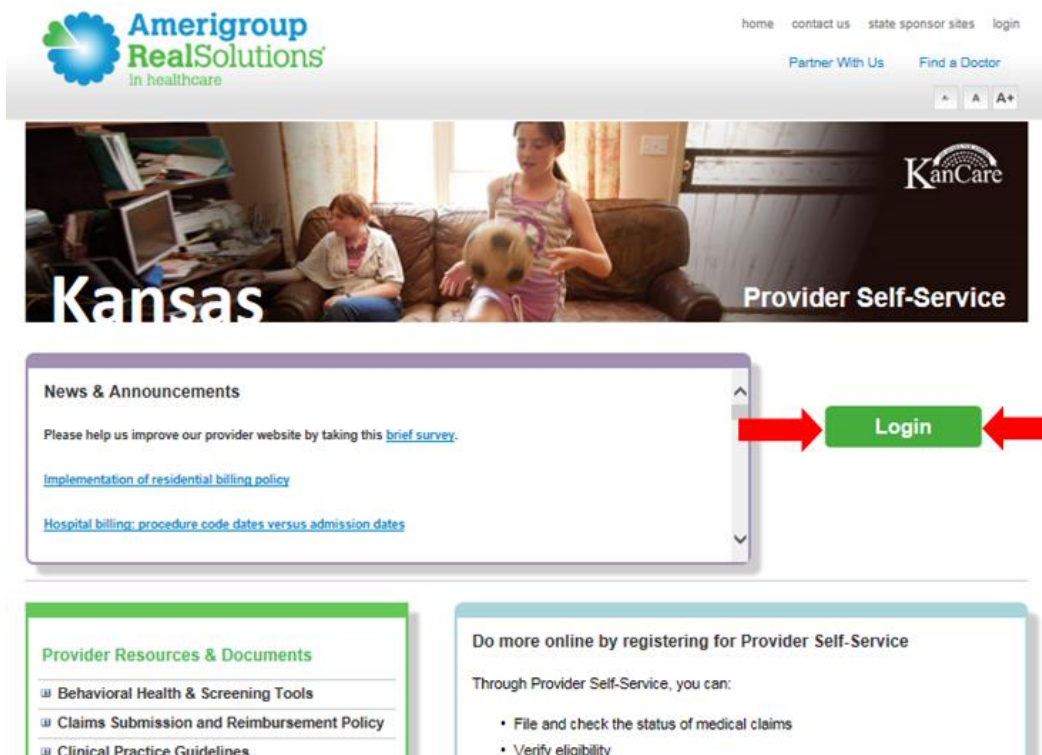


## Provider guide — how to submit appeals on Availity

Amerigroup Kansas, Inc. providers may submit an appeal online via Availity for claims that underpaid or denied inappropriately. The following is a general overview to guide Amerigroup providers through the online appeals process.

To submit an appeal online, go to <https://providers.amerigroup.com/KS> and select the green **Login** button.



The screenshot shows the Amerigroup RealSolutions website for Kansas. The header includes the Amerigroup logo and navigation links: home, contact us, state sponsor sites, login, Partner With Us, and Find a Doctor. Below the header is a banner image showing a doctor and a patient on a couch, with the text "Kansas" and "Provider Self-Service". A "Login" button is highlighted with a red arrow pointing to it from the "News & Announcements" section.

**News & Announcements**

Please help us improve our provider website by taking this [brief survey](#).

[Implementation of residential billing policy](#)

[Hospital billing: procedure code dates versus admission dates](#)

**Provider Resources & Documents**

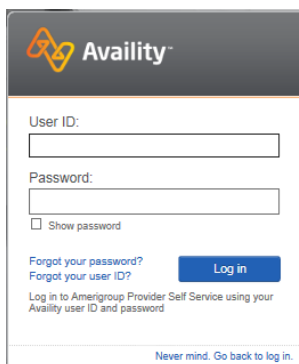
- Behavioral Health & Screening Tools
- Claims Submission and Reimbursement Policy
- Clinical Practice Guidelines

**Do more online by registering for Provider Self-Service**

Through Provider Self-Service, you can:

- File and check the status of medical claims
- Verify eligibility

You will be redirected to Availity and will need your Availity login information to continue.



The screenshot shows the Availity login page. The page features the Availity logo and a login form with fields for User ID and Password. There are links for "Forgot your password?" and "Forgot your user ID?" and a "Log in" button. A "Show password" checkbox is also present.

**Availity**

User ID:

Password:

Show password

[Forgot your password?](#)  
[Forgot your user ID?](#) [Log in](#)

Log in to Amerigroup Provider Self Service using your Availity user ID and password

[Never mind. Go back to log in.](#)

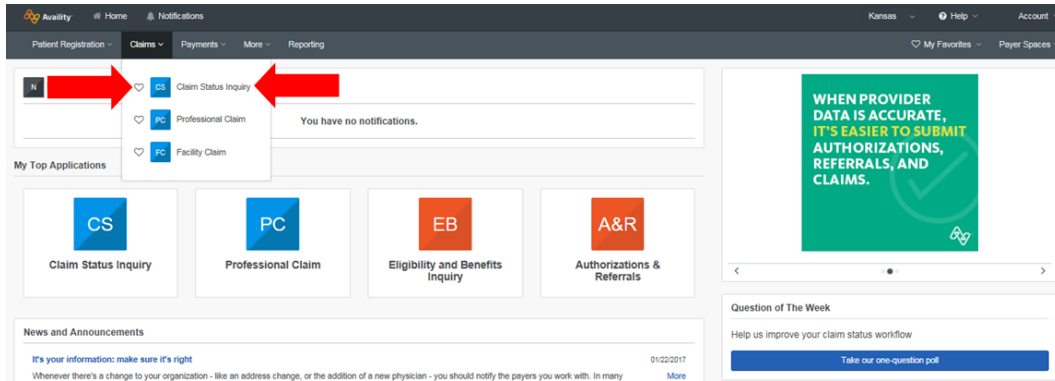
After logging in, select the **Claims** menu.

The screenshot shows the Amerigroup RealSolutions in healthcare provider portal. At the top left is the logo. Below it is a navigation menu with items: Home, Claims (highlighted with a red arrow), Precertification, Medical, Pharmacy, Members, Provider Education, Account Management, and Find a Doctor. To the right of the menu is a 'News & Announcements' section with three articles. Further right are 'Useful Publications' and 'Government Resources' sections. At the bottom left are contact numbers for Medicaid/CHIP and Medicare. At the bottom right is the copyright notice and a link to report waste, fraud, or abuse.

Choose **Check Claims Status** and then select **Go to Availity**.

The screenshot shows the 'Check Claims Status' page. The 'Claims' menu is expanded, and 'Check Claims Status' is highlighted with a red arrow. Below the menu is a yellow box with the text 'Go to Availity' and 'You are already logged in to your account.', also highlighted with a red arrow. The page content includes a heading 'Check Claims Status' and a sub-heading 'You can check the status of a claim at Availity.'

From the Avality dashboard, select the **Claims** menu and then choose **Claim Status Inquiry**.



Complete the *Claim Status Inquiry*. Items with a red asterisk (\*) are required.

A screenshot of the 'Claim Status Inquiry' form. The form is divided into several sections: 'Payer' and 'Organization' (both required fields with dropdown menus), 'Provider Information' (including a question about provider name, 'Express Entry - Provider' dropdown, and 'NPI' text input), 'Subscriber Information' (including a question about subscriber status, 'Subscriber ID', 'Subscriber Last Name', 'Subscriber First Name', 'Patient Date of Birth' date picker, 'Gender' dropdown, and 'Patient Account Number' text input), and 'Claim Information' (including 'Claim Service Date From' and 'To' date pickers, 'Claim Number', 'Total Claim Charge Amount', and 'Institutional Bill Type' text inputs). At the bottom are 'Submit', 'Clear', and 'Add to Batch' buttons.

Locate and select the claim for which you would like to submit an appeal.

Availity Home Notifications Kansas Help Account


Patient Registration Claims Payments More Reporting My Favorites Payer Spaces

### Claim Status Inquiry Results [Learn More >>](#)

Transaction ID: 1 Transaction Date: Jan 23, 2017 02:38 PM EST Customer ID:

[Edit Inquiry](#) [Print](#)

Payer: AMERIGROUP Subscriber ID:  
Provider: AMERIGROUP CORPORATION Patient Name:  
NPI: Patient Account #:  
Subscriber Name: Date of Service: 03/28/2016 - 03/28/2016



#### Claims Found

From-To Date of Service	Status Type	Claim Number	Date Processed	Check # / EFT	Billed Amount	Paid Amount
03/28/2016 - 03/28/2016	Finalized		04/01/2016		\$ 42.50	\$ 22.24
Status: Finalized/Payment The Claim/Line has been paid. Claim/Line has been paid. Status Date:04/01/2016						
03/28/2016 - 03/28/2016	denied		01/13/2017		\$ 75.00	\$ 0.00
Status: Finalized/Denial The Claim/Line has been denied. Denied Charge or Non-covered Charge. Status Date:01/13/2017						
03/28/2016 - 03/28/2016	Denied		12/31/2016		\$ 75.00	\$ 0.00
Status: Finalized/Denial The Claim/Line has been denied. Denied Charge or Non-covered Charge. Status Date:12/31/2016						
03/28/2016 - 03/28/2016	Denied		04/06/2016		\$ 75.00	\$ 0.00
Status: Finalized/Denial The Claim/Line has been denied. Denied Charge or Non-covered Charge. Status Date:04/06/2016						

[Edit Inquiry](#) [Print](#)

Under the *Claims Appeal* section of the *Claim Status Detail*, select **Dispute this claim**.

Availity Home Notifications Kansas Help Account

Patient Registration Claims Payments More Reporting My Favorites Payer Spaces

### Claim Status Detail [Learn More >>](#)

Transaction ID: Transaction Date: Jan 23, 2017 02:39 PM EST Customer ID:

[Return to Results](#) [Edit Inquiry](#) [Print](#)

Subscriber Name: Claim Number: Check Number:  
Subscriber ID: Bill Type: N/A Check Date: 01/13/2017  
Patient Name: Voucher ID: N/A Check Address¹:  
Patient Account #: Billed Amount: \$ 75.00 Paid Amount: \$ 0.00  
Provider Name: Claim Processed Date: 01/13/2017 Paid To: Provider  
NPI: Claim Received Date: 01/10/2017 Paid To Name¹:  
DRG¹: N/A Paid To Tax ID¹:

#### Claim Level Status

Status: Finalized/Denial The Claim/Line has been denied.  
Denied Charge or Non-covered Charge. Status Date: 01/13/2017

#### Service Line Status

[Show/Hide Status Messages](#)

From Service Date	To Service Date	Procedure Code	Revenue Code	Modifier	Quantity	Billed Amount	Allowed Amount	Patient Co-Ins¹	Patient Deductibles¹	Patient Co-Pay¹	Paid Amount	Non-Covered Amount¹
03/29/2016	03/29/2016		N/A		1	\$ 75.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Status: Finalized/Denial The Claim/Line has been denied. Denied Charge or Non-covered Charge. Status Date: 01/13/2017												
Remarks: TPO : Submitted after plan filing limit												
Total						\$ 75.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

#### Other Insurance Information

Carrier¹	Paid Amount¹
N/A	\$ 0.00

#### Claims Appeal

[Dispute this claim](#)

¹ Represents data elements that are not required by HIPAA for this transaction

[Return to Results](#) [Edit Inquiry](#) [Print](#)

A disclaimer message will appear. Select **I Agree** to be directed to the *Dispute a Claim* form.

## Disclaimer

You are about to be re-directed to a third-party site away from Availity's secure site, which may require a separate log-in. Availity provides the link to this site for your convenience and reference only. Availity cannot control such sites, does not necessarily endorse and is not responsible for their content, products, or services. You will remain logged in to Availity.

Complete the requested information on the *Dispute a Claim* form. Items with a red asterisk (\*) are required. When finished, select **Submit Dispute**.

**Dispute a Claim** To cancel this dispute [Close Window](#)

**Claim Details**

- Provider ID
- Provider NPI
- Provider Name
- Provider Address
- Provider City
- Provider State
- Provider Zip
- Member ID
- Member Last Name
- Member First Name
- Member Address
- Member City
- Member State
- Member Zip
- Member DOB
- Date Of Service From
- Date Of Service To
- Claim Type

**Who is the contact for this dispute?** \*required fields

First Name \*

Last Name \*

Street Address \*

City \*

State \*

Zip \*

Phone \*

Fax \*

Email

Preferred method of contact \*

**Please describe the reason for this dispute:**

**Supporting Files**

Attach any supporting documents for this request by selecting the file to attach below. **You can attach up to 5 files for a total file size of 25 MB.**

**Files must be formatted as:**  
.pdf, .xls, .xlsx, .doc, .docx, .tif, or .tiff

No file selected.

#### Tips and reminders:

- Ensure pop-up blockers are turned off to allow navigation to Amerigroup and Availity websites.
- If multiple claims for a member need to be reviewed, begin with the *Eligibility and Benefits Inquiry*. Once the *Eligibility and Benefits Inquiry* is completed, you can transfer into the *Claim Status Inquiry*, and the member's information will carry over.
- If the provider wishes to receive acknowledgement and resolution letters via email, they will need to change the *Preferred method of contact* to *Email* and enter an address where the letters can be securely sent.
- A general Availity Web Portal overview is located at:  
[https://apps.availity.com/availity/Demos/REC\\_AvailityWebPortal\\_AmerigroupOverview/index.htm](https://apps.availity.com/availity/Demos/REC_AvailityWebPortal_AmerigroupOverview/index.htm).
- For specifics on appeal submission time frames, please review the *Provider Resources & Documents* and the *Provider Manual* located on the provider website:  
<https://providers.amerigroup.com/KS>.