052.16055". The window has a menu bar with the following items: Data (selected), Claims, Export, 837 File, Settings, and About. Below the menu bar is a "File" button. The main area contains several input fields:

Database	pcm_APLAN	
Date Received	02/11/2010	
File Type	ANSI X12N 837	004010X098A1
File Name	20100211085402.RAD.edi	
File Path	C:\Files\20100211085402.RAD.edi	

- Data Tab

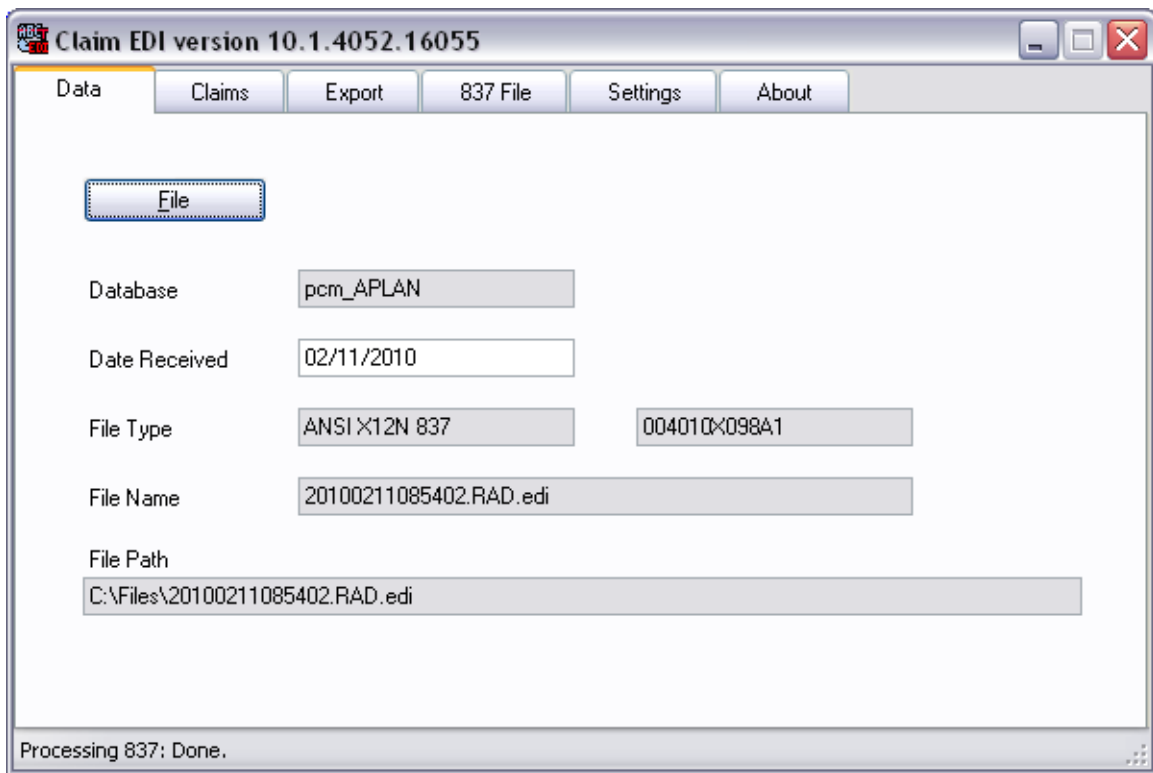
## Importing Claims

Select the File button, which opens a standard File Open dialog. Select a claim file to be imported into the **Claim EDI** working (local) database.



- Open File Dialog

Claim EDI will load the 837 file, show the user the progress in the status bar, and display the Processing 837: Done message when complete. The tab fields are updated to show the data relevant to the file just loaded.

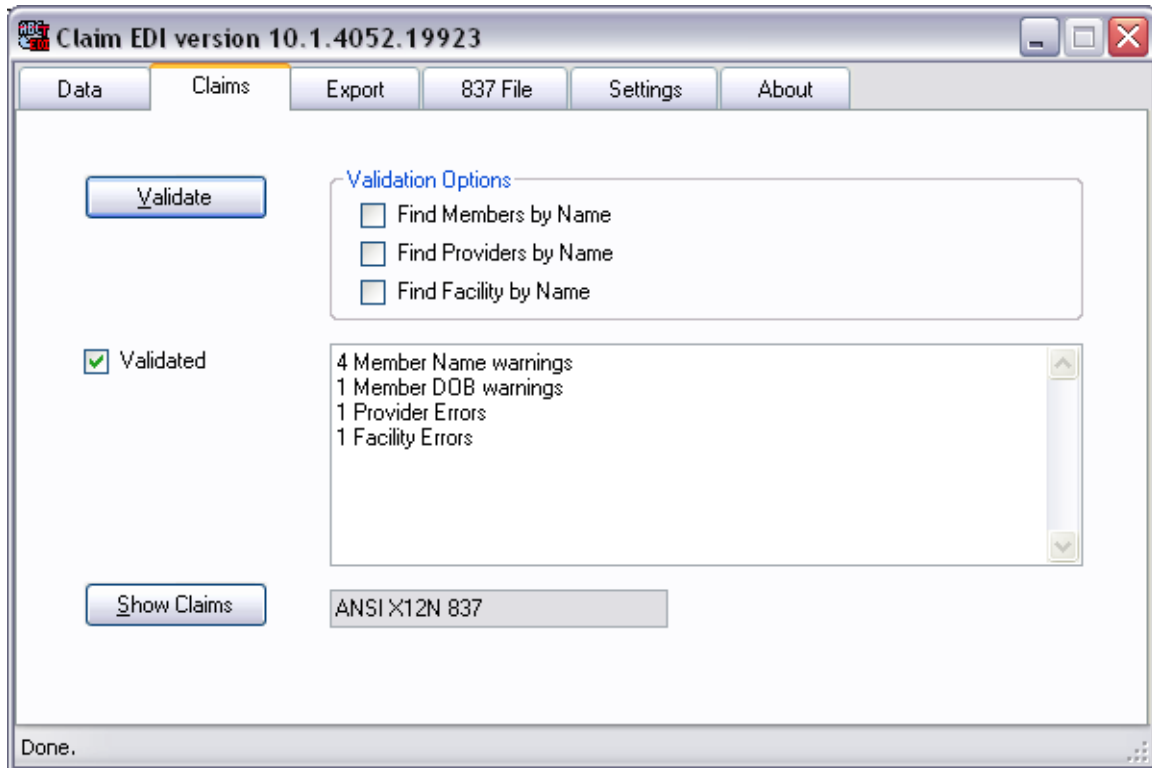


- File information

# CLAIMS

## Validate

In the **Claims** tab, the **Validate** button will run a series of checks on the claims. In the text box will be displayed a summary of warnings and errors.



### • Claims Tab

**Claim EDI** validates the member, provider and facility information, as well as some other data, on each claim.

### *Member Validation*

**Claim EDI** will attempt to find the member by Id. If not found, and **Find Member by Name** is checked, the member is searched for by name (last, first and middle). If not found, a **Member not found** error is reported. If the member was found, then a warning is generated if the last or first name on the claim does not match that in PCM, or if the date of birth (DOB) does not match.

### *Provider Validation*

**Claim EDI** will attempt to find the providers by Id, either NPI or a second Id (which are matched to the TAG in PCM). If not found, and **Find Provider by Name** is checked, the provider is searched for by name (last, first and middle). If the provider is still not found, a **Provider not found** error is reported. This validation step applies to the rendering, billing, referring, attending, operating and other providers on the claim.

### *Facility Validation*

**Claim EDI** will attempt to find the facility by Id, either NPI or a second Id (which are matched to the Id in PCM). If not found, and **Find Facility by Name** is checked, the facility is searched for by name. If the facility still cannot be found, a **Facility not found** error is reported.

### *Other Validation*

Claim EDI will assure that the value codes on a UB04 are valid and that the amounts are numeric. A warning is reported if the code or amount is not valid.

An attempt is made to identify the plan line from the payer group using the Payer (Plan Aliases) option. If the payer can be identified, that line will be loaded into the top payer line in PCM.

### *Note*

Provider and Facility Names are “normalized” by removing spaces and hyphens, so a name part like “Smith-Jones” will match “Smith Jones”. This helps to avoid mismatches caused by small variations in spelling or punctuation from different providers.

## Show Claims

Click on **Show Claims** to bring up the corresponding form for the file type (HCFA or UB04). The claim below has a member name Warning that the name on the claim does not match the name in PCM (Charley instead of Charles). Note how the Patient information group is highlighted, and the specific field that needs attention, first name, is highlighted.

Error and Warning messages, when they occur for a claim, will be shown at the bottom of the Claim form. The errors and warnings are highlighted on the form. The user can quickly move to the claim with the next or previous error using **Error >** for next or **< Error** for previous.

HCFA Claim
[-] [X]

Claim UD  Received 2/11/2010

DLN   Clean

Place of Service 22

Invoice #

Statement Dates 1/26/2010 1/26/2010

2 Patient SCHULTZ **CHARLEY**

5 Address 333 COURT CT  
ROSEBURG OR 97470

3 Birth 1/2/1934 Sex M

Member ID 107033  107033 7033

11. Rel to Employment

12. Rel to Auto

13. Rel to Other

14. Other Plan

15. Same Similar

16. Unable to Work

18. Hospitalization Dates 1/26/2010

23. Prior Authorization

25. Tax ID 998877665

26. Account # 890774

17. Referring JONES FRED

17a. Other

17b. NPI 1223344556  1223344556

21. DIAGNOSIS CODES

1. 7859	3. 43330	5. <input type="text"/>	7. <input type="text"/>
2. 43310	4. <input type="text"/>	6. <input type="text"/>	8. <input type="text"/>

From Date	To Date	POS	TOS	Proc Code	Mod 1	Mod 2	Mod 3	Mod 4	Dx 1	Dx 2	Dx 3	Dx 4	NDC	Charges	Units	NPI	COB
1/26/2010	1/26/2010	22		93880	26				1	2	3		12-345	\$107.00	1.00		

32 Facility MEDICAL CENTER, INC  
100 PARKWAY AVE  
ROSEBURG OR 97470

32a. NPI 1234567890

32b. ID

33. Billing Provider ANDERSON JOHN

PO BOX 111  
ROSEBURG OR 97470

33a. NPI 1334455667

33b. Other

Member First Name does not match: Charles

<< < <<Error
1 of 36
Error>> > >>

• HCFA Claim Form

**UB 04 Claim**

Part 1 Part 2

Claim UD  1 Received 6/23/2010  
 DLN 1837=20100623101339.M View Clean

3a. PAT X1234567 4. TYPE OF BILL 131  
 b. MED 9999999  
 6. STMT COV 6/14/2010 6/14/2010

1 Provider MEDICAL CENTER INC  
 PO BOX 123  
 ROSEBURG OR 97471  
 5 Tax ID 912345678  
 Provider ID 381234  
 NPI 1234567890

8 Patient MONROE NORMA J  
 9 Address 123 MAIN ST  
 ROSEBURG OR 97470  
 10 Birth 1/1/1931 11 Sex F  
 Member ID 105850

ADMISSION 12 DATE 13 HR 14 TYPE 15 SRC 16 DHR 17 STAT 18 19 20 21 22 23 24 25 26 27 28 29 ACDT STATE 30

31 OCCURRENCE CODE	32 OCCURRENCE DATE	33 OCCURRENCE CODE	34 OCCURRENCE DATE	35 OCCURRENCE SPAN CODE	35 OCCURRENCE SPAN FROM	35 OCCURRENCE SPAN THROUGH	36 OCCURRENCE SPAN CODE	36 OCCURRENCE SPAN FROM	36 OCCURRENCE SPAN THROUGH
11	6/14/2010								

38 Facility MEDICAL CENTER INC  
 PO BOX 123  
 ROSEBURG OR 97471  
 Facility ID 381234 NPI 1234567890

39 VALUE CODES CODE	39 VALUE CODES AMOUNT	40 VALUE CODES CODE	40 VALUE CODES AMOUNT	41 VALUE CODES CODE	41 VALUE CODES AMOUNT

42. Rev. Code	44. HCPCS	Mod 1	Mod 2	Mod 3	Mod 4	NDC	45. From Date	45. To Date	46. Units	47. Charges	NPI
R250							6/14/2010	6/14/2010	2.00	\$99.60	
R300	80053						6/14/2010	6/14/2010	1.00	\$55.00	
R300	82150						6/14/2010	6/14/2010	1.00	\$33.00	
R300	83690						6/14/2010	6/14/2010	1.00	\$46.00	
R300	85025						6/14/2010	6/14/2010	1.00	\$70.00	

<< < <<Error 1 of 30 Error>> > >>

• UB04 Claim Form

## Find Forms

### *Member Find Form*

Member ID search is by Last Name or by Member ID.

The screenshot shows a window titled "Find Member" with search criteria: Last Name: SCHULTZ, First Name: CHARLEY, Member ID: 107033. The results table is as follows:

	Last	First	MI	DOB	Eff	Term
	Schultz	Alpha		9/1/1921	3/1/2009	12/31
	Schultz	Alpha		9/1/1921	1/1/2010	12/31
	Schultz	Alpha		9/1/1921	1/1/2011	
	Schultz	Beta		3/24/1928	1/1/2011	
▶	Schultz	Charles		1/2/1934	1/1/2009	12/31
	Schultz	Charles		1/2/1934	1/1/2010	12/31
	Schultz	Charles		1/2/1934	1/1/2011	

• Member Last Name Search

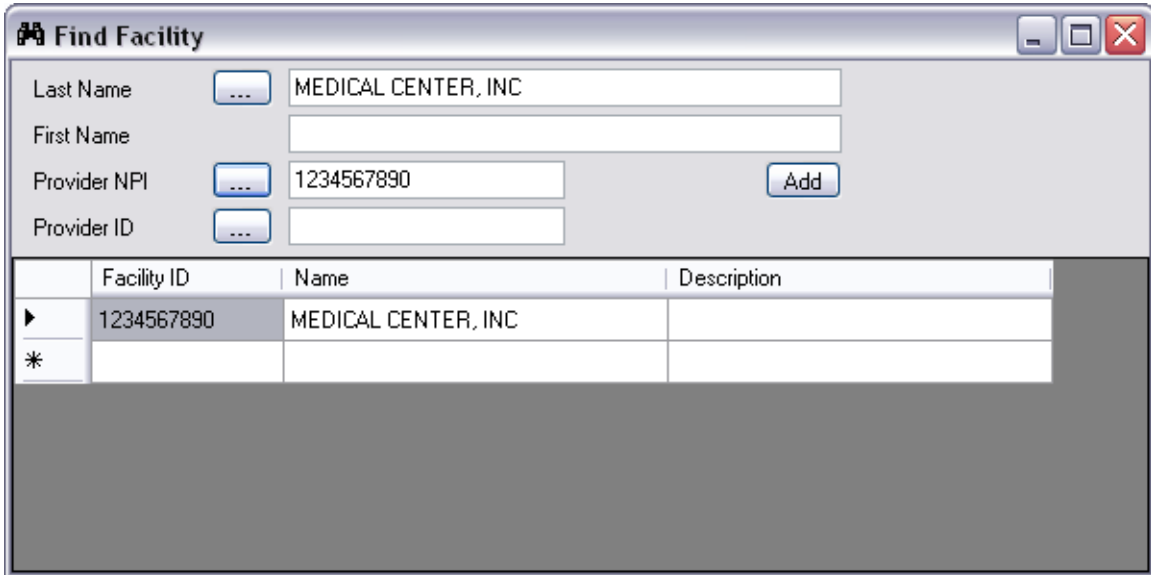
The screenshot shows the same "Find Member" window with search criteria: Last Name: SCHULTZ, First Name: CHARLEY, Member ID: 107033. The results table is as follows:

	Last	First	MI	DOB	Eff	Term
▶	Schultz	Charles		1/2/1934	1/1/2009	12/31/20
	Schultz	Charles		1/2/1934	1/1/2010	12/31/20
	Schultz	Charles		1/2/1934	1/1/2011	

• Member ID Search

If there are errors on the Member ID or Member Name, clicking on the button next to the problem, you will be able to search by ID or Last Name.

### Provider Find Form



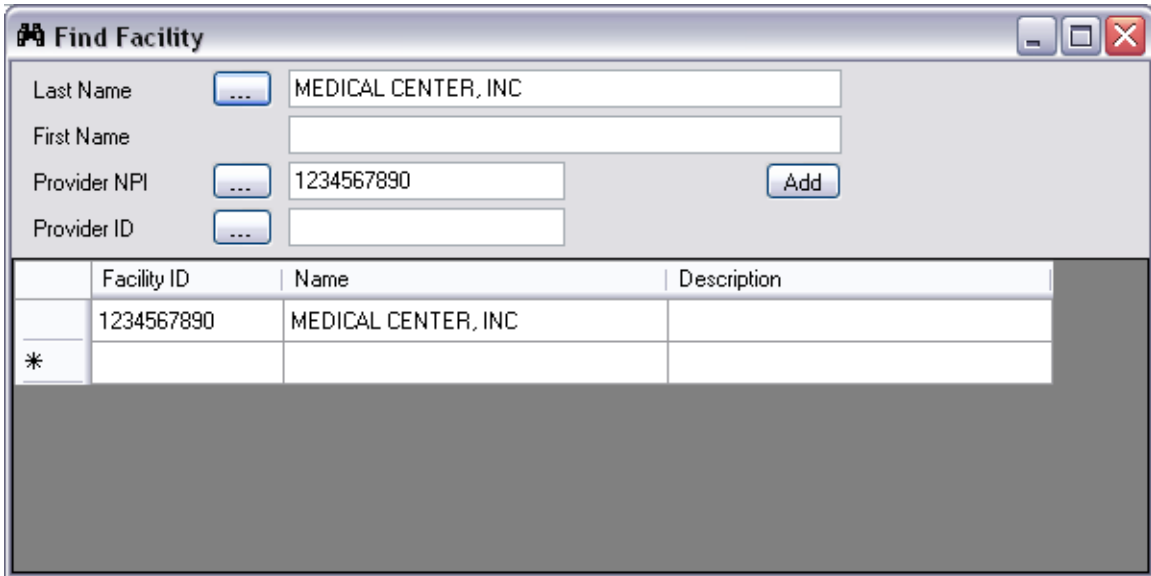
	Facility ID	Name	Description
▶	1234567890	MEDICAL CENTER, INC	
*			

- Provider Find Form

Searching for Provider can be by Name, NPI, or Provider ID. When you find the correct provider, double click the line with the correct Provider ID and it will be placed in the claim.

If the Provider is not in your database, you can add the provider from this form using the Add button.

### Facility Find Form



	Facility ID	Name	Description
▶	1234567890	MEDICAL CENTER, INC	
*			

- Facility Find Form

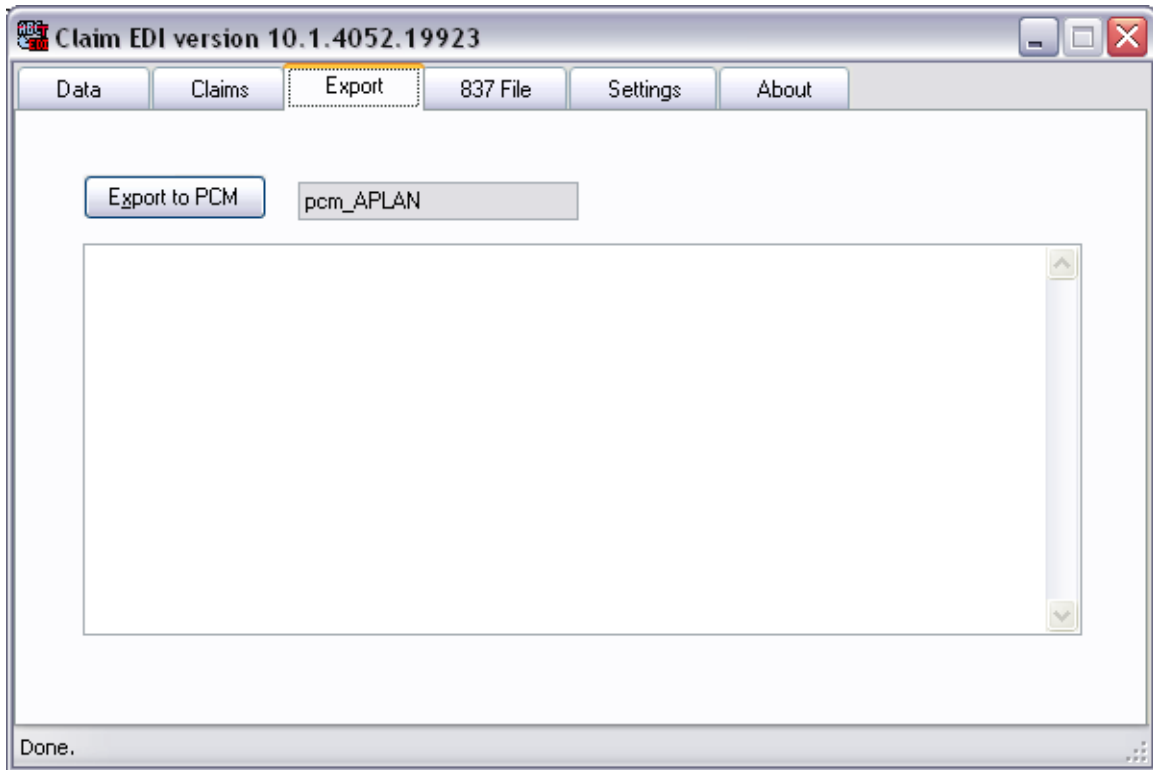
Searching for Facility can be by Name or Facility NPI or other ID. When you find the correct facility, double click the line with the correct Facility ID and it will be placed in the claim.

If the Facility is not in your database, you can add it from this form using the Add button.

## EXPORT

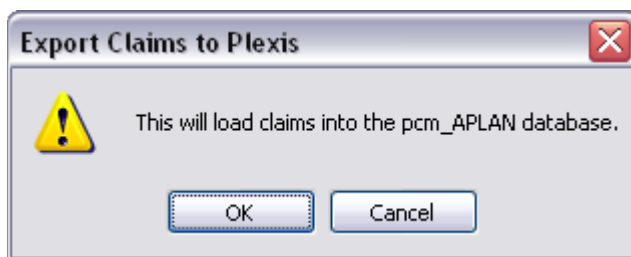
When satisfied with the claims loaded, and corrected, if necessary, export Claims into Plexis Claim Manager.

### Export to PCM



- Export Tab

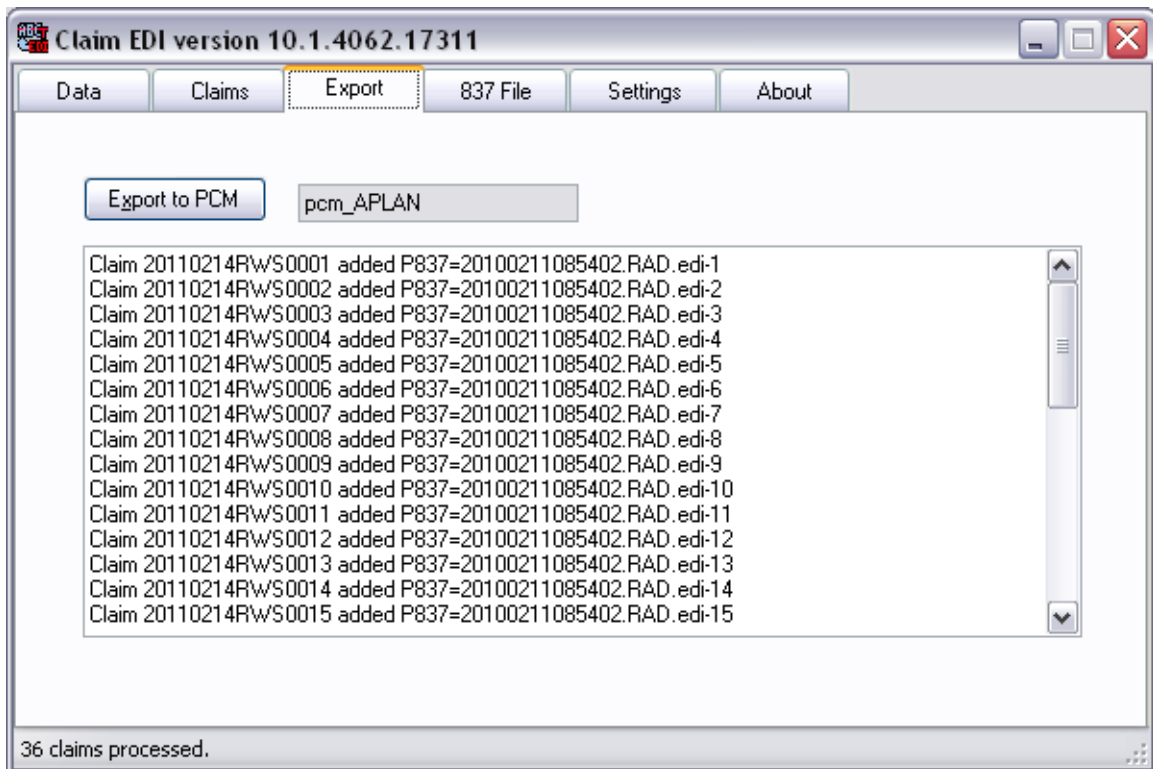
Click on Export to PCM to begin the process to load claims into your PCM system.



- Confirmation Dialog

You will be given a confirmation dialog as a final check that the file is ready to be exported to PCM.

## Claim Export Summary



- Claim Export in progress

Claim loading information will be displayed in the text box. In the status bar there will be a display of the number of claims loaded and number of errors – if any.

## Export Log File

A log file will be created coinciding with the filename. The log file will show the transaction date, the time of exporting file into PCM, each Claim number and an error message, if any.

```
20100211085402.RAD.edi.log *
Wednesday, February 02, 2011 1:43:40 PM - Import Claims into
Plexis Database pcm_APLAN
-----
Claim 20110202RWS0001 added P837=20100211085402.RAD.edi-1
Claim 20110202RWS0002 added P837=20100211085402.RAD.edi-2
Claim 20110202RWS0003 added P837=20100211085402.RAD.edi-3
Claim 20110202RWS0004 added P837=20100211085402.RAD.edi-4
Claim 20110202RWS0005 added P837=20100211085402.RAD.edi-5
Claim 20110202RWS0006 added P837=20100211085402.RAD.edi-6
Claim 20110202RWS0007 added P837=20100211085402.RAD.edi-7
Claim 20110202RWS0008 added P837=20100211085402.RAD.edi-8
Claim 20110202RWS0009 added P837=20100211085402.RAD.edi-9
Claim 20110202RWS0010 added P837=20100211085402.RAD.edi-10
Claim 20110202RWS0011 added P837=20100211085402.RAD.edi-11
Claim 20110202RWS0012 added P837=20100211085402.RAD.edi-12
Claim 20110202RWS0013 added P837=20100211085402.RAD.edi-13
Claim 20110202RWS0014 added P837=20100211085402.RAD.edi-14
```

- Claim Export Log File

## Export Technical Details

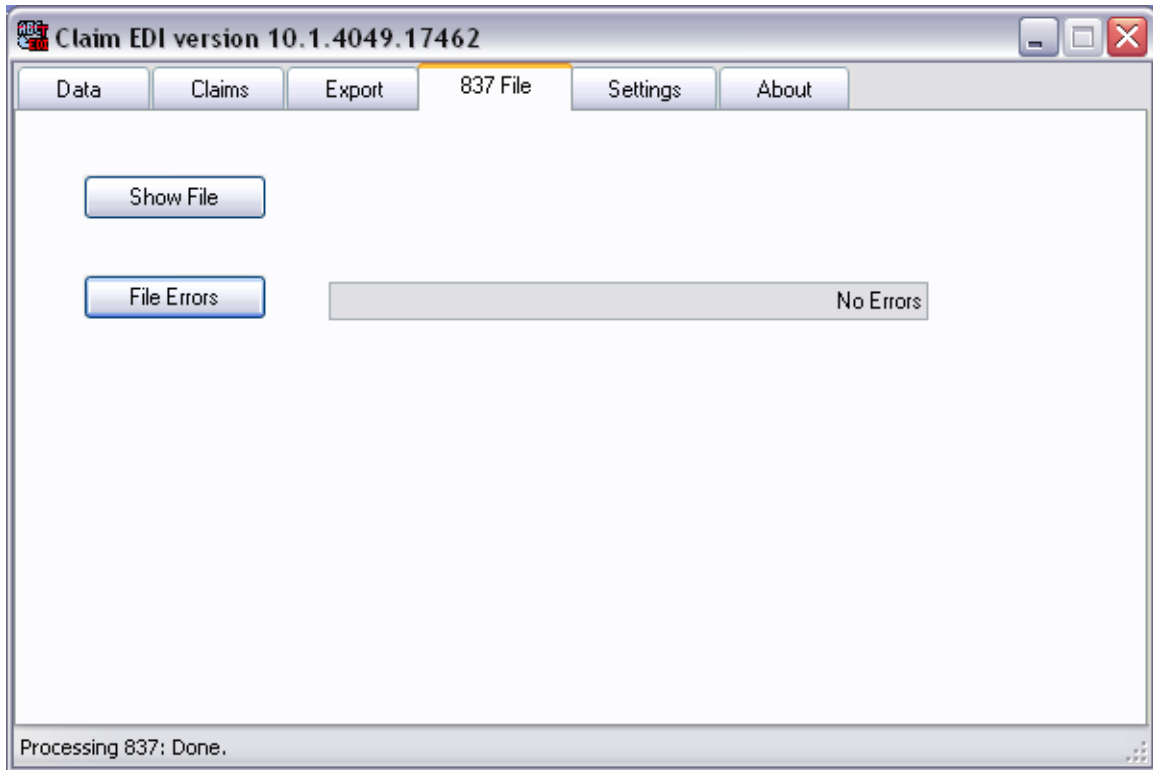
Most data is loaded into the standard locations in Plexis Claims Manager. Exceptions are:

- Procedure line NDC loaded into the TPA Check Number field.

## 837 FILE

### Show File

The Show File button will process the 837 file, and display a window showing a nicely formatted, annotated view of the raw file.



- 837 File Tab

## Formatted File Display

The **Show File** button will display formatted file content, with description of file segments on the right hand side. This is useful if you need to look at the unprocessed source data.

The screenshot shows a window titled "20100211085402.RAD.edi". The left pane contains EDI data with segments like ISA, GS, ST, BHT, REF, NM, PER, HL, SBR, DMG, CLM, DTP, HI, PRV, NM, SV, DTP, REF, and LIN. The right pane lists descriptions for these segments, such as "Interchange Control Header", "Functional Group Header", "Transaction Set Header", "Beginning of Hierarchical Transaction", "Reference Identification", "Individual or Organizational Name", "Administrative Communications Contact", "Pay-to Provider Loop", "Billing Provider", "Address Information", "Geographic Location", "Employer ID Number", "Subscriber Loop", "Subscriber Information", "Subscriber", "Address Information", "Geographic Location", "Demographic Information", "Individual or Organizational Name", "Address Information", "Geographic Location", "Claim #1", "Admit Date, Hour", "Health information Principal Diagnosis Diagnoses", "Referring Provider", "Provider Information", "Rendering Provider", "Provider Information", "Facility", "Address Information", "Geographic Location", "Service Line #1", "Professional Service", "Date of Service", "Reference Identification", "Item Identification", and "Subscriber Loop".

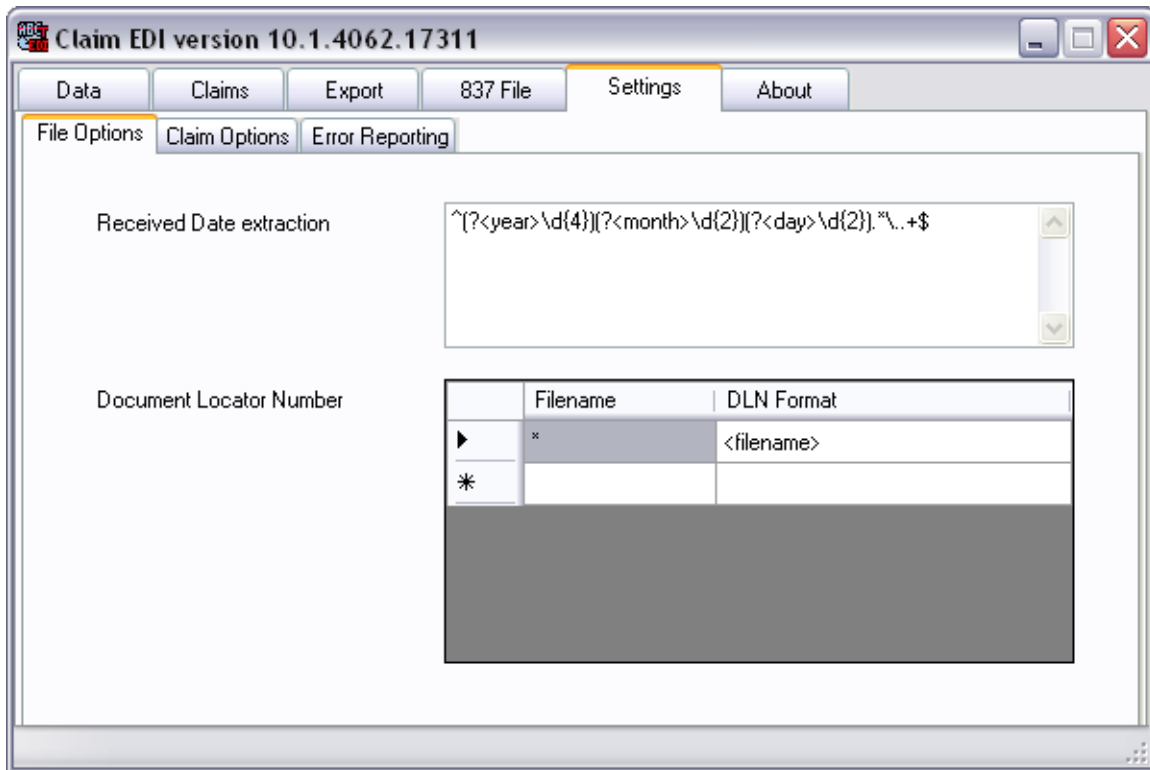
- Formatted File Display

## File Errors

If file errors occur, by clicking on the file error button, line by line information will be displayed helping in determining problems with the provider's file.

## SETTINGS

### File Options



- File Options

#### *Received Date Extract*

If desired, one or more Regular Expressions may be defined to extract the Received Date from the filename. For instance, if your filename is in the format **YYYYMMDDHHMMSS\_Provider.edi**, where the first part of the filename is the date received, the text box can be automatically populated using the following Regular Expression:

```
^[?<year>\d{4}][?<month>\d{2}][?<day>\d{2}].*\..edi$
```

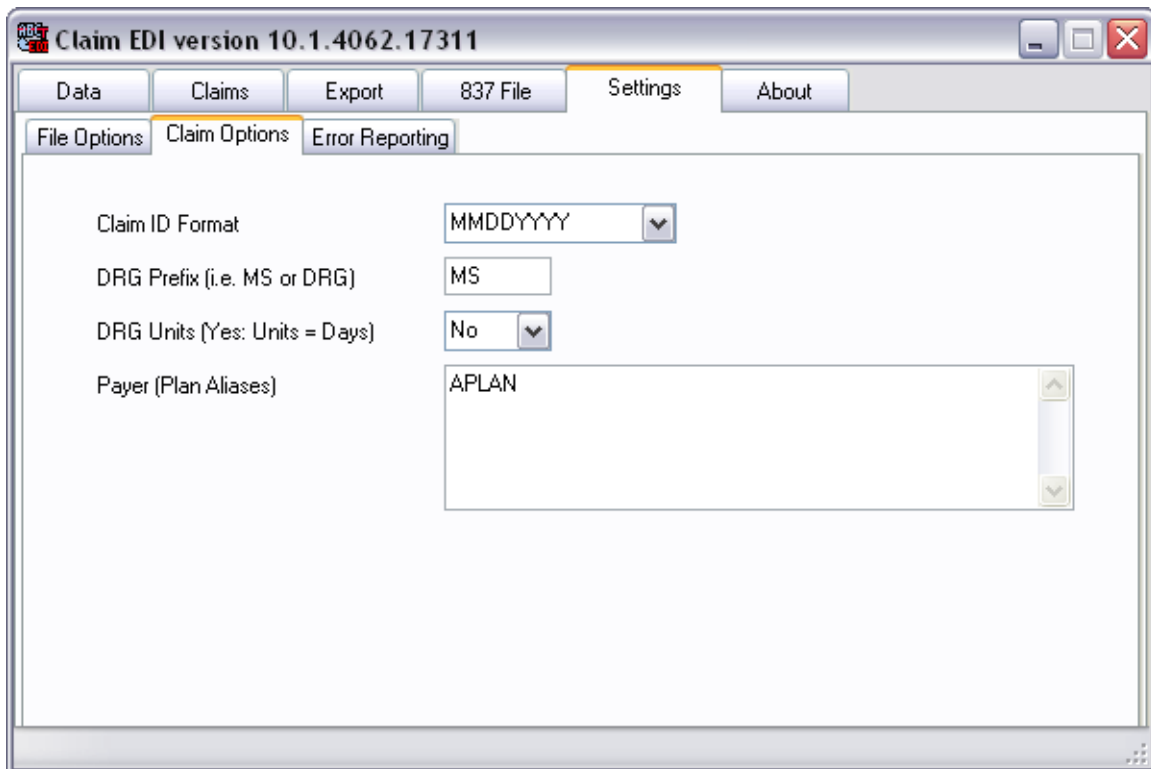
Explanation of how to write a Regular Expression is beyond the scope of this document. For helpful samples and specification, see <http://msdn.microsoft.com/en-us/library/hs600312.aspx>

If you need assistance, please contact [support@abct.com](mailto:support@abct.com).

#### *Document Locator Number*

To do...

## Claim Options



- Settings: Claim Options

### *Claim ID Format*

Standard claim number format for PCM is **MMDDYYYY**. Don't select the other option without technical assistance.

### *DRG Prefix*

Set the prefix for DRG used in your PCM system. For instance, if your codes are defined as **MSDRG001**, put MSDRG in this field.

### *DRG Units*

If set to **Y**, the units in a DRG line will be set to the number of days difference of the statement covers dates. Otherwise, units will be 1 in the DRG line.

### *Payer*

The payer field allows you to define various text that providers might use when sending you claims. You can put multiple options in separated by a comma. For example, if your plan is named Amazing Plan, and commonly abbreviated APLAN, putting "Amazing, APLAN" into this field will set Claim EDI to match a payer line (in a UB04) containing either the word Amazing or APLAN as the primary payer line.

## Error Reporting

This tab is where you would set up error reporting if you wish to use that feature.

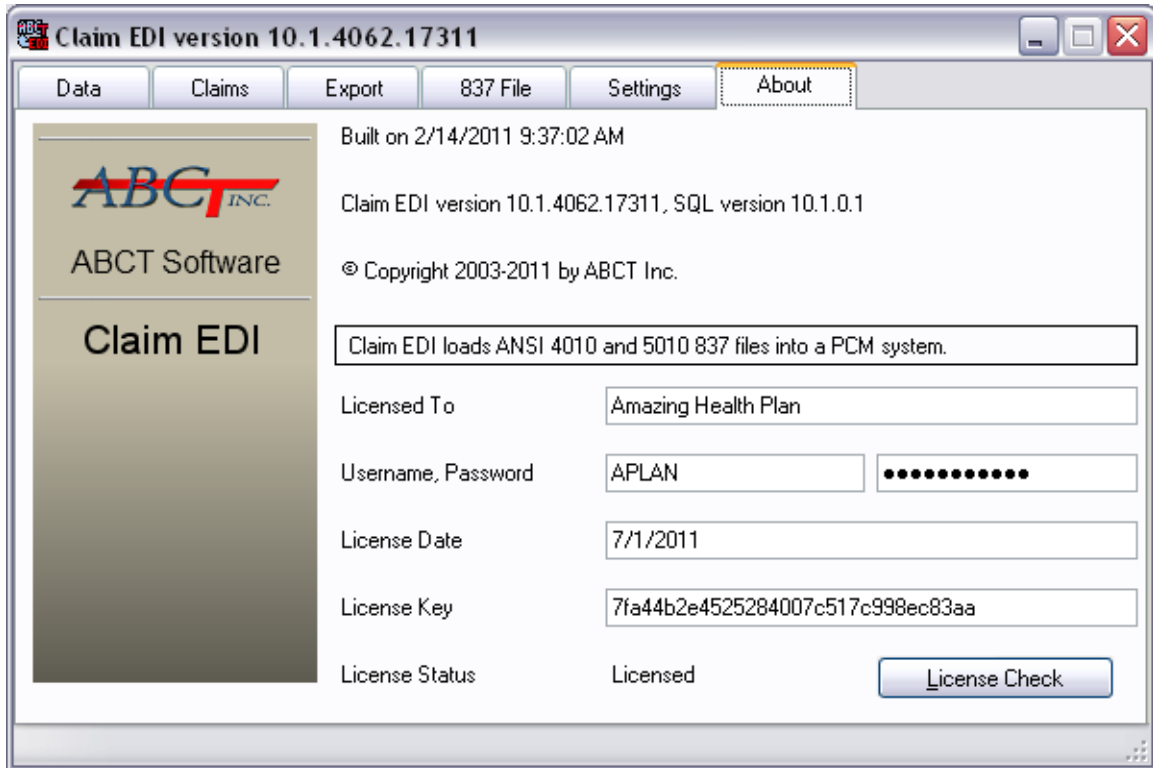
The screenshot shows a Windows-style application window titled "Claim EDI version 10.1.4062.17311". The window has a menu bar with "Data", "Claims", "Export", "837 File", "Settings", and "About". Below the menu bar, there are three sub-tabs: "File Options", "Claim Options", and "Error Reporting", with "Error Reporting" being the active tab. The main content area contains the following fields and a button:

Your Email (send error reports from)	<input type="text" value="me@aplan.com"/>	<input type="button" value="Test Error"/>
Error Email (send error reports to)	<input type="text" value="help@abct.com"/>	
Smtp Server (mail.example.com)	<input type="text" value="mail.aplan.com"/>	
Smtp Account (DOMAIN\User)	<input type="text" value="APLAN\mailacct"/>	
Smtp Password	<input type="password" value="••••••••"/>	

- Settings: Error Reporting

# ABOUT

## License Information



- About and License Information

If you have purchased **Claim EDI**, your license information will be sent to you by ABCT, Inc. It is also available on our website.

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