







Availity Essentials Overview

Molina Healthcare Providers

Where healthcare **connects**.



Important Notes About Using Availity

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When you use Availity Essentials, results and data come from payer systems. Information can vary by payer, plan, product, member, your organization, user account permissions, etc.

Information and images were current at the time this presentation was developed. Screen images and demonstrations are from a demo environment containing pre-loaded generic, de-identified information. Information might also be redacted or blurred.

A

It is a violation of HIPAA regulations to share credentials to a system that contains PII/ PHI. Do not share an Availity user ID with others. Your organization's Availity administrator sets up user IDs and assigns roles.

YOU SHOULD KNOW...

Availity supports Google Chrome, Firefox[®], and Microsoft Edge v79.



Be sure to allow pop-ups from:

www.apps.availity.com, www.availity.com, or any third-party websites accessed from the Availity Essentials, such as a payer's website.

In today's session, we'll explore...



More training?

Availity offers free on-demand and live training in the Availity Learning Center (ALC).

Log in to Availity Essentials and select **Help & Training > Get Trained** to search the ALC catalog.

Organization and user self-service



What are roles and permissions?



- Role (group of job functions)
- Permissions (job functions, tools)

Example: *Claim Status* role includes permissions for Claim Status, Remittance Viewer, Appeal or Correct Eligible Claims (from Payer Spaces), etc.



User account roles

Every user gets the *Base* role. It includes:

- Home page
- Notification Center
- My Account page
- Help & Training
- Payer Spaces*

*Some options in payer spaces require additional roles as determined by the payer. Select **Help & Training > Find Help > Payer Tools** > payer name for more information. Your organization's Availity User Administrator(s) can assign additional roles to users. *For example:*

To do this	You'll need this role
Check eligibility and benefits	Eligibility and Benefits
Submit a direct-entry claim	Claims
Check claim status	Claims Status
Get remit data in remittance viewer	Claim Status
Use Attachments Dashboard	Medical Attachments
Message with the payer	Messaging (plus the application)

Q

Add New Providers to Your Organization



Set yourself up for success...

Add prov	Add providers here					
Availity 🛛 😑 essentials 🐐 🔹 🗢 My Fa	vorites 🗸 🔹 🕹 Arkansas 🗸 😧 Help & Training 🗸 🔥 D	emo's Account 🗸 🔒 Logout				
Patient Registration	y Providers Reporting Payer Spaces More	Keyword Search Q				
Active 2 Pending Rejected	Providers	Add Provider(s)				
PSL99 Family Dentists Customer Tax ID NPI	Search for a provider by name, taxonomy code, or address	A-Z J≟ ▼				
ID N/A	Allergy, Betty Individual	=				

...so they display here

Select a Provider 0

Search for a Provider	
	Q
ABC Hospital	
Driver, David	
Family, Joe	
Provider, Betty	





Joe Atypical Individual









A payer space contains links to payer-specific applications, resources, and news and announcements. A payer space might include applications and resources that reside on Availity Essentials and applications and resources that reside on the payer's or third-party website.



Introduction

Role(s)

- Base
- Roles for payer-specific applications

Access

Payer Spaces > the payer's name

Training

Payer Spaces – Training Demo

Power tips

- You can mark applications and resources as favorites in payer spaces.
- Check Payer Spaces often to check for new applications, resources, and news/ announcements.
- **Keyword Search** in the top navigation bar of Availity Essentials searches across all payer spaces.



Access









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Navigation tips

	Availity Cessen Patient Registration ~	tials A Home A Notifications Claims & Payments - My Prov search this payer space	1 viders ~	♥ My Favorites ✓ New York ✓ Reporting Payer Spaces ✓ More ✓		Use Sort By optic quickly locate applications or ite	ons to e ems.	rd S en	Logout
	Applications THESE LINKS CONTENT OF	Resources News and Ann S MAY RE-DIRECT TO THIRD PARTY R SECURITY OF ANY THIRD PARTY S	SITES A	Ments AND ARE PROVIDED FOR YOUR CONVENIENCE O AND DOES NOT ENDORSE ANY PRODUCTS OR SE	ONLY. A ERVICE	Sort By VAILITY IS NOT RESPONSIBLE FOR IS PROVIDED BY THIRD PARTIES!	A-Z THE	~	
elect the heart ico to make the oplication a favori	on Claims te. Correct of finalized	or Correct Eligible or submit appeals for claims in status		 Claims Template Portal Create claim templates for frequently submitted claims 		 HEDIS Profile Compare your HEDIS scores national benchmarks 	s with		
	♡ Member View and Members Provider	er Roster navigate through a list of assigned to a Primary Care		 Reports Submit/Access payer specific reports 		 Prior Auths Submit service requests, che and create auth request temp 	eck status plates.		

Q	•

Linking out to health plan third-party apps

A	Availity 🕞 esse	entials 🕋 Home 🌲	Notifications 1	🌣 My Fa	vorites ~		Florida ~	Help & Training	🗸 🔹 🕺 Claudie's Account 🗸		🔒 Logout
	Patient Registration ~	Claims & Payments ~	My Providers ~	Reporting	Payer Spaces ~	More ~				Keywo	ord Search Q
		Home > Molina Hea	Ithcare > Prior A	uths							
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		Provider ID 📀									
		Enter required fields	s first								
		Service Request/Auth	horization Option	0							
		Select								\sim	
						Cont	inue				

Note: In the **Tax ID** field, select the primary tax ID or secondary tax ID set up for your organization by your Availity Essentials administrator.

Need help? Select question mark icons next to some fields.



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HEALTH	CARE Provider Se	If Services				Jul 01 2020 11
ior authorization requests for visit	(PA) is not required for	visits to participating	network specialists, however,	referral is required for most s	pecialties with limited ex	cceptions. Please do not
inclueses for this	s to participating speci					Save Clear Save T
ervice Request/Au	thorization Form					
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Member Search						
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Eligibility and Benefits Inquiry (E&B)

Verify a patient's eligibility and confirm the covered benefits.



E&B

Overview

Role

Eligibility and Benefits

Access

Patient Registration > Eligibility & Benefits Inquiry

Training

Eligibility and Benefits – Training Demo

Power tips

Have access to more than one org? Select the org in the upper-right of the E&B request page.

Need to run another similar E&B? Save time by editing an existing E&B in your patient history list.

Want to save time? If you submitted an E&B inquiry in the past 24 hours, you can select a patient from the **Select a Patient** field in other apps to prepopulate patient data from the E&B results.



E&B request

Top of page

Availity essentials A Home A Notifications 1 🗘 🗘 My Favorites	✓ Region ✓ ? He	Help & Training 🗸 😥 Claudie's Account 🗸 🤷 Lo	gout
Patient Registration < Claims & Payments < My Providers < Reporting Pay	ver Spaces v More v	Keyword Search	٩
Search My Patients Only -		TEST - Demo Org - P 🔹 🛃 New Request	
E Detail View	New Request	Watch a quick de	•
AVAILITY Health Benefit Transaction D Select the payer and then	Payer MOLINA HEALTHCARE	Verify or select the organization first.	
complete the page in order.	Provider Information		
	Select a Provider ?	*	
	* NPI @		
	Service Information * As of Date 10/28/2020		
	* Benefit / Service Type 😧 Health Benefit Plan Coverage 🗱	•	
	Patient Information		
	Patient Search Option 2		

E&B request

Bottom of page and Submit button

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AVAILITY, SOPHIA M	Patient Search Option)		
Health Benefit Plan Coverage Transaction Date: Oct 27 2:31 pm	Patient ID, Date of Birth,	Patient State of Residence	Ŧ	
	* Patient ID 😧			
	* Date of Birth			
	* State of Residence			
	Please Select a State		Ŧ	
	Gender 😧			
	Patient Relationship to Su	ihscriber 0		
	Self		v	
	Submit another patient	t		
		Submit		



History list and top section

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Patient Registration ∨ Claims	& Payments < My Providers < Reporting Payer Spa	aces v More v	Кеу	word Search Q
Search	My Patients Only		TEST - Demo Org - P 🔹	ew Request
Detail View List View	Date of Service Oct 29, 2020	Transaction ID: 14491324	Transaction Date: Oct 29 3:53 pm Customer ID: 1194	
AVAILITY, OHIO Health Benefit Plan Coverage Transaction Date: Oct 29 3:53 pm	Subscriber Member ID DOB Gender	Plan / Coverage Date Jan 01, 2020 - Dec 31, 2020	Coverage questions?	Select buttons and links next to
Member ID Payer: MOLINA HEALTHCARE DOB:	HEALTHCARE	View Member ID Card		the payer's logo, when available,
I ⊂ Edit	PREFERRED LANGUAGE - ENGLISE ETHNICITY - ASIAN	H		for additional features.
Select a card in the patient history list to display response results.	Subscriber Information	Benefits Care Reminders 7		
	Member ID			
The patient history list holds up to 50 patient cards. Each patient card remains on the list for 24 hours from the time an E&B request is submitted.	Plan / Product Information Active Coverage Plan / Product Core Care Bronze 1	Service Types Hospital Hospital - Outpatient		

The **Patient Information** tab includes sections, such as:

- Subscriber Information
- Plan / Product Information
- Payer Details
- Other or Additional Payers
- Provider Details
- Primary Care Provider
- Managed Care Coordinator

Remember: Information is provided by the health plan. Detail might vary by health plan, member, plan type, etc.

Patient Information tab

atient Information	Coverage and Benefits	Care Reminders 7
Subscriber Inf	ormation	
Member ID		
Plan / Product	Information	
Active Coverage Plan / Product		Service Types Hospital Hospital - Outpatient Medical Care Professional (Physician) Visit - Office Psychiatric - Outpatient
Active Coverage Fa	a mily er	Service Types Routine (Preventive) Dental
Payer Details		Other or Additional Payers
Payer MOLINA H	EALTHCARE	Primary Payer Payer Payer ID Insurance Type Service Type



Coverage and Benefits tab

The **Coverage and Benefits** tab includes sections of service/benefit information.

Remember: Information is provided by the health plan. Detail might vary by health plan, member, plan type, etc.

Select an option to jump to a section.

Patient Information	Coverage and Benefits	Care Reminders 7	
FILTER BY NETWORK	All Networks		
REQUENTLY VIEWED			
Health Benefit Plan Cov	Heal	th Benefit Plan Coverage - 30	C Feedback
Additional Payers	· · · · · · · · · · · · · · · · · · ·		
Contact Information	Addi	tional Payers - Health Benefit Plan Coverage	
	Prima	n Payer	
Hospital	Paver	y rayer	
Co-Payment	Paver	D	
Co-Insurance	Insurar	ice Type	
Out of Pocket (Stop Lo	(Insured	l or Subscriber	
Out of Pocket (Stop Lu	Membe	r Identification Number	
Hospital - Outpatient	Group	Number	
Co-Payment	Coordi	nation of Benefits	
Co-Insurance	Eligibil	ity Date	
Deductible	Payer (Contact Information	
Out of Pocket (Stop Lo	ss)		
Medical Care			
Co-Payment			
Co-Insurance			
Deductible	Cont	act Information Health Reposit Plan Courses	
Out of Pocket (Stop Lo	ss)	act mormation - nearth benefit Man Coverage	
	Prima	ry Care Provider	
Professional (Physician)		
Co-Payment			
Co-Insurance	Name		
Deductible	NPI		



Care Reminders tab

When available, select the **Care Reminders** tab to review care reminders for the patient.

- Each care reminder includes the measure and a message.
- Select the **Print** button to print just this tab. You can also include care reminders to print when you use the E&B results print option.

Remember: Information is provided by the health plan. Detail might vary by health plan, member, plan type, etc.

Patient Information	Coverage and Benefits	Care Reminders 7		
Care Remin	ders		MOLINA HEALTHCARE	Give Feedback
MEASURE			MESSAGE	
196 - Annual Dental	Visit			
196 - Annual Dental	Visit		You should see your dentist every year to make sure your	teeth are healthy
199 - Adolescent We	ell Care		A Well-care visit is recommended yearly to keep your teen	healthy
214 - Children and A	dolescent's Access to Prima	ry Care Practitioners	A Well-care visit is recommended yearly to make sure your	child is developing
Care reminders are	based on clinical and adminis	strative information subm	itted to participating insurance companies. Such informatio	n may be incomplete
or inaccurate, and a treatment purposes.	s such care reminders are no	t a substitute for profess	ional judgement. Care reminders are solely for use by the r	ecipient provider for
				🔒 Print





Send messages to participating payers from select applications.

Manage conversations in the Messaging application.



Messaging

Introduction

Role(s)

Messaging App (or Messaging App – Admin)

Access

- To start a message, select the **Send a message to the payer** button on an eligibility and benefits results page.
- To check and reply to messages, select an option in the **Messaging** section on the Home page.

Training

Messaging a Payer – Training Program

Power tips

- For some payers, send attachment(s) with a message.
- Search, sort, and filter conversations.

Admins can:

- Assign conversations.
- View summaries of conversations.



Messaging

E&B result with message button



Add Attachments

Send

Messaging

Application on Home page

Example: Home page with Messaging app



Example: Messaging queue with pending message displayed

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Patient Registration ~ Claims & Payments ~ My Providers ~ Re	porting Payer Spaces ~ More ~ Availity I	nternal Links ~	Keyword Search Q
Home > Messaging			
Messaging			Give Feedback
Most Recently Updated 17 Filter T	Coordination of Benefits ANDY APPLE	Transaction ID 552121092216001966578643000 16977 Transaction Type Eligibility	Status: 🔤 🏝 Created on: Sep 15, 2020 3:20 pm
Organization TEST - Ed Broome Physician Practice Org for Portal Team's Q Search By	Service Type Code 30 Patient Information Member ID112233445566	Service Type Eligibility Start Date Health Benefit Plan Coverage 05/1/2017 Subscriber Information Name/NDY APPLE	Eligibility End Date 12/31/2020 Provider Information Name Availity Provider
Q Search	DOB Dec 9, 1988 Gender Male Relationship to Subscriber 18	Member ID112233445566 DOB Dec 9, 1988 Gender Male	NPI 1234567893
Submit E	Me This is a test message.	Tuesday, Septe	mber 15th 2020 3:20 pm
ANDY APPLE112233445566 51082 - Eligibility Coordination of Benefits Service Type Code 30 Service Type Health Benefit Plan Coverage Eligibility Start Date 05/1/2017			

Search for claims your organization filed with participating payers.

Tip: In general, you can inquire about all claims your organization has submitted, including those not submitted originally through Availity.



Introduction

Role(s)

Claim Status

Access

Claims & Payments > Claim Status

Training

Claim Status – Training Demo

Power tips

Timesaver

Select a patient from the **Select a Patient** field to pre-populate patient data that was entered in previous eligibility and benefit inquiries submitted in the past 24 hours.



Request (top)

Availity	ntials 🖶 Home 🌲 Notifications 🚺 🛇	2 My Favorites ∽	Region ~	⑦ Help & Training ∨	😥 Claudie's Account 🗸		🔒 Logout
Patient Registration ~	Claims & Payments > My Providers > I	Reporting Payer Spaces ~ I	More ~			Кеуwо	rd Search Q
	Home > Dashboard			Need Help? W	latch a demo for Claim Statu	IS	A
	Claim Status				Give Feedback		
	Organization		Payer				
	TEST - Demo Org - Provider	~	PAYER NAME		~		
	HIPAA Standard						
	Provider Information						
	Is the provider the same as the organiza ● Yes ○ No	ation name? o					
If you submitted an	Select a Provider						
E&B in past 24	Select				~		
hours for this payer,	Provider NPI @						
select the patient to							
populate patient	Patient Information						
information fields.	Select a Patient optional						
	Select				· ·		

Request (bottom)

Availity 😑 esser	ntials 🛪 Home 🔺 Notifications 1	🌣 My Favor	ites ~		Region ~	😢 Help & Training 🗸	😥 Claudie's Account 🗸		🔒 Logout
Patient Registration ~	Claims & Payments V My Providers V	Reporting	Payer Spaces ~	More ~				Keywo	ord Search Q
	MM/DD/YYYY								
	Patient Gender optional								
	Select						· ·		
	Patient Account Number @ optional								
	Patient's Relationship to Subscriber	ptional							
	Self						~		
	Claim Information								
	Service Dates o								
	From Date			- To Date	•		m		
	Claim Number optional								
	Institutional Bill Type optional								
							Submit		



Select a claim card on the left to display the claim status on the right.

Claim status includes line level information.

Finalized claim? Check remittance viewer for additional information.

Response results



Direct-entry (DE) Claim (Professional and Facility)

Quickly submit a real-time, electronic claim to help accelerate the claims and reimbursement process. Claim forms are based on the paper and x12 versions:

- Professional Claim: CMS-1500, 837P
- Facility Claim: UB04, CMS-1450, 837I (also known as institutional claim)



Introduction

Role(s)

Claims (to access claim forms) EDI File Management (for batch reports) Medical Attachments (for tracking attachments)

Access

Claims & Payments > Professional Claim Claims & Payments > Facility Claim

Training

Professional Claim – Training Demo Facility Claim – Training Demo

Power tips

- Save time by running an E&B first.
- Submit primary, secondary, or tertiary claims. (Responsibility Sequence field)
- Include up to 50-service (claim) lines on a claim.
- Submit an initial or corrected claim. (**Frequency Type** field)
- Use integrated code lookup tools.
- Set up all providers and facilities in express entry.
- Submit supporting documentation (attachments) at the same time as you submit the claim.



Claim entry page (select options, first)

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		Home > Professio	nal Claim								
Type of displays	claim s here.	Profe	essional	Claim						Give Feedback	< compared with the second sec
		 Confirm which 	organization and pa	ayer you would	like to submit cla	aims for.					
		Organization									
		TEST - Demo Or	g - Provider				~				
		Transaction									
		Professional Clai	m				~				
		Payer 😡						_			
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		MOLINA HEALTH	ICARE								
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Claim entry page

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		Professi	onal Clai	im			Give Feedback	MOLINA [®] HEALTHCARE		
Stort of	top	Fields marked wit	th an asterisk * are re	equired.						
Start at	nploto	INSURANCE C	OMPANY/BENEFI	IT PLAN INFORM	ATION					
claim in	order.	* Responsibility S Primary	equence o	~						
		PATIENT INFO	RMATION							
		Select a patient (F	Patients in the list are	from your eligibility a	and benefits inquiries	in the last 24 hours	s for the current organiz	ration)		

Claim response page

Patent Registratio v Claims & Payments v My Providers v Reporting Payer Space v More v Report of Second Claim Home > Select > Professional Claim Give Feedback Your claim has been sent to Health plan name which processes claims in batches. You will receive the responses for this claim in your Receives Files e mailbox. Transaction ID: Claim Number: Submission Type: Submission Type: Submission Type: Date(s) of Service: Patient Name:	Availity 🕒 ess	entials 希 Home 🔺	Notifications 1	🗘 My Favo	orites ~		Florida ~	3 Help & Training ∨	Sandy's Acc	count 🗸 🔒 Logout
Home > Select > Professional Claim Cive Feedback Vour claim has been sent to Receives Files • mailbox. Transaction ID: Claim Number: Submission Type: Submission Type: Submission Type: Date(s) of Service: Patent Name:	Patient Registration ~	Claims & Payments ~	My Providers ~	Reporting	Payer Spaces ~	More ~				Keyword Search Q
Professional Claim Give Feedback Vour claim has been sent to Receives Files e mailbox. Health plan name which processes claims in batches. You will receive the responses for this claim in your Receives Files e mailbox. Transaction ID: Claim Number: Submission Type: Submission Date: Date(s) of Service: Patient Name:		Home > Select > Pr	rofessional Claim							
Your claim has been sent to Health plan name which processes claims in batches. You will receive the responses for this claim in your Receives Files • mailbox. Transaction ID: Claim Number: Submission Type: Submission Date: Date(s) of Service: Patient Name:		Professi	onal Cl	aim				Give Fe	eedback	
Transaction ID: Claim Number: Submission Type: Submission Date: Date(s) of Service: Patient Name:		Your claim has been Receives Files o ma	sent to He ailbox.	ealth plan r	name whic	ch processes claims in bat	tches. You will receive the r	responses for this claim	in your	
Subscriber ID: Billing Provider Name: Billing Provider NPI: Billing Provider Tax ID: Total Charges:		Transaction ID: Claim Number: Submission Type Submission Date Date(s) of Service Patient Name: Subscriber ID: Billing Provider I Billing Provider I Total Charges:	e: e: Name: NPI: Tax ID:					HEALT	L INA HCARE	



Send attachments electronically and review history records in your organization's Attachments Dashboard.



Attachments Dashboard – Intro

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	Patient Registration V Claims & Pay	ments v My Providers v Reporting Paye	er Spaces × More ×			Keyword Search Q	
	Home > Provider Work Queue				Need Help? Watch a de	emo about Attachments	
	A Attachments Das	nboard			Provider Registration	Send Attachment	Buttons
Options	Open Search Form Q Sort Ascending	By: Required By Date V	ilter by Product Category: Select	v	Filter by status: Select		Dattonio
Tabs	Inbox Sent History Report	ting					
	Request	Patient	Payer	Provider	Details		
			1 There are no items currently in this que	eue			
Records							

Attachments Dashboard – Sent tab

	Availity 🕒 ess	ientials 🕋 Home 🛛 🜲 Noti	īcations 1 🛛 🌣 My Favori	ites ~	Region	n V ? Help & Training	Claudie's Account	🔒 Logout
	Patient Registration ~	Claims & Payments ~ My	Providers v Reporting F	Payer Spaces < More				Keyword Search Q
	Home > Provider	Work Queue ents Dashboar	ď				Need Help? Watch a d Provider Registration	emo about Attachments Send Attachment
	Search by patient	name, provider name, etc	Sort Descending By	r: Status Date	-	Filter by s	status: Select	~
	Inbox Sent 23	History Reporting						
	Request		Patient	Pa	/er	Provider	Details	*
	MEDICAL CLAIM SUBMITTED 10/30/2	2020		M HE	OLINA [®] Althcare		\$0 • 04/29/2020 • 04/29/2020	ా
			1.0					
Each record category/type provider, and	includes a e, status a d service d	record numb nd date, patie ate informatio	ber, ent, payer, on.					
Tip: Select a Detail windov	a record to w.	display the A	ttachment	-				



On the Medical Attachments page, make selections to display applicable fields.

- 1. Select the organization and payer.
- 2. Select an option in the **Request** for Information section that displays.

Note: The **Claim Information** section of the form varies based on your selection.

- 3. Complete the required sections and fields that display and add attachments.
- 4. Select the **Send Attachment(s)** button.

Send Attachments button

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Patient Registration ~	Claims & Payments V My Providers V Reporting Payer Spaces V Mor	e v			Keyword Search Q
Home > Provider \	Nork Queue > Send Attachment			Need Help? Watch a	demo about Attachments
A Medical	Attachments				
	Organization				
	TEST - Availity Training	~			
	Paver				
	MOLINA HEALTHCARE FLORIDA	~			
	Deguart for Information				
	Select Yes, if you are responding to a request from the health plan and ha	ive a payer-assigned claim	number.		
2	Select No, if you have a submitter-assigned Attachment Control Number t	hat matches the PWK segr	ment in a claim.		
	• Yes 🔾 No				
	Provider				
2					
	Attach Supporting Documentation				
	ADDING ATTACHMENTS:	aif			
	•File names cannot contain spaces or special characters with the except	otion of "-" and "_".			
	Reason				
	11503-0 - Medical Records	Sample2.jpg	_	••••	
		• Add Another File A	Attachment		
				Add Attachment	
	Clear Values			Send Attachment(s)	
			4		

Remittance viewer

Use remittance viewer to view, search, and reconcile electronic remittance (ERA) data and download EOPs/EOBs, when available.



Remittance viewer Check/EFT tab

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	Patient Registration < Claims & Payments <	My Providers ~ Reporting	Payer Spaces ~ M	ore ~			Keyword Search Q
	Home > Remittance Viewer					Need Help? Watch a de Need help getting acces	mo for Remittance Viewer s to EOP/EOBs?
	Remittance Viewe	er				Manage Access	Give Feedback
Tabs	Check / EFT Claim						
Search	Search Check / EFT #, Tax ID, NPI, Payer Nar	ne		Check / EFT Dates		-	Search
Filters	Filter by: Clear all filters « Organization	Payments issued fro	m 11/02/2019 to 1 ′	1/02/2020	« First <mark>1</mark> 2 Last »	Showing 1 - 25 of mo	Download CSV
	Check / EFT Amount	Check/EFT # 🜩	Payer ≑	Payee 🗢	Check/EFT Date 💲	Received by Q Availity ≎	Check/EFT Actions
	Date Received by Availity Start Date - End Date #		Link to				\$172.24 🗈 📩
	Filter		claims				\$78.49 🗈 📩

Remittance viewer Claim tab

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Home > Remittance Viewer								Need Help? Watch a demo for Remittance Viewer Need help getting access to EOP/EOBs?			
Remittance Viewe	er			Mana	ge Access	Manag	ge Access	Give F	Feedback		
Check / EFT Claim											
Search Claim #, Check / EFT #, Tax ID, NPI, M	ember ID, Patient (Control #, Payer Na	ame Chec	k / EFT Dates		-		Ê	Search		
X Check / EFT Number											
Filter by: Clear all filters «	Payments is:	sued from 07/2	4/2020 to 07/24/20	20					wnload CSV		
Organization					« F	irst 1 La	ast » She	owing 1 - 8 of	f 8 Remits		
Patient Name	Service Dates ≑	Claim # ≑	Payer ≑	Check/EFT #	Patient Name (Patient Control #)	Patient Amt ≑	Total Charged	Total Paid	Actions		
Patient ID				(Check/EFT Date) \$	(ID) ≑		Amt ≑	Amt ≑		Do	
						\$0.00	\$135.30	\$113.43	🖟 Et 📥 , 🕠	E(av	

Get Access page example

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Patient Registration \sim	Claims & Payments ~ My Providers ~	Reporting Payer Spaces ~	More ~			Keyword Search Q
Home > Remittance View	er > Manage Access > Get Access				Need Help? Watch a Need help getting acc	demo for Remittance Viewer cess to EOP/EOBs?
Remittar	nce Viewer					Give Feedback
GBack to Manage Access						
Get Access						
Can't find a remit? Pleas recent ERA file/EOB.	e authenticate your organization to acce	ss remittance information, by	providing check or EFT informati	on for an ERA you received	l within the past 30 days ((recommended) or most
Why am I being aske	ed to provide payment information?					
Organization	Select	~				
Payee Tax ID						
Check/EFT Trace Number 🝞						
Check/EFT Amount	\$					
Check/EFT Date	mm/dd/yyyy	#				
Get Access	Cancel					



Finding courses fast

We've curated some recommended courses for Molina providers

In Availity Essentials, select **Help & Training > Get Trained** and then search the ALC catalog by keyword 'Molina' to quickly locate and enroll for courses you're interested in.



General application training

- Eligibility and Benefits Inquiry Training Demo
- Claim Status Training Demo
- Remittance Solutions Training Demo
- Attachments (new) Online Course
- Messaging a Payer Training Program

Focus on direct-entry claims

- Professional Claim (new) Training Demo
- Facility Claim (new) Training Demo
- Secondary and Tertiary Claims Online Course
- Follow Up on Web-Entered (direct-entry) Claims Online Course

Administrator training

- Availity Essentials Administrator Onboarding Training Program
- Medical Attachments Setup Online Course





