

How to Find and View Claims

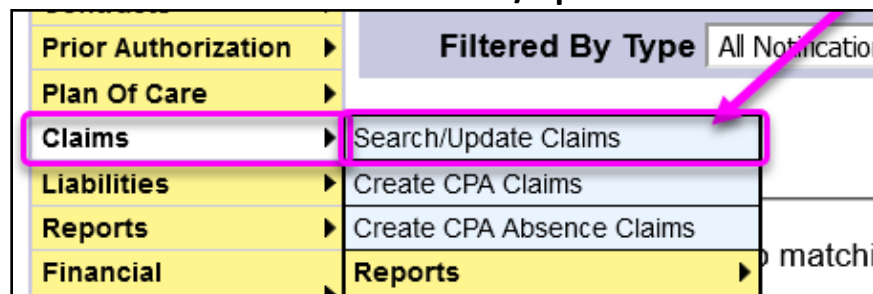
The **Claims Search** page allows for CMEs and Providers to search for claims that are created directly or by the Claims Aggregation Cycle. Claims may be for a single date or a date range, depending on how it is billed.

Users will need one of the below roles/permissions to view claims:

- **Claims Manager** (for Agency or Foster Care Providers)
- **Claims Coordinator** (for Agency or Foster Care Providers)
- **Local Auth Claims Coordinator** (for CDDP staff)
- **Brokerage Claims Coordinator** (for Brokerage staff)

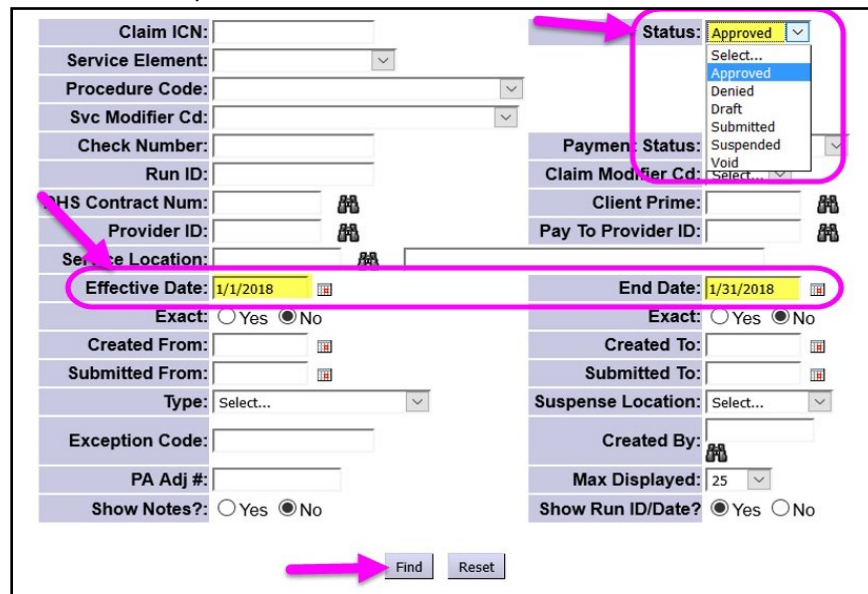
How to Find and View Claims:

1) Log in to eXPRS and select **Claims > Search/Update Claims**.



Prior Authorization ▶	Filtered By Type All Notification
Plan Of Care ▶	
Claims ▶	Search/Update Claims
Liabilities ▶	Create CPA Claims
Reports ▶	Create CPA Absence Claims
Financial ▶	Reports ▶

2) On the **Claims Search**, enter search criteria & select **Find**.



Claim ICN:		Status: Approved ▼
Service Element:		Select...
Procedure Code:		Approved
Svc Modifier Cd:		Denied
Check Number:		Draft
Run ID:		Submitted
OHS Contract Num:		Suspended
Provider ID:		Void
Service Location:		Select...
Effective Date: 1/1/2018	End Date: 1/31/2018	Payment Status: ▼
Exact: <input type="radio"/> Yes <input checked="" type="radio"/> No	Exact: <input type="radio"/> Yes <input checked="" type="radio"/> No	Claim Modifier Cd: ▼
Created From:	Created To:	Client Prime: <input type="text"/>
Submitted From:	Submitted To:	Pay To Provider ID: <input type="text"/>
Type: Select...	Suspense Location: Select...	
Exception Code:	Created By: <input type="text"/>	
PA Adj #:	Max Displayed: 25	
Show Notes?: <input type="radio"/> Yes <input checked="" type="radio"/> No	Show Run ID/Date?: <input checked="" type="radio"/> Yes <input type="radio"/> No	
<input type="button" value="Find"/> <input type="button" value="Reset"/>		

3) Any claim matching the criteria will return in the Results list.

Export options: [CSV](#) | [Excel](#) | [PDF](#) | [RTF](#)

Claim ICN	Client Prime	Client Name	Service Element	Procedure Code	Svc Modifier Cd	Claim Modifier Cd	Type	Provider	Effective Date	End Date	Billed Amount	Paid Amount	Status	Run ID	Paid Date
2017*****1001	xyz0000a	Last, First	158	OR AFC	NA	REG	FFS	FC Provider	1/1/2018	1/11/2018	\$2,005.92	\$2,005.92	Approved	236276615	2/1/2018
2017*****2001	xyz0000a	Last, First	158	OR AFC	NA	REG	FFS	FC Provider	1/14/2018	1/31/2018	\$2,370.63	\$2,370.63	Approved	236276615	2/1/2018

4) From the Results list, you can export it as needed.

Reset

Export options: [CSV](#) | [Excel](#) | [PDF](#) | [RTF](#)

Provider	Effective Date	End Date	Billed Amount	Paid Amount	Status	Run ID	Paid Date
S FC Provider	1/1/2018	1/11/2018	\$2,005.92	\$2,005.92	Approved	236276615	2/1/2018

5) Click the **Claim ICN** hyperlink to view the specific claim.

Export options: [CSV](#) | [Excel](#) | [PDF](#) | [RTF](#)

Claim ICN	Client Prime	Client Name	Service Element	Procedure Code	Svc Modifier Cd	Paid Amount	Status	Run ID	Paid Date
2017*****1001	xyz0000a	Last, First	158	OR AFC	NA	\$2,005.92	Approved	236276615	2/1/2018
2017*****2001	xyz0000a	Last, First	158	OR AFC	NA	\$2,370.63	Approved	236276615	2/1/2018

6) Review the details of the claim.

Claim View

ICN:	2024205 [REDACTED]	Status:	Approved	Type:	Fee For Service
Service Element:	49	Proc Code:	OR526	Svc Modifier Cd:	NA
Client Prime:	[REDACTED]	Client Name:	[REDACTED]	Provider:	[REDACTED]
Provider ID:	57 [REDACTED]	Claim Modifier Reason:	Regular		
Service Location:	[REDACTED]	Contractor Name:	[REDACTED]		
DHS Contract Num:	157 [REDACTED]	Effective Date:	7/1/2024	End Date:	7/15/2024
PA Adj #:	991 [REDACTED]	Paid Date:	07/24/2024 05:30 PM PDT	Total Rate:	22.50
Run ID:	719681195	Billed Amount:	\$2,446.20	Paid Amount:	\$2,446.20
Billed Units:	108.720	Prov Liab Deduct:	\$0.00	Net Payment:	\$2,446.20
Priced Amount:	\$2,446.20	Last Submit Date:	07/23/2024 07:10 AM PDT		
Client Liab Deduct:	\$0.00	Processed:	07/23/2024 07:10 AM PDT	Reversed:	
Original Submit Date:	07/23/2024 07:10 AM PDT	Notes:			
Replaced Claim:		Replaced By Claim:			
Created By:	eXPRS Scheduled System Process	Created Date:	07/23/2024 07:10 AM PDT		
Updated By:	eXPRS Scheduled System Process	Updated Date:	07/23/2024 07:10:52 AM PDT		

TIP: There are times when the **Billed Amount** and **Net Payment** will be different. This often occurs because there is either a **Provider Liability** or **Client Liability Amount** which results in some funds being withheld.

7) At the bottom of the claim you can view more information, such as **Rate** or **Service Delivered** details (if applicable).

Exceptions:
There are no processing exceptions for this claim

Exception history:
There are no historical exceptions for this claim

▼ **Rates**

Start Date	End Date	Service Group	Licensed Bed/s	Provider Specialty	Fixed Rate	Add On Rate	Total Rate	Error Message
12/01/2022	04/09/2023	4	5	89-825	\$443.47		\$443.47	
04/10/2023	06/30/2023	4	5		\$443.47		\$443.47	

► **Segments**

▼ **Services Delivered**

Service Begin	Service End	Service Units	Billed Units	Group Setting	Created Date	Review Date	Status	ID
02/01/2023 12:00 AM PST	02/02/2023 12:00 AM PST	1	1	No	02/16/2023 01:08 PM PST		Approved	6.16
02/02/2023 12:00 AM PST	02/03/2023 12:00 AM PST	1	1	No	02/16/2023 01:08 PM PST		Approved	6.17
02/03/2023 12:00 AM PST	02/04/2023 12:00 AM PST	1	1	No	02/16/2023 01:08 PM PST		Approved	6.18

Provider Liability deductions
There are no provider liability deductions for this claim

► **Action Log Entries**

Only Claims that reach **Approved** status will be processed for payment to the provider. Providers can use the **Claims Problem Solving Matrix** on the eXPRS Help Menu to troubleshoot issues with claims.

Appendix A: Claims Search Criteria

Claims Search

Enter one or more search criteria. Partial matches are supported for Claim ICN only. Search is not case sensitive. Criteria are cumulative. Results returned are limited to 20,000 rows. If criteria entered results in more than 20,000 rows, data returned will be truncated. You may need to narrow your search to return a smaller dataset.

Including a status in your search criteria will allow action on multiple claims; action allowed depends on the claim status and the user's permissions.

Note: Multiple claim exception codes can be entered in the exception code field. Enter multiple codes with a comma between the codes. There should be no spaces. Ex - 1,2,3

Claim ICN:	<input type="text"/>	Status:	<input type="text" value="Select..."/>
Service Element:	<input type="text"/>		
Procedure Code:	<input type="text"/>		
Svc Modifier Cd:	<input type="text"/>		
Check Number:	<input type="text"/>	Payment Status:	<input type="text" value="Select..."/>
Run ID:	<input type="text"/>	Claim Modifier Reason:	<input type="text" value="Select..."/>
DHS Contract Num:	<input type="text"/>	Client Prime:	<input type="text"/>
Provider ID:	<input type="text"/>	Pay To Provider ID:	<input type="text"/>
Service Location:	<input type="text"/>		
Effective Date:	<input type="text"/>	End Date:	<input type="text"/>
Exact:	<input type="radio"/> Yes <input checked="" type="radio"/> No	Exact:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Created From:	<input type="text"/>	Created To:	<input type="text"/>
Submitted From:	<input type="text"/>	Submitted To:	<input type="text"/>
Claim Type:	<input type="text" value="Select..."/>	Exclude SPA Absence Claim Type:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Exception Code:	<input type="text"/>	Suspense Location:	<input type="text" value="Select..."/>
Exclude Exception Code:	<input type="checkbox"/>	Created By:	<input type="text"/>
PA Adj #:	<input type="text"/>	Show Exception Code Desc?:	<input type="radio"/> Yes <input checked="" type="radio"/> No
Show Notes?:	<input type="radio"/> Yes <input checked="" type="radio"/> No	Max Displayed:	<input type="text" value="25"/>
		Show Run ID/Date?:	<input checked="" type="radio"/> Yes <input type="radio"/> No

- **Claim ICN:** Limits the results to the Claim ID entered.
- **Status:** Limits results to only that claim status. Selecting a value enables checkboxes on the results list so a user can take action on those claims.
- **Service Element:** Limits results to only claims with that Service Element.
- **Procedure Code:** Limits results to only claims with that Procedure Code.
- **Svc Modifier Cd:** Limits results to only claims with that Modifier Code.
- **Check Number:** Limits results to only claims with that Check Number.
- **Payment Status:** Limits results to only claims with the selected value.
- **Run ID:** Limits results to claims that are part of a specific State Financial Management Application (SFMA) Run.
- **Claim Modifier Reason:** Limits results to only claims with the selected Claim Modifier Reason
- **DHS Contract Num:** Limits the results to claims associated with a specific CME Contract.
- **Client Prime:** Limits the results to the ODHS Prime Number entered.
- **Provider ID:** Limits results to claims for a specific Provider Record.
- **Pay to Provider ID:** Limits results to claims for a specific, higher level Provider Record.

- **Service Location:** Limits results to a claims for a specific Service Location Provider Record
- **Effective Date:** Limits results to claims that begin on or after the entered date.
- **End Date:** Limits results to claims that end on or before the entered date.
- **Exact (Yes/No):** Limits results to only claims that begin exactly on the dates entered.
- **Created From:** Limits results to claims that were created on or after the entered date.
- **Created To:** Limits results to claims that were created on or before the entered date.
- **Submitted From:** Limits results to claims that were submitted on or after the entered date.
- **Submitted To:** Limits results to claims that were submitted on or before the entered date.
- **Claim Type:** Returns only claims with the value selected in the dropdown menu.
- **Exclude SPA Absence Claim Type (Yes/No):** When yes is selected, SPA Absence Claims will not return in the results list.
- **Exception Code:** Returns only claims with the Exception Code entered.
- **Suspense Location:** Returns only claims that are suspended for one of the reasons selected in the dropdown menu. Some options apply to multiple exception codes.
- **Exclude Exception Code:** Excludes the Exception Code from the results list.
- **Created By:** Returns claims created by a specific user or system process.
- **PA Adj #:** Limits results to claims associated with a specific Prior Authorization.
- **Show Exception Code Desc? (Yes/No):** When Yes is selected, the written text description of an exception is added into the results list.
- **Show Notes? (Yes/No):** When Yes is selected, the written notes associated with the claim are added into the results list.
- **Max Displayed:** Sets the limit for how many results display per page.
- **Show Run ID/Date (Yes/No):** When Yes is selected, the Run ID and Paid Date columns will appear in the results list.

Users can enter any variety of search criteria when using the **Claims Search** page. However, some key fields to use are **Status¹, Service Element, DHS Contract Num, Pay To Provider ID, Effective Date** and **End Date**.

¹ Selects a **Status** enables a user to take various action on the claims returned. See other How-To Guides on the Help Menu for assistance on taking specific actions (e.g. Voiding, Deleting, etc.)

Appendix B: Claims Search Criteria and Result List Definitions

Claim ICN	Client Prime	Client Name	Service Element	Procedure Code	Svc Modifier Cd	Claim Modifier Reason	Type	Provider	Service Location	Effective Date	End Date	Service Group	Rate	Billed Amount	Client Liability	Paid Amount	Prov Liab Deduct	Net Payment	Status	Run ID	Paid Date	Exception Code
			49	OR525	NA	REG	FFS			7/1/2024	7/15/2024	4	22.50	\$2,446.20		\$2,446.20		\$2,446.20	Approved	719681195	7/24/2024	

- **Claim ICN:** The system generated claim ID. Selecting the hyperlink will take the user to the **View Claim** page.
- **Client Prime:** The ODHS Prime Number for the individual for whom services are being paid.
- **Client Name:** The name of the individual for whom services are being paid.
- **Service Element:** The Service Element for the services paid in the claim.
- **Procedure Code:** The Procedure Code for the service paid in the claim.
- **Svc Modifier Cd:** The Modifier Code for the service paid in the claim.
- **Claim Modifier Reason:** The Claim Modifier Code for the service paid.
- **Type:** The type of claim being paid; FFS means “Fee-for-Service”.
- **Provider:** The provider being paid for the services.
- **Service Location:** The Service Location Record authorized on the Claim.
- **Effective Date:** The first date of service paid in the claim.
- **End Date:** The last date of service paid in the claim.
- **Service Group:** The individual’s Service Group as determined by the Oregon Needs Assessment.
- **Rate:** The rate being paid for services associated with the Claim. This field will show N/A until the Claim reaches **Approved** or **Voided** status.
- **Billed Amount:** The gross amount the claim was billed.
- **Client Liability:** The amount the claim payment was reduced due to the individual’s Client Liability Account.
- **Paid Amount:** The amount paid in the claim. This can be the same or lesser than the Billed Amount.
- **Prov Liab Deduct:** The amount that the provider’s **Paid Amount** is reduced as a result of a **Provider Liability Account**.
- **Net Payment:** The actual amount paid to the provider after all reductions due to Provider Liability or Client Liability Accounts.
- **Status:** The claim status.
- **Run ID:** The State Financial Management Application (SFMA) Run ID that the claim was included in for funds disbursement from DAS to the provider.
- **Paid Date:** The date funds dispersed from DAS.
- **Exception Code:** The numeric Exception Code for the claim (if applicable).

Appendix C: Claims Search Criteria and Result List Definitions

Claim View					
ICN:	2024205 [REDACTED]	Status:	Approved	Type:	Fee For Service
Service Element:	49	Proc Code:	OR526	Svc Modifier Cd:	NA
Client Prime:	[REDACTED]	Client Name:	[REDACTED]		
Provider ID:	57 [REDACTED]	Provider:	[REDACTED]		
Service Location:	[REDACTED]	Claim Modifier Reason:		Regular	
DHS Contract Num:	157 [REDACTED]	Contractor Name:	[REDACTED]		
PA Adj #:	991 [REDACTED]	Effective Date:	7/1/2024	End Date:	7/15/2024
Run ID:	719681195	Paid Date:	07/24/2024 05:30 PM PDT		
Billed Units:	108.720	Total Rate:	22.50	Billed Amount:	\$2,446.20
Priced Amount:	\$2,446.20	Paid Amount:	\$2,446.20		
Client Liab Deduct:	\$0.00	Prov Liab Deduct:	\$0.00	Net Payment:	\$2,446.20
Original Submit Date:	07/23/2024 07:10 AM PDT	Last Submit Date:	07/23/2024 07:10 AM PDT		
Processed:	07/23/2024 07:10 AM PDT	Reversed:			
Notes:					
Replaced Claim:		Replaced By Claim:			
Created By:	eXPRS Scheduled System Process	Created Date:	07/23/2024 07:10 AM PDT		
Updated By:	eXPRS Scheduled System Process	Updated Date:	07/23/2024 07:10:52 AM PDT		

- **Claim ICN:** The system generated claim ID. Selecting the hyperlink will take the user to the **View Claim** page.
- **Status:** The claim status.
- **Type:** The type of claim being paid; FFS means “Fee-for-Service”.
- **Service Element:** The Service Element for the services paid in the claim.
- **Procedure Code:** The Procedure Code for the service paid in the claim.
- **Svc Modifier Cd:** The Modifier Code for the service paid in the claim.
- **Client Prime:** The ODHS Prime Number for the individual for whom services are being paid.
- **Client Name:** The name of the individual for whom services are being paid.
- **DHS Contract Num:** The Contract Number for the Case Management Entity that authorized the service.
- **Contractor Name:** The Name of the Case Management Entity that authorized the service.

- **PA Adj #:** Limits results to claims associated with a specific Prior Authorization.
- **Effective Date:** The first date of service paid in the claim.
- **End Date:** The last date of service paid in the claim.
- **Run ID:** The State Financial Management Application (SFMA) Run ID that the claim was included in for funds disbursement from DAS to the provider.
- **Paid Date:** The date funds dispersed from DAS.
- **Billed Units:** The total number of units billed by the provider for the service.
- **Total Rate:** The total amount paid per unit to the provider for the service.
- **Billed Amount:** The gross amount the claim was billed.
- **Priced Amount:** The system calculated amount for the claim.
- **Paid Amount:** The amount paid in the claim. This can be the same or lesser than the Billed Amount.
- **Client Liability Deduct:** The amount the claim payment was reduced due to the individual's Client Liability Account.
- **Prov Liab Deduct:** The amount that the provider's Paid Amount is reduced as a result of a Provider Liability Account.
- **Net Payment:** The amount paid to the provider after CLA or PLA deductions.
- **Original Submit Date:** The first date and time that the claim was submitted.
- **Last Submit Date:** The date and time that the claim was most recently submitted.
- **Processed:** The date and time that the claims was processed.
- **Reversed:** The date and time that the claims was processed.
- **Notes:** Any notes entered by a user or system process for the claim will show.
- **Replaced Claim:** If this claim replaced another claim, the other claim's ID will show.
- **Replaced by Claim:** If this claim was replaced by another claim, the other claim's ID will show.
- **Created By:** The name of the user or process that created the claim.
- **Created Date:** The date and time that the claim was created.
- **Updated By:** The name of the user or process that last updated the claim.
- **Updated Date:** The date and time that the claim was last updated.