



# File Upload ANSI/837

# Introduction

- You must have your assigned User ID, Password and Organization ID
  - Delivered to you via....
  - Or, call 866-367-9778
- What is an **ANSI 837/NSF File**
  - An ANSI 837/NSF File is an industry standard claim file format used by ENS to submit electronic claims for payment
- This lesson will show you how to
  - Find the Home Page
  - Login to the Medical Claims Center
  - Upload Claims Files (you must know the location of the claim file to be uploaded)
  - View Reports
- Read the instructions in the gray boxes in this lesson
- Questions or problems can be reported to Technical Support at:
  - Email: [tsupport@ENShealth.com](mailto:tsupport@ENShealth.com)
  - Or phone: 1-866-367-9778

# Let's Get Started

From a web browser, locate the Main Home Page at: [http:// www.enshealth.com](http://www.enshealth.com)  
Helpful hint: once you are at theHome Page, save it as a favorite for future use

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- Client Access Login
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- Download Center
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- Payer Lists



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Click on "Client Access"



# Logging In

**INGENIX.**

Enter your User ID,  
Password and  
Organization ID

*Login*  
to Medical Claims Center

Username:

Password:

Organization ID:

Login

# File Upload

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*Health-e* Network® Services

- Health-e Claims
- Health-e Eligibility
- Real-Time Claim Status
- Referral Request Home
- Administrator
- Message Center
- File Upload**
- Electronic Claims Tracking (ECT)
- Manage Provider Information
- Electronic Remittance Advice
- Patient Statements

**New! Improved Message Center**

- Search for provider reports!
- [Click here for details](#)

**Health-e Network**

- NPI enhancements and setup
- [Click here for details](#)

**IEDIS Payer Lists**

- [Medical Claims](#)
- [Hospital Claims](#)
- [Eligibility](#)
- [Claim Status](#)
- [Referrals / Authorizations](#)
- [ERA](#)

**Make a stronger statement**

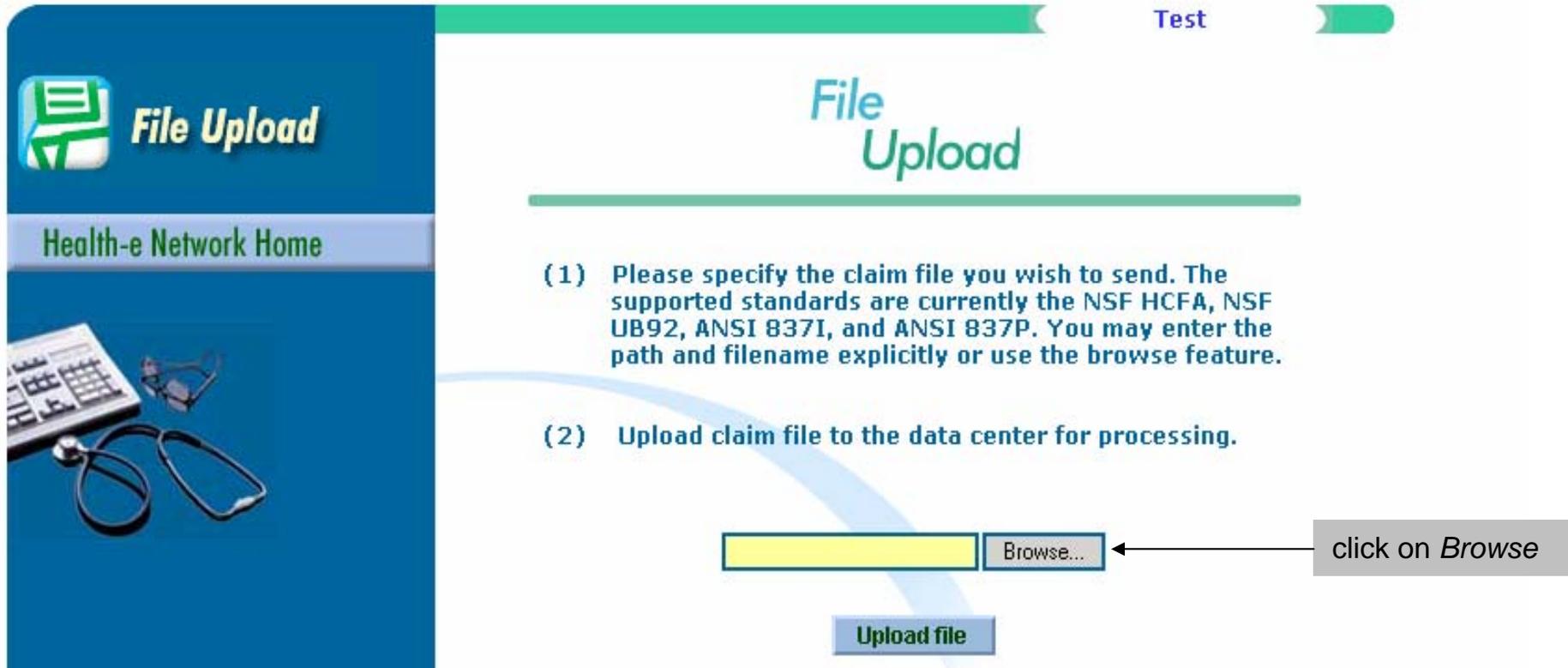
Streamline processes and speed revenue with comprehensive billing statements and payment options from Patient Statements and Payments Manager.

[>Learn more](#)

**INGENIX.**

to upload a claim file, click on *File Upload*

# File Upload, Cont.



The screenshot shows a web application interface for file upload. On the left is a blue sidebar with a logo, the text "File Upload", and "Health-e Network Home". The main content area has a green header with "File Upload" and a "Test" button. Two instructions are listed: (1) Please specify the claim file you wish to send. The supported standards are currently the NSF HCFA, NSF UB92, ANSI 837I, and ANSI 837P. You may enter the path and filename explicitly or use the browse feature. (2) Upload claim file to the data center for processing. Below the instructions is a form with a yellow input field, a "Browse..." button, and an "Upload file" button. A callout box with an arrow points to the "Browse..." button, containing the text "click on *Browse*".

Test

## File Upload

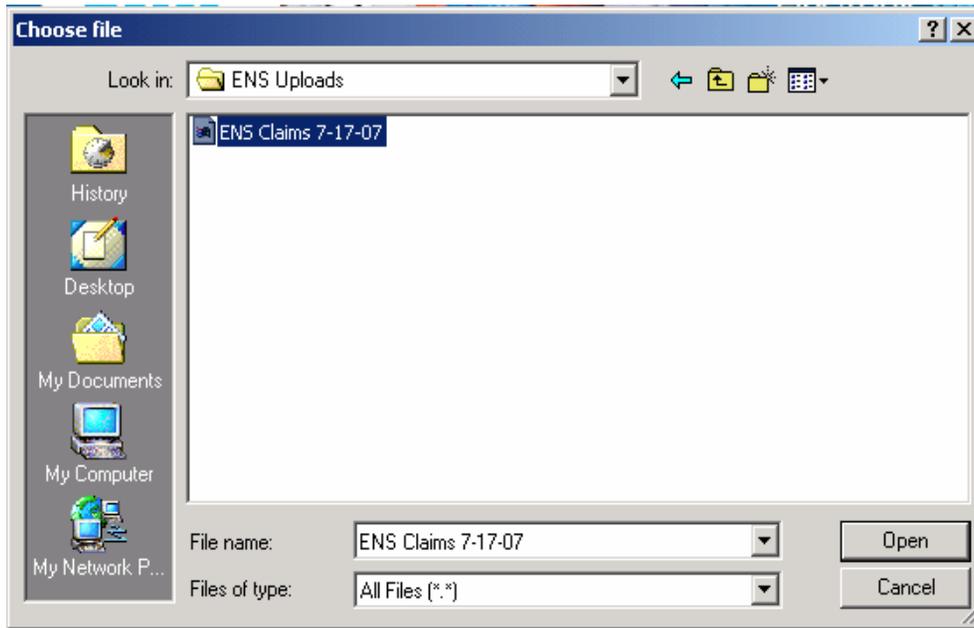
Health-e Network Home

- (1) Please specify the claim file you wish to send. The supported standards are currently the NSF HCFA, NSF UB92, ANSI 837I, and ANSI 837P. You may enter the path and filename explicitly or use the browse feature.
- (2) Upload claim file to the data center for processing.

Browse... click on *Browse*

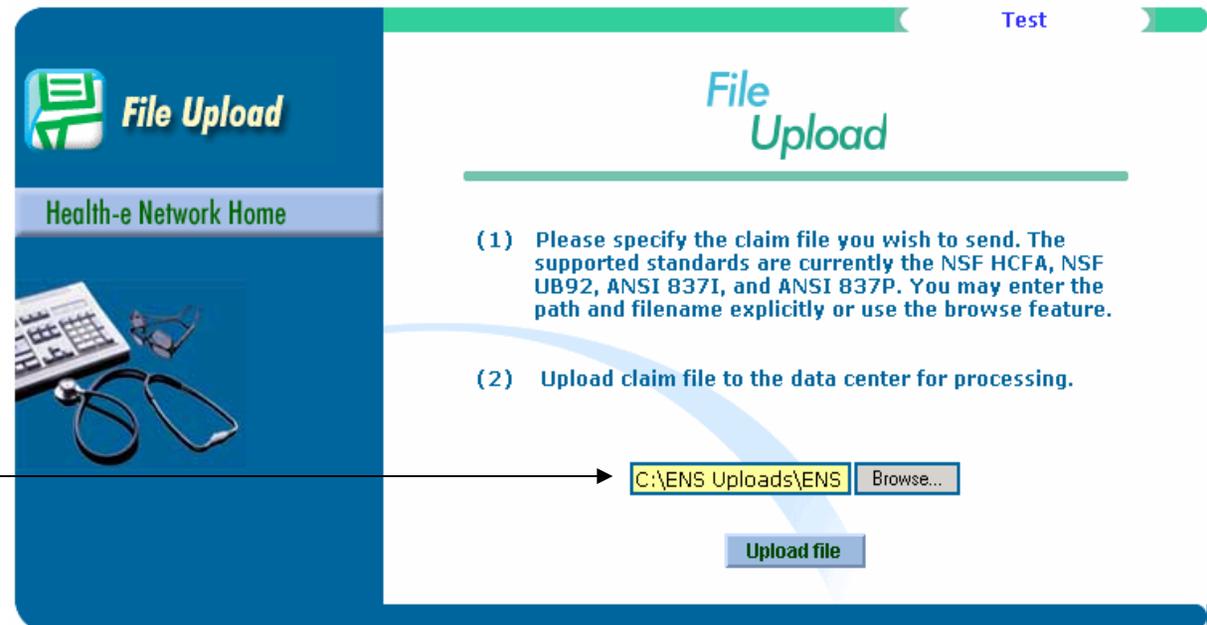
Upload file

# File Upload, Cont.



1 Browse to the claim file to be uploaded, select it, then click on Open

2 The name and location of your file will be displayed in the yellow text box. This is the file that you will upload



# File Upload, Cont.

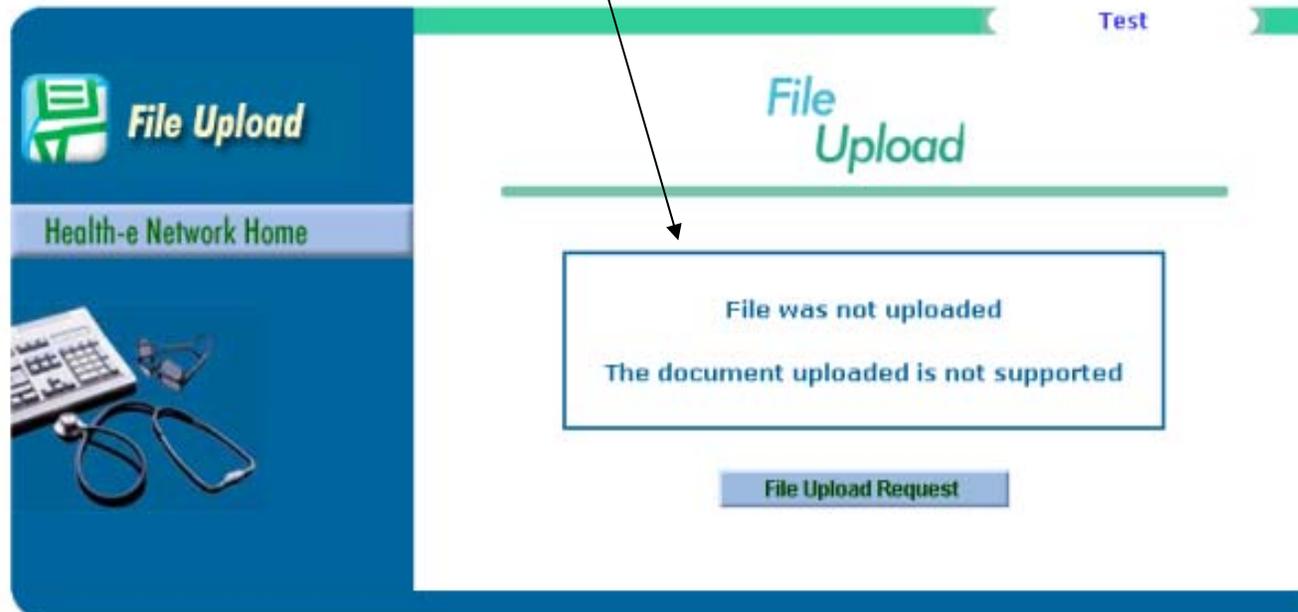
The screenshot shows the 'File Upload' page with a sidebar on the left containing a 'File Upload' icon, 'Health-e Network Home', and an image of a keyboard and stethoscope. The main content area has a 'Test' button in the top right and the title 'File Upload'. Below the title are two numbered instructions: (1) 'Please specify the claim file you wish to send. The supported standards are currently the NSF HCFA, NSF UB92, ANSI 837I, and ANSI 837P. You may enter the path and filename explicitly or use the browse feature.' and (2) 'Upload claim file to the data center for processing.' Below the instructions is a text input field containing 'C:\ENS Uploads\ENS' and a 'Browse...' button. Below the input field is an 'Upload file' button. A callout box with a circled '1' points to the 'Upload file' button, containing the text: 'Click on Upload File, to upload the file for processing'.

Once the file has finished uploading, you will receive a message stating "File was successfully uploaded". This is your confirmation that your file has been uploaded for processing

The screenshot shows the 'File Upload' page after a successful upload. The sidebar and top navigation are the same as in the previous screenshot. The main content area now displays a confirmation message in a box: 'File was successfully uploaded'. Below this message is a 'File Upload Request' button. A callout box with a circled '2' points to the confirmation message box, containing the text: 'Once the file has finished uploading, you will receive a message stating "File was successfully uploaded". This is your confirmation that your file has been uploaded for processing'.

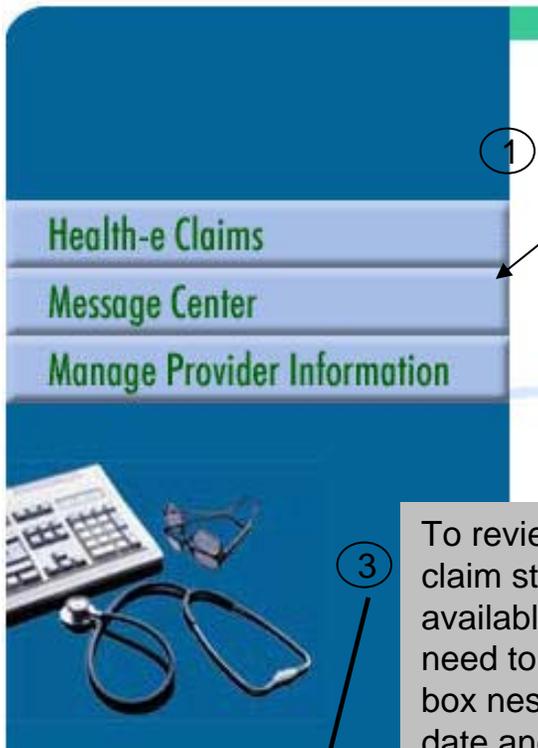
# File Upload, Cont.

If your file was not successfully loaded, you will see this message. The file you selected was not in the correct format – try again or contact Technical Support



# Reports

Reports allow you to check the status of your submitted claims



1 After logging in to "Client Access", click on Message Center

To review the report available, you will need to click on the date.

3 To review the claim status report available, you will need to click on box next to the date and time and click view report

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Daily Reports | Advanced Claim Search | Summary Search | Payer Batch Responses | Home

\*\*Please note that all reports older than twelve months within the Message Center will be purged and no longer available\*\*

Date Range: From:  To:  - or - 30 days  Show only unread

Date	View Report	Report Date:
06/03/2010 (1 unread)	<input type="checkbox"/> All	Report Name <input type="text"/> Report Load Time <input type="text"/> Read <input type="text"/>
05/26/2010 (1 unread)		No Results
05/25/2010 (2 unread)		

View Report Report Date: 06/05/2010 - Report Details

<input type="checkbox"/> All	Report Name	Report Load Time	Read
<input type="checkbox"/>	Claim Status / Ack Reports	06/05/2010 12:01 PM	
<input type="checkbox"/>	Claim Status / Ack Reports	06/05/2010 06:50 AM	
<input type="checkbox"/>	Claim Status / Ack Reports	06/05/2010 04:02 AM	
<input checked="" type="checkbox"/>	Claim Status / Ack Reports	06/05/2010 03:00 AM	

# Sample Reports – Level 1 Report

The level 1 Report is a claim receipt summary. It will contain 3 sections of information, the **Tax ID** number the claims were sent under, the **# of claims** and the total **Dollar Amount**. Within one hour after you send your claims the Level 1 report will be available for download. This report is used to verify that we have received the submitted claims. If you notice claims missing from the report that you expected to be there contact Technical Support

*ENS Level 1 - Claim Receipt Summary*

<b>Organization:</b>		
<b>Receipt Date:</b>	05/25/2010	
<b>Receipt Time:</b>	02:40:26 PM	
<b># of Claims:</b>	1	
<b>Dollar Amount:</b>	\$ 270.00	
<b>System:</b>	T1X	
<b>Tax ID</b>	<b># of Claims</b>	<b>Dollar Amount</b>
	1	\$ 270.00
NOTE: To guarantee the receipt of claims by ENS - You must verify each claim on the Level 2 - ENS Claim Acknowledgement Report - to be delivered within 1 business day of receipt of the claims		

<b>Organization:</b>		
<b>Receipt Date:</b>	05/25/2010	
<b>Receipt Time:</b>	02:40:26 PM	
<b># of Claims:</b>	2	
<b>Dollar Amount:</b>	\$ 300.00	
<b>System:</b>	T1X	
<b>Tax ID</b>	<b># of Claims</b>	<b>Dollar Amount</b>
	2	\$ 300.00
NOTE: To guarantee the receipt of claims by ENS - You must verify each claim on the Level 2 - ENS Claim Acknowledgement Report - to be delivered within 1 business day of receipt of the claims		

# Sample Reports – Level 2 Report

The Level 2 report will be delivered within one business day after you receive your Level 1 report. The Level 2 report is used to verify the receipt of claims that were listed on the Level 1 report. The Level 2 report will provide specific details like, Patients Names, Provider Names, Insured ID Numbers, Patient Account Numbers, Claim Status, etc. Each claim will have a status of ACCEPTED or REJECTED. If you signed up for Electronic Claims Tracking (ECT), the ECT number for each claim is shown on the report. This number can be used to search for a claims status in the Electronic Claims Tracking System. If you notice claims missing from the report that you expected to be there contact Technical Support.

**LEVEL 2 - ENS CLAIM ACKNOWLEDGEMENT REPORT**  
**CLAIMS RECEIVED BY ENS FOR PROCESSING**

As Of	PFTN	Provider Sub Id	ENS ID	Patient Acct #	Insured ID #	Service Date(s)		Payer Name	Patient Name	Provider Name	Insured Name	Claim Value
						From	To					
05/12/2010	0436875	LHMD				04/01/2010	04/01/2010	CIGNA HEALTHCARE				\$96.27
Status - ACCEPTED - ECT # 2010051240701 T1X-->CIGNA HEALTHCARE PPO/POS/EPO Submitter Trace #142												
05/12/2010	0436875	LHMD				05/11/2010	05/11/2010	CIGNA HEALTHCARE				\$96.00
Status - ACCEPTED - ECT # 2010051240701 T1X-->CIGNA HEALTHCARE PPO/POS/EPO Submitter Trace #142												
05/12/2010	0436875	LHMD				05/11/2010	05/11/2010	CIGNA HEALTHCARE				\$385.00
Status - ACCEPTED - ECT # 201005124070 T1X-->CIGNA HEALTHCARE PPO/POS/EPO Submitter Trace #142												

# Sample Reports – Payer Reports

Once claims are transmitted to the payer(s), the IS system is updated based on information received from the payer(s). This information may differ slightly in each report, depending on what is provided by the payer. The Payer report is used to verify that the Payer has received the claims and accepted them into their system for adjudication. If the payer rejects the claim, they will provide a reason for the rejection. The claim must be corrected and resubmitted to them, through ENS .

CIGNA												
CLAIM STATUS REPORT												
As Of	PFTN	Provider Sub Id	ENS ID	Patient Acct #	Insured ID #	Service Date(s)		Payer Name	Patient Name	Provider Name	Insured Name	Claim Value
						From	To					
05/12/2010	123	AAA	ZZZ123	ABCDEFG	1234567	05/04/2010	05/04/2010	CIGNA	Doe, John	Doctor Pepper	Doe, John	\$90.00
Status - CLAIM ACCEPTED BY CIGNA Submitter Trace # ENS ECT #2010050 Payer Trace #: CLAIM ACCEPTED BY PAYER												

# Congratulations!

- You have now completed File Upload for ANSI 837 File self-service training
- Questions or issues can be reported in one of two ways
  - Email Technical Support at [tsupport@ENShealth.com](mailto:tsupport@ENShealth.com)
  - Or, call at 1-866-367-9778
- We appreciate your business!