

# Creating and Submitting Claims for Client Prior Authorizations

Providers are responsible to submit claims on a timely basis to receive payment. Medicaid timelines give providers 365 days from the date of service to submit an initial claim for payment.

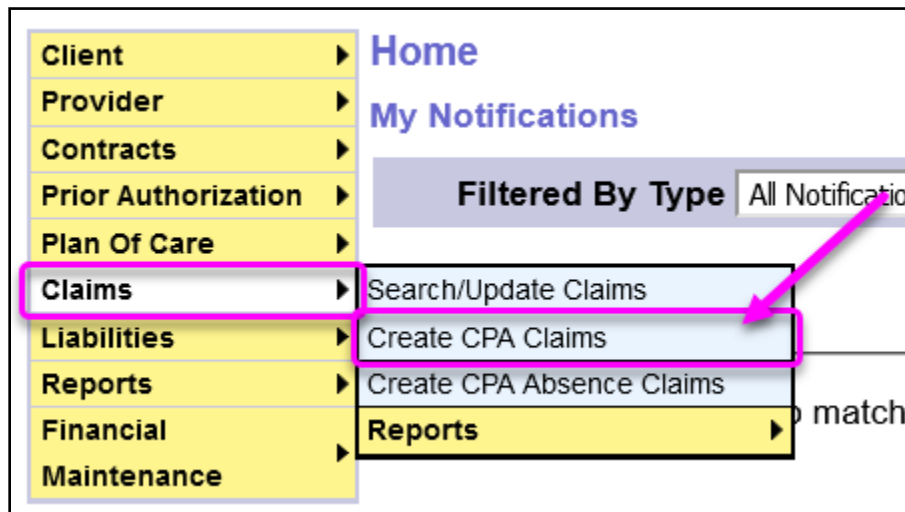
All submitted claims are processed through system validations. Claims that pass all validations and are in approved status are sent to Department of Administrative Services for payment around 5:30PM each business day. Any claims in suspended status are reprocessed every night automatically, until the suspension reason is resolved.

To create and submit claims, Agency Provider users must have one of following roles:

- **Provider Agency Claims Manager**
- **Provider Agency Claims Preparer**

## Creating and Submitting a Claim for Payment

1. From the left navigation, select **Claims > Create CPA Claims**.



2. On the **Create Claim for CPA** page, enter the search criteria and select **Find**.

**Create Claim For CPA**

Find a CPA to create a claim for. Enter one or more search criteria. Only exact matches are supported. Criteria is cumulative.

Provider ID:

Pay To Provider ID:

Client Prime:

PA Adj #:

Service Element: Select...

DHS Contract Num:

Effective Date: 8/1/2018

End Date: 8/31/2018

Max Displayed: 25

**Tip:** Search using the first date of service to be claimed in the **Effective Date** field and the last date of service in the **End Date**.

3. In the results list, select the checkbox for each CPA you wish to bill for. You can click more than one box or use the **All** box at the top of the column to select all in the list.

Max Displayed: All

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

<input type="checkbox"/>	PA Adj #	Client Name	SE	DHS Contract Num	Provider	Effective Date	End Date
<input type="checkbox"/>	24****31	Last, First 1	50	14****9	1***7	10/1/2017	6/30/2019
<input type="checkbox"/>	17****24	Last, First 2	50	14****9	1***7	10/1/2017	6/30/2019
<input type="checkbox"/>	17****27	Last, First 3	50	14****9	1***7	10/1/2017	6/30/2019
<input type="checkbox"/>	24****92	Last, First 4	50	14****9	1***7	7/9/2018	6/30/2019

4. With boxes checked, scroll down to the bottom of the page and click **Continue**.

Export options: CSV | Excel | PDF | RTF

<input type="checkbox"/> All	PA Adj #	Client Name	SE	DHS Contract Num	Provider	Effective Date	End Date
<input checked="" type="checkbox"/>	24****31	Last, First 1	50	14***9	1***7	10/1/2017	6/30/2019
<input type="checkbox"/>	17****24	Last, First 2	50	14***9	1***7	10/1/2017	6/30/2019
<input checked="" type="checkbox"/>	17****27	Last, First 3	50	14***9	1***7	10/1/2017	6/30/2019
<input checked="" type="checkbox"/>	27****92	Last, First 4	50	14***9	1***7	7/9/2018	6/30/2019

3 claims, about 1 minute to submit.

You will get an estimate for approx how long it will take the system to create the claims.

5. On the **Enter Claim Service Dates** page, the dates default to the current date. You can change those dates to be the service dates you are claiming for each CPA and individual checked on the previous page.

### Enter Claim Service Dates

Service Begin: 8/1/2018

Service End: 8/31/2018

The first date of service to be claimed.

The last date of service to be claimed.

**Tip:** The date range entered here will apply to each the CPA and individual you checked on the previous page.

6. With the service dates entered, click **Continue** to create draft claims.

### Enter Claim Service Dates

Service Begin: 8/1/2018

Service End: 8/31/2018

7. On the **Claim Create Results** page, review the claims and select **Submit** to submit them.

**Claim Create Results**

Your request completed successfully.

PA Adj #	Status	SE	ICN	Service Begin	Service End	Units	Billed Amount
17****2	Draft	50	2018*****0001	8/1/2018	8/31/2018	1.000	8220.58
17****7	Draft	50	2018*****1001	8/1/2018	8/31/2018	1.000	8220.58
24****2	Draft	50	2018*****2001	8/1/2018	8/31/2018	1.000	5454.54

3 claims, about 1 minute to submit.

8. After the claims process, the **Claims Created** page displays. The status for each claim will be displayed.

**Claims Created**

Your request completed successfully.

Status	ICN	Service Begin	Service End	Billed Amount	Pymt Amt
Approved	2018*****0001	8/1/2018	8/31/2018	\$8,220.58	\$0.00
Approved	2018*****1001	8/1/2018	8/31/2018	\$8,220.58	\$0.00
Suspended	2018*****2001	8/1/2018	8/31/2018	\$5,454.54	\$0.00

**Remember:** Claims that have successfully cleared all validation edits and have a status of **approved** will be sent for payment processing around 5:30 p.m. each business day. Any claims that have a status of **suspended** will be reprocessed every night automatically, until the suspension reason has been resolved.

Information on why a claim has suspended and what can be done to resolve the issue is available in the *Claims Problem Solving Matrix*, available on the **eXPRS Help Menu**.