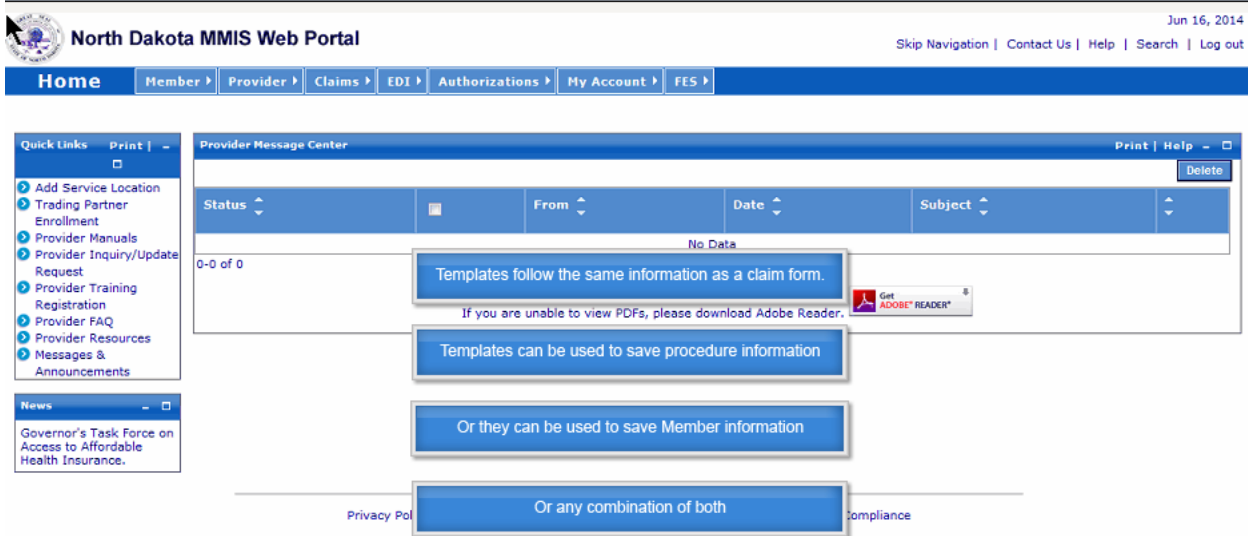


## Claim Templates

Claim templates can be used to create and submit claims. Claim templates can be created for specific patient, procedure or service claims. Claim templates can advantage providers who have reoccurring services. Examples of claim templates are vaccinations or routine dental exams.



**North Dakota MMIS Web Portal** Jun 16, 2014  
Skip Navigation | Contact Us | Help | Search | Log out

Home Member Provider Claims EDI Authorizations My Account FES

**Provider Message Center** Print | Help | Delete

Status	From	Date	Subject
No Data			
0-0 of 0			

Templates follow the same information as a claim form.

If you are unable to view PDFs, please download Adobe Reader.

Templates can be used to save procedure information

Or they can be used to save Member information

Or any combination of both

Privacy Policy | Compliance

North Dakota MMIS Web Portal May 12, 2014  
Skip Navigation | Contact Us | Help | Search | Log out

Home Member Provider **Claims** EDI Authorizations My Account FES

Quick Links Print -

- Add Service Location
- Trading Partner Enrollment
- Provider Manuals
- Provider Inquiry/Update Request
- Provider Training Registration
- Provider FAQ
- Provider Resources
- Messages & Announcements

News -

Governor's Task Force on Access to Affordable Health Insurance.

Provider Message: Status 0-0 of 0

Create Claims
 

- Create Professional Claim
- Create Institutional Claim
- Create Dental Claim
- Create Claim from Template**
- Create Claim from Processed Claim
- Travel/Lodging Claim
- HCBS/DD Claim

If you are unable to view PDFs, please download Adobe Reader.

©2014 Affiliated Computer Services, Inc. All Rights Reserved.  
[Privacy Policy](#) | [Site Map](#) | [Terms of Use](#) | [Browser Requirements](#) | [Accessibility Compliance](#)

Begin at home page. Select Claims. Then, Select Create Claims, Create Claim from Template.

North Dakota MMIS Web Portal Jun 16, 2014  
Skip Navigation | Contact Us | Help | Search | Log out

Home Member Provider **Claims** EDI Authorizations My Account FES

Create Template - Enter Template Name

**\* Required Field**

In order to create a new template, you must first

\* Template Name

Long Description  
Please enter a description for the new template

320 Characters Remaining

Create Claims
 

- Manage Claims
- Create Templates**
  - Manage Templates
  - Claim Status Inquiry
  - Payment Inquiry
  - 1099 Inquiry
- Create Professional Template
- Create Institutional Template
- Create Dental Template
- Create HCBS/DD Template
- Create Travel/Lodging Template

Continue' to proceed to the claim entry form.

Continue Reset Cancel

©2014 Affiliated Computer Services, Inc. All Rights Reserved.  
[Privacy Policy](#) | [Site Map](#) | [Terms of Use](#) | [Browser Requirements](#) | [Accessibility Compliance](#)

You need to determine and add a Template Name. If working with a large amount of claim templates, adding information in the Long Description may help. Thereafter, select Continue.

As you can see above, the claim template is now simply a blank claim



Create Professional Template Print | Help

**\*Required Field**

**Basic Claim Info** | Other Claim Info

Provider | Member | Basic Claim | Service Line Items

Is this a void/replacement?  
 Yes  No

**Submitter Information**

Submitter ID  
123456789

**Provider Information**

Go to [Other Claim Info](#) to enter information for other providers.

**Billing Provider**

**Note:** Healthcare Providers are required to submit National Provider ID.

Medicaid Provider ID 987654321	National Provider ID 1234567890	Taxonomy Code 123A45678B	Tax ID	SSN	Location Number
-----------------------------------	------------------------------------	-----------------------------	--------	-----	-----------------

**Additional Billing Provider Information**

\*Entity Qualifier

Currency Code

\*Org/Last Name First Name MI Suffix

Fill in the template with any information you want constant when creating claims using this template.



Create Professional Template Print | Help

**\*Required Field**

**Basic Claim Info** | Other Claim Info

Provider | Member | Basic Claim | Service Line Items

Is this a void/replacement?  
 Yes  No

**Submitter Information**

Submitter ID  
123456789

**Provider Information**

Go to [Other Claim Info](#) to enter information for other providers.

**Billing Provider**

**Note:** Healthcare Providers are required to submit National Provider ID.

Medicaid Provider ID 987654321	National Provider ID 1234567890	Taxonomy Code 123A45678B	Tax ID	SSN	Location Number
-----------------------------------	------------------------------------	-----------------------------	--------	-----	-----------------

**Additional Billing Provider Information**

\*Entity Qualifier

Currency Code

\*Org/Last Name First Name MI Suffix

Required fields are NOT required in a template.

Important to note: Required fields are NOT required in a template.

Ln #	Service Dates		Procedure Code	Modifiers				Diag Pointers				Line Item Charge Amount	Unit Code	Unit
	Begin	End		1	2	3	4	1	2	3	4			
No Data														
<b>New Line Item</b> <span style="float: right;">Save   Save &amp; Add Other Svc Info/TPL   Reset   Cancel</span>														
*Service Date Begin		Service Date End		Place of Service										
*Procedure Code		Procedure Description		Modifiers				1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>						
*Line Item Charge Amount		Diagnosis Pointers		2. <input type="text"/> 3. <input type="text"/> 4. <input type="text"/>										
*Unit Code		*Units												
<input type="checkbox"/> <b>Service Authorization</b>														
<input type="checkbox"/> <b>Additional Service Line Information</b>														
<input type="checkbox"/> ? Is there additional line-specific information/TPL to be entered? <input type="radio"/> Yes <input checked="" type="radio"/> No														
<input type="button" value="Save Template"/> <input type="button" value="Reset"/> <input type="button" value="Cancel"/>														

Select Save Template

## RECALLING AND EDITING A TEMPLATE

ndmmis.learnercommunity.com/Files/Protected/ContentPackage/7/3/a/1373916152b241b799354f4924233b09/CBT\_CL\_E\_Using\_C

North Dakota MMIS Web Portal Jun 16, 2014  
Skip Navigation | Contact Us | Help | Search | Log out

Home Member Provider **Claims** EDI Authorizations My Account FES

Quick Links: Add Service Location, Trading Partner, Enrollment, Provider Manuals, Provider Inquiry/Update Request, Provider Training Registration, Provider FAQ, Provider Resources, Messages & Announcements

News: Governor's Task Force on Access to Affordable Health Insurance.

Provider Message: **Create Templates** Manage Templates

Table with columns: Status, From, Date, Subject. No Data.

If you are unable to view PDFs, please download Adobe Reader.

©2014 Affiliated Computer Services, Inc. All Rights Reserved.  
 Privacy Policy | Site Map | Terms of Use | Browser Requirements | Accessibility Compliance

Select Manage Templates, then select View/Edit/Delete Template



View / Edit / Delete Template - Search Print | Help - □

**\* Required Field**

To conduct a search for a previously saved template, enter the name of the template or leave the template name field blank, optionally select a Template Type if it is known, and then click "Search". A search by Template Name will return that template if it exists, while a search without a Template Name will produce a list of existing saved templates. Selecting "Starts With" will produce a list of existing saved templates with the first two characters matching that search criteria. Selecting "Contains" will produce a list of templates with a word or phrase in the template name that matches the search criteria.

Template Name   Starts With  Contains

Template Type

- Dental
- Institutional
- Professional
- HCBS/DD
- Travel/Lodging

Type in the name or part of the name of the Template Name, select the Template Type. Thereafter, select Search.



View / Edit / Delete Template - Search Print | Help - □

**\* Required Field**

To conduct a search for a previously saved template, enter the name of the template or leave the template name field blank, optionally select a Template Type if it is known, and then click "Search". A search by Template Name will return that template if it exists, while a search without a Template Name will produce a list of existing saved templates. Selecting "Starts With" will produce a list of existing saved templates with the first two characters matching that search criteria. Selecting "Contains" will produce a list of templates with a word or phrase in the template name that matches the search criteria.

Template Name   Starts With  Contains

Template Type

- Dental
- Institutional
- Professional
- HCBS/DD
- Travel/Lodging

Multiple results will display in a table, single results will take you directly to that result

**SEARCH RESULTS**

Below is a list of templates that met your search criteria. To maintain the template, click on the row associated with the template you wish to display. You will be taken to the web form where you may enter your template.

Template Name	Form Type	Form Sub Type	Last Update	Last Updated By
<a href="#">TEST1</a>	Professional		06/16/2014	ROSIOR
<a href="#">TEST2</a>	Professional		06/16/2014	ROSIOR

1 - 2 of 2

From the Search results, select the Template you wish to work with.

Total Claim Charge Amount: \$0.00 Add Service Line Item

Ln #	Service Dates		Procedure Code	Modifiers				Diag Pointers				Line Item Charge Amount	Unit Code	Unit
	Begin	End		1	2	3	4	1	2	3	4			
1												\$0.00		

1 - 1 of 1

Edit Line Item Save | Save & Add Other Svc Info/TPL | Reset | Delete | Cancel

\*Service Date Begin:  Service Date End:  Place of Service:

\*Procedure Code:  Procedure Description:  Modifiers: 1.  2.  3.  4.

\*Line Item Charge Amount: \$ 0.00 Diagnosis Pointers: \*1.  2.  3.  4.

\*Unit Code:  \*Units:

Service Authorization

Additional Service Line Information

? Is there additional line-specific information/TPL to be entered?  
 Yes  No

Save Template | Reset | Cancel | Delete

You have the option to change any fields you like, to Save the Template again, Reset, Cancel or Delete the template.

North Dakota MMIS Web Portal Jun 30, 2014  
Skip Navigation | Contact Us | Help | Search | Log out

Home | Member | Provider | **Claims** | EDI | Authorizations | My Account | FES

Claims Main Page Print | -

The menu options allow you to create, edit, delete, submit and resubmit 837 Professional, Institutional and Dental claims. They also provide you with the means of creating, saving, editing and deleting claim templates, which are partially completed claim forms containing information regularly used in various types of claims (such as a provider's address or identifying information).

<b>Claims</b> <ul style="list-style-type: none"> <li>1099 Inquiry</li> <li>Claim Status Inquiry</li> <li>Payment Inquiry</li> </ul>	<b>Pharmacy Claims</b> <ul style="list-style-type: none"> <li>Create Pharmacy Claim</li> <li>Create Claim from Processed Claim</li> <li>Edit/Delete Saved Claim</li> <li>View Submitted Claim</li> <li>Claim Status Inquiry</li> </ul>
<b>Create Claims</b> <ul style="list-style-type: none"> <li>Professional Claim</li> <li>Institutional Claim</li> <li>Dental Claim</li> <li>HCBS/DD Claim</li> <li>Travel/Lodging Claim</li> <li>Claim from Template</li> <li>Claim from Processed Claim</li> </ul>	<b>Manage Claims</b> <ul style="list-style-type: none"> <li>Edit / Delete Saved Claim</li> <li>View Submitted Claims</li> </ul>
	<b>Create Templates</b> <ul style="list-style-type: none"> <li>Professional Template</li> <li>Institutional Template</li> <li>Dental Template</li> <li>HCBS/DD Template</li> <li>Travel/Lodging Template</li> </ul>
	<b>Manage Templates</b> <ul style="list-style-type: none"> <li>View / Edit / Delete Template</li> </ul>

©2014 Affiliated Computer Services, Inc. All Rights Reserved.  
 Privacy Policy | Site Map | Terms of Use | Browser Requirements | Accessibility Compliance

You can create a claim from a new template, an existing template that you previously created, or you can create a claim from a processed claim.

Create Claim From Template - Search Print | Help - □

**\* Required Field**

To conduct a search for a previously saved template, enter the name of the template or leave the template name field blank, optionally select a Template Type if it is known, and then click "Search". A search by Template Name will return that template if it exists, while a search without a Template Name will produce a list of existing saved templates. Selecting "Starts With" will produce a list of existing saved templates with the first two characters matching that search criteria. Selecting "Contains" will produce a list of templates with a word or phrase in the template name that matches the search criteria.

Template Name   Starts With  Contains

Template Type

Dental

Institutional

Professional

HCBS/DD

Travel/Lodging

**SEARCH RESULTS**

Below is a list of templates that met your search criteria. To create a new claim from click on the row associated with the you wish to display. You will be taken to the web form where you may enter your claim information.

Template Name	Form Type	Form Sub Type	Last Update	Last Updated By
<a href="#">PROFESSIONAL - BILLING INFO</a>	Professional		05/13/2014	LASTNAMEEX
<a href="#">PROFESSIONAL - MEMBER</a>	Professional		05/13/2014	LASTNAMEEX
<a href="#">PROFESSIONAL - SERVICE</a>	Professional		05/13/2014	LASTNAMEEX

1 - 3 of 3

Search results will appear if there are existing saved templates.

Add Service Line Item

**Total Claim Charge Amount: \$131.05**

Ln #	Service Dates		Procedure Code	Modifiers				Diag Pointers				Line Item Charge Amount	Unit Code	Unit
	Begin	End		1	2	3	4	1	2	3	4			
1			90746					1				\$131.05	Units	1.00000

1 - 1 of 1

Edit Line Item Save | Save & Add Other Svc Info/TPL | Reset | Delete | Cancel

\*Service Date Begin: 05/13/2014  Service Date End:  Place of Service:

\*Procedure Code: 90746  Procedure Description:  Modifiers: 1.  2.  3.  4.

\*Line Item Charge Amount: \$ 131.05  Diagnosis Pointers: 1. First Diagnosis  2.  3.  4.

\*Unit Code: Units  \*Units: 1.00000

? Is there additional line-specific information/TPL to be entered?  
 Yes  No

Complete all required information



Total Claim Charge Amount: \$131.05 Add Service Line Item

Ln #	Service Dates		Procedure Code	Modifiers				Diag Pointers				Line Item Charge Amount	Unit Code	Unit
	Begin	End		1	2	3	4	1	2	3	4			
1			90746					First				\$131.05	Units	1.00000
Diagnosis														

1 - 1 of 1

Edit Line Item Save | Save & Add Other Svc Info/TPL | Reset | Delete | Cancel

\*Service Date Begin: 05/13/2014 | Service Date End: | Place of Service:   
 \*Procedure Code: 90746 | Procedure Description: | Modifiers: 1. 2. 3. 4.   
 \*Line Item Charge Amount: \$ 131.05 | Diagnosis Pointers: 1. First Diagnosis 2. 3. 4.   
 \*Unit Code: Units | \*Units: 1.00000

Service Authorization

Additional Service Line Information

? Is there additional line-specific information/TPL to be entered?  
 Yes  No

Submit Claim | Save Claim | Reset | Cancel

Remember to revise the service date and any claim detail that changes

Total Claim Charge Amount: \$131.05 Add Service Line Item

Ln #	Service Dates		Procedure Code	Modifiers				Diag Pointers				Line Item Charge Amount	Unit Code	Unit
	Begin	End		1	2	3	4	1	2	3	4			
1			90746					First				\$131.05	Units	1.00000
Diagnosis														

1 - 1 of 1

Edit Line Item Save | Save & Add Other Svc Info/TPL | Reset | Delete | Cancel

\*Service Date Begin: 05/13/2014 | Service Date End: | Place of Service:   
 \*Procedure Code: 90746 | Procedure Description: | Modifiers: 1. 2. 3. 4.   
 \*Line Item Charge Amount: \$ 131.05 | Diagnosis Pointers: 1. First Diagnosis 2. 3. 4.   
 \*Unit Code: Units | \*Units: 1.00000

Service Authorization

Additional Service Line Information

? Is there additional line-specific information/TPL to be entered?  
 Yes  No

Submit Claim | Save Claim | Reset | Cancel

Remember to click Save before closing a section.