The NaviNet® Claim Status Inquiry lets you view real-time, detailed claims information for claims submitted electronically or on paper. You can track the status of a claim from the start of the adjudication process until the time of payment.

**Note:** Claim Status Inquiry only allows you to track the status of claims processed on our new platform. Therefore, you cannot search for pre-migrated claims processed on our legacy platform.

From the Workflows menu, select *Claim Inquiry and Maintenance* and then select *Claim Status Inquiry*.

The Claim Status Search screen will display.
Entering search criteria to find a claim

- Search by billing entity:
  - Select the **Billing Entity** field to display the list of provider groups or use the type-ahead feature and type one of the following: the billing entity group name, NPI, provider ID, or address.
  
  *Note:* If the number of provider groups associated with your NaviNet office is too large, you will see the message "Too many results found, please narrow the search criteria." You may need to use the type-ahead feature to locate the desired provider group.

- Search by Member ID or Patient Name and Date of Birth:
  - For a Member ID search, enter the Member ID as it appears on the member's identification card.
  - For a Patient Name search, enter Last Name, First Name and Date of Birth (mm/dd/yyyy).

When searching by Patient Name and Date of Birth, if more than one record matches your search criteria, the Patient Search Results screen will display all records found.
You will then need to select the appropriate record to view the list of associated claims.

- **Service Start/End:**
  - Enter a claim start date (mm/dd/yyyy) or select the calendar icon to choose a date.
  
  *Note:* The updated transaction will eventually allow you to search for a member’s claim up to three years in the past from the current date. However, in the interim, you will only be able to access claims processed on our new platform. You cannot search for pre-migrated claims processed on our legacy platform.

- **Claim ID**
  - This is an optional field and is used to filter your search. *Note:* Searches cannot be performed by entering a Claim ID alone.

After entering all claim search criteria, select **Search**.

*Note:* When you navigate back and forth via the Wayfinder or Workflows bar, the search criteria you enter is preserved. To clear the data you entered previously, select **Reset Search Fields**.

### Selecting a Claim Search Result

If only one claim is found, you will be presented with the Claim Status Details screen for the claim. If more than one claim is found, you will be presented with a Search Results screen.

The Search Results screen provides the following information:

- Claim identification number
- Member name and member identification number
- Claim service dates
- Billed amount
- Payment date
- Paid amount
- Status
  - Finalized: claim has completed processing
  - Pending: claim is in our claim adjudication system and is in process
- Claim Investigation link
  - Allows you to request a claim review for claims in a finalized status. See the *Claim Investigation Submission Guide* for more information on how to submit an investigation.

From the Search Results screen, select the **Claim ID** link to view the Claim Status Details screen.
Viewing Claim Status Details
The Claim Status Details screen presents member, provider, claim-level, and service-level details. The information and presentation of the data will vary for professional and facility claims.

On the Claim Status Details screen, view the detailed claim information for your patient.

A. View Eligibility and Benefits. A link to the Eligibility & Benefits transaction allows direct access to the member’s eligibility and benefits. The Eligibility and Benefits Details screen is presented in a separate window. Note: The link is only available for local members and when viewing detail for a claim with a date of service that is less than two years from the current date. The link will not display when viewing claims for FEP or Out-of-Area (BlueCard®) members, or if the claim date of service is greater than two years from the current date.

B. View/Print. This link allows you to view and print the contents of the screen.

C. Claim Investigation. You can launch a claim investigation request for claims in a finalized status.

D. Claim Status Bar. Displays the status of the claim, claim ID, and claim dates of service on the color-coded bar. Additional information about the status is displayed in the message below the status and in the claim- and line-level detail. The status for each claim will be one of the following:
   - Pending: claim is in our claim adjudication system and is in process
   - Finalized: claim has completed processing

E. Insurance & Billing Entity Details. View claim-specific insurance and billing entity details.
F. **Claim Summary.** View the Total Billed and Total Paid amounts for the claim. The payment number and "paid on" date represent the most recent payment. For adjusted claims, the "paid on" date is the adjusted date.

G. **Claim Details (Professional and Facility).** View claim-level detail for the selected claim. The claim-level detail includes items such as allowed amount, contractual adjustment, and patient liability (copay, deductible).

H. **Service Line Details (Professional and Facility).** View service line-level claim detail to see services, the billed amount, and paid amounts for each line item. View the message under "status" for adjudication results specific to this line item.

If you hover your cursor over the Service Line, a View Additional Detail link displays.

Select *View Additional Detail* to view more details about the specific service line.
Facility Claim Detail Screen
The screen for facility claims includes an additional section with hyperlinks to more claim detail. You can select the arrows to expand or collapse a specific section.

Expand sections to view additional information

If you wish to inquire about another claim for the same member, select Back to Claim Status Search Results in the upper left section of the screen.

To search for a claim status for a different member, select Back to Claim Status Search Results in the upper left section of the screen, and then Back to Claim Status Search.

If you have questions about the Claim Status Inquiry transaction, call the eBusiness Hotline at 215-640-7410.

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