



Availity Claim Status – user guide

For TriWest Healthcare Alliance Providers

Claim Status – Search Options

In the enhanced Claim Status tool, you can research claims filed with TriWest using any of the following options.

Search by:

1. Member
2. Service Date
3. Claim History

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Patient Registration Claims & Payments My Providers Reporting Payer Spaces More Keyword Search

Home > Select > Search Need Help? Watch a demo for Claim Status

cs Claim Status

Give Feedback

Organization: Availity Test Org Payer: TRIWEST HEALTHCARE ALLIANCE

Member + Service Date + Claim History +

Provider Tax ID: 123456789 Provider NPI: optional Member ID: 987654321

Service Dates: 06/09/2021 - 06/09/2021

Submit Clear Form



Claim Status Search Results

Member Search



Member Search: What displays next?

Member search – This type of request can have multiple claims for the same member. Availability will display all search results that matched the search criteria. Let's click on the Adjusted Claim for the full details of the claim sent by TriWest.

Availity | Home | Notifications 5 | My Favorites | California

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Member + | Service Date + | Claim History +

Provider Tax ID ¹ | Provider NPI ² optional | Member ID ²

Service Dates ³ -

⁴

Results (Displaying 1 - 3 of 3)
As of September 14, 2021 9:55 AM
Transaction ID: 001d0d49-242a-bc1a-001b-7b1fe5c0b833

Status	Service Dates	Claim #	Patient Name	Billed Amount	Paid Amount	Provider Name
REJECTED	05/13/2021 05/13/2021	21A807188500	ZNS, NUXXA	\$321.40	\$39.50	ROSE, RYAN
ADJUSTED	05/13/2021 05/13/2021	21A728892700	ZNS, NUXXA	\$454.80	\$169.98	ROSE, RYAN
PAID	05/13/2021 05/13/2021	21A728892701	ZNS, NUXXA	\$321.40	\$169.52	ROSE, RYAN



CS Claim Status

Give Feedback

Customer ID 1194 Exchange Date 09/14/2021
Transaction ID 001d0d49-240c-379a-0021-c0a66f8bfa35

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Remittance Viewer

Patient Information

Patient NUXXA, ZNS

Claim Information

Claim Number 21A728892700
 Claim Status ADJUSTED
 Custom Status Code Processed; Adjusted
 Received Date 05/18/2021
 Service Dates 05/13/2021 - 05/13/2021
 Admission Date
 Discharge Date
 Discharge Status Code
 Discharge Status Description

We're now viewing the results for that Adjusted claim in Claim Status. We can see the Patient and Claim information. If we scroll down further...

Covered Days
 Non Covered Days
 Primary Diagnosis Code M9901
 Primary Diagnosis Description Segmental and somatic dysfunction of cervical region
 Principal Surgical Code
 Principal Surgical Description
 Surgical Date

Billed Amount \$1,364.40
 Paid Amount \$509.94
 Allowed Amount \$169.98
 Contract Adjustment Amount \$284.82

Payment Information

Check/EFT Number	Provider Tax ID
	Billing Provider NPI
	Rendering Provider Name
	Rendering Provider NPI

We see the Payment and Line Level information, including Procedure Codes, Modifiers, Billed/Paid amounts, Contract Adjustments and Custom Claim Adjustment Reason Codes (CARC). Right below that are the Codes with the Type, Code and Description. I'll scroll down to see the rest of the results...

Line Level Information

Service Dates	Rev	Procedure Code	Modifier	Billed	Allowed	Paid	Contract Adjustment	Custom CARC
05/13/2021 05/13/2021		98941	AT	\$454.80	\$0.00	\$169.98	\$159.16	P
05/13/2021 05/13/2021		98943		\$454.80	\$79.92	\$169.98	\$27.72	P
05/13/2021 05/13/2021		97124	GP59	\$454.80	\$90.06	\$169.98	\$97.94	P

Codes

Type	Code	Description
Ineligible Reason	P	Medicare Medically Unlikely Edits
Ineligible Reason	P	Contracted Provider Reimbursement

05/13/2021					
05/13/2021	98941	AT	\$454.80	\$0.00	
05/13/2021					
05/13/2021	98943		\$454.80	\$79.92	
05/13/2021					
05/13/2021	97124	GP59	\$454.80	\$90.06	
05/13/2021					

It displays the rest of the Codes and Descriptions, but we also have access to the same information and functionality as we did at the top of the results to make it easier for you.

Codes

Type	Code	Description
Ineligible Reason	P	Medicare Medically Unlikely Edits
Ineligible Reason	P	Contracted Provider Reimbursement
Ineligible Reason	P	Contracted Provider Reimbursement
Remark	P	Medicare Medically Unlikely Edits
Remark	P	Contracted Provider Reimbursement
Remark	P	Contracted Provider Reimbursement

Claim Status Search Results

Service Date Search



Service Date Search: What displays next?

Service Date search –
This type of request can have multiple claims for the same or different members. Availity will display all search results that matched the search criteria entered. Let's click on the 2nd claim to see the full details of that claim.

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Member + | Service Date + | Claim History +

Provider Tax ID ¹ | Provider NPI ² optional

Service Dates ² -

³

Results (Displaying 1 - 3 of 3)
As of September 14, 2021 11:21 AM
Transaction ID: 001d0d49-2355-1c9b-000a-5b48678a6e74

Status	Service Dates	Claim #	Patient Name	Billed Amount	Paid Amount	Provider Name
PAID	06/01/2021 06/04/2021	21A836494000	USWVNSY	\$14,373.00	\$9,482.28	MEMORIAL HOSPITAL
PAID	06/01/2021 06/01/2021	21A836533500	S, XSYVZVR	\$4,871.00	\$1,668.33	MEMORIAL HOSPITAL
PAID	06/01/2021 06/01/2021	21A836576200	ZSV, ZNVYX	\$979.00	\$335.31	MEMORIAL HOSPITAL



CS Claim Status

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Customer ID 1194 **Exchange Date** 09/14/2021
Transaction ID 001d0d49-2392-259b-000d-04bfbfc721e9

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Patient Information

Patient XSYVZVR, S

Claim Information

Claim Number 21A836533500
Claim Status PAID
Custom Status Code Processed; Paid
Received Date 06/07/2021
Service Dates 06/01/2021 - 06/01/2021
Admission Date 06/01/2021
Discharge Date 06/01/2021
Discharge Status Code 01
Discharge Status Description

We're now viewing the results for that 2nd paid claim in Claim Status. We can see the Patient and Claim information. If we scroll down further...

Covered Days
Non Covered Days
Primary Diagnosis Code I10
Primary Diagnosis Description Essential (primary) hypertension
Principal Surgical Code
Principal Surgical Description
Surgical Date

844
 0851 **Billed Amount** \$14,613.00
 08 **Paid Amount** \$5,004.99
 Allowed Amount \$1,668.33
 Contract Adjustment Amount \$3,202.67

Payment Information

Check/EFT Number	Provider Tax ID
	Billing Provider NPI
	Rendering Provider Name
	Rendering Provider NPI

We see the Payment and Line Level information, including Procedure Codes, Modifiers, Billed/Paid amounts, Contract Adjustments and Custom Claim Adjustment Reason Codes (CARC). Right below that are the Codes with the Type, Code and Description. I'll scroll down to see the rest of the results...

Line Level Information

Service Dates	Rev	Procedure Code	Modifier	Billed	Allowed	Paid	Contract Adjustment	Custom CARC
06/01/2021 06/01/2021	0301	82565		\$4,871.00	\$21.24	\$1,668.33	\$40.76	P
06/01/2021 06/01/2021	0636	A9579		\$4,871.00	\$105.84	\$1,668.33	\$203.16	P
06/01/2021 06/01/2021	0611	70553	TC	\$4,871.00	\$1,541.25	\$1,668.33	\$2,958.75	P

Codes

Type	Code	Description
Ineligible Reason	P	Contracted Provider Reimbursement
Ineligible Reason	P	Contracted Provider Reimbursement

06/01/2021					
06/01/2021	0301	82565		\$4,871.00	\$21.24
06/01/2021					
06/01/2021	0636	A9579		\$4,871.00	\$105.84
06/01/2021					
06/01/2021	0611	70553	TC	\$4,871.00	\$1,541.25
06/01/2021					

It displays the rest of the Codes and Descriptions, but we also have access to the same information and functionality as we did at the top of the results to make it easier for you.

Codes

Type	Code	Description
Ineligible Reason	P	Contracted Provider Reimbursement
Ineligible Reason	P	Contracted Provider Reimbursement
Ineligible Reason	P	Contracted Provider Reimbursement
Remark	P	Contracted Provider Reimbursement
Remark	P	Contracted Provider Reimbursement
Remark	P	Contracted Provider Reimbursement

Claim Status Search Results

Claim History Search



Claim History Search: What displays next?

Claim History search –
This type of request is for providers to enter the BASE claim number and then be provided all claims that are iterations of the claim. Avality will display all search results that matched the search criteria entered. Let's click on the 1st claim to see the full details of that adjusted claim.

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Organization: Avality Test Org Payer: TRIWEST HEALTHCARE ALLIANCE

Member Service Date Claim History

Provider Tax ID: 861172047 Claim Number: 1713621406

Submit Clear Form

Results (Displaying 1 - 2 of 2)
As of September 17, 2021 10:20 AM
Transaction ID: 00122137-9026-abf4-001d-e99bf12bfe61

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Status	Service Dates	Claim #	Patient Name	Billed Amount	Paid Amount	Check/EFT Date	Provider Name
ADJUSTED	08/05/2020 08/05/2020	171362140600	XVWXVZSW	\$240.00	\$80.94	06/06/2017	JOHNNY ROSE
PAID	08/05/2020 08/05/2020	171362140601	XVWXVZSW	\$240.00	\$139.94	07/27/2017	JOHNNY ROSE



CS Claim Status

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Customer ID 1194 **Exchange Date** 09/17/2021
Transaction ID 00122137-8fac-99f5-0000-7e06f24c8837

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Patient Information

Patient XVWXVZSW

Claim Information

Claim Number 171362140600
Claim Status ADJUSTED
Custom Status Code Processed; Adjusted
Received Date 05/09/2017
Service Dates 08/05/2020 - 08/05/2020
Admission Date
Discharge Date
Discharge Status Code
Discharge Status Description

We're now viewing the results for Adjusted claim in Claim Status. We can see the Patient and Claim information. If we scroll down further...

Facility Type Description
Covered Days
Non Covered Days
Primary Diagnosis Code M9901
Primary Diagnosis Description Segmental and somatic dysfunction of cervical region
Principal Surgical Code
Principal Surgical Description

Billed Amount \$120.00
Paid Amount \$40.47
Allowed Amount \$40.47
Contract Adjustment Amount \$79.53

Payment Information

Check/EFT Number		Provider Tax ID	
Check/EFT Date	06/06/2017	Billing Provider NPI	
		Rendering Provider Name	
		Rendering Provider NPI	

This is the exciting part about Claim History. This was the first payment on the claim, and it was 'Adjusted'. The code description tells us that a Required modifier is missing or invalid. Well, we see the modifiers in the Line Level info, so one of the modifiers seem to be invalid. What do we do next? I'll scroll to the bottom of the page...

Line Level Information

Service Dates	Rev	Procedure Code	Modifier	Billed	Allowed	Paid	Contract Adjustment	Custom CARC
08/05/2020 08/05/2020		97140	GY	\$47.00	\$0.00	\$0.00	\$47.00	P
08/05/2020 08/05/2020		98941	AT	\$73.00	\$40.47	\$40.47	\$32.53	P

Codes

Type	Code	Description
Remark	P	Requird modifier is missing or invalid



Check/EFT Number
Check/EFT Date 06/06/2017
Provider Tax ID 86117204
Billing Provider NPI 102302426
Rendering Provider Name
Rendering Provider NPI

Once again, you have access to the same information and functionality as you had at the top of the results page. Let's use them this time. I want to see the Paid claim from this Claim History, so I'll click on Return to Results.

Line Level Information

Service Dates	Rev	Procedure Code	Modifier	Billed	Allowed	Paid	Adjustment	CARC
08/05/2020 08/05/2020		97140	GY	\$47.00	\$0.00	\$0.00	\$47.00	P
08/05/2020 08/05/2020		98941	AT	\$73.00	\$40.47	\$40.47	\$32.53	P

Codes

Type	Code	Description
Remark	P	Requird modifier is missing or invalid

Organization: Availity Test Org

Payer: TRIWEST HEALTHCARE ALLIANCE

Member + Service Date + Claim History +

Provider Tax ID: 861172047

Claim Number: 1713621406

Submit Clear Form

I'm back at the Claim History results and now I'll click on the Paid claim to see what happened!

Results (Displaying 1 - 2 of 2)

As of September 17, 2021 10:20 AM

Transaction ID: 00122137-9026-abf4-001d-e99bf12bfe61

Status	Service Dates	Claim #	Patient Name	Billed Amount	Paid Amount	Check/EFT Date	Provider Name
ADJUSTED	08/05/2020 08/05/2020	171362140600	XVWXVZSW	\$240.00	\$80.94	06/06/2017	JOHNNY ROSE
PAID	08/05/2020 08/05/2020	171362140601	XVWXVZSW	\$240.00	\$139.94	07/27/2017	JOHNNY ROSE

CS Claim Status

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Customer ID 1194 **Exchange Date** 09/17/2021
Transaction ID 00122137-90ed-0934-001f-5e1f6a648d1d

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We're now viewing the results for the Paid claim from our Claim History search. We can see the Patient and Claim information. If we scroll down further...

Patient Information

Patient XVWXVZSW

Claim Information

Claim Number 171362140601
Claim Status PAID
Custom Status Code Processed; Paid
Received Date 05/09/2017
Service Dates 08/05/2020 - 08/05/2020
Admission Date
Discharge Date
Discharge Status Code
Discharge Status Description

Facility Type Description
Covered Days
Non Covered Days
Primary Diagnosis Code M9901
Primary Diagnosis Description Segmental and somatic dysfunction of cervical region
Principal Surgical Code
Principal Surgical Description

Billed Amount \$120.00
Paid Amount \$69.97
Allowed Amount \$69.97
Contract Adjustment Amount \$50.03

Payment Information

Check/EFT Number		Provider Tax ID
Check/EFT Date	07/27/2017	Billing Provider NPI
		Rendering Provider Name
		Rendering Provider NPI

The invalid modifier on the adjusted claim was GY. The claim and modifier were corrected and sent back to the payer and now you can see it is the correct modifier because the Description says, 'Payment to Out of Network provider (VA Only)'. And that service line was paid!

Line Level Information

Service Dates	Rev	Procedure Code	Modifier	Billed	Allowed	Paid	Contract Adjustment	Custom CARC
08/05/2020 08/05/2020		971	GP59	\$47.00	\$29.50	\$29.50	\$17.50	P
08/05/2020 08/05/2020		98941	AT	\$73.00	\$40.47	\$40.47	\$32.53	P

Codes

Type	Code	Description
Remark	P	Payment to OON provider (VA Only)

Availity Client Services

For customer support, contact 1.800.282.4548 or select **Help & Training > Availity Support**.

For more training, select **Help & Training > Get Trained**. The Availity Learning Center (ALC) opens in a new browser tab.

