

How to Submit a Secondary Claim to Availity

This guide only refers to the additional steps to submit a secondary claim. For complete step-by-step instructions on submitting a claim, refer to *How to Submit a Claim in Availity** at <https://www.cchacares.com/Dal/1Bq>.

Instructions:

- Select secondary under *Responsibility Sequence*.

Professional Health Care Claim Need help? Watch a demo for submitting claims.

* indicates a required field

* Payer: ? COLORADO COMMUNITY HEALTH ALLIANCE - BI

* Organization: Select One

* Transaction Type: ? Professional Claim

Responsibility Sequence: ? Secondary

- Under *Primary Insurance Plan Information*, complete all required fields. You can locate the other payer ID on the Availity payer list. To locate this list, in the Availity Essentials menu bar, select *More/Payer List*. If you do not see the payer listed, then enter **99999** in the field. In the *Payment/Adjustment Type* field, select the type of adjustment you are entering from the *Explanation of Payment (EOP)*.

* Payment / Adjustment Type: ? Claim Line Payment Adjustment

- Complete the *Primary Insured Subscriber Information*.
- After completing the *Claim Information* section, select whether this claim also includes an attachment and complete as follows:

This claim also includes...

- ☐ an EPSDT referral
- ☐ onset dates that are different from the dates of service
- ☐ disability / worker's compensation dates
- ☐ hospitalization dates related to the current services
- ☐ an anesthesia-related procedure
- ☐ condition codes
- ☒ an attachment

Claim Attachment Information ?

- * Attachment Type 1: EB - Explanation of Benefits (Coordination of Benefits or Medicare Sec
- * Transmission Method: Available on Request at Provider Site
- [+] Add Another Attachment

- Complete *Primary Insurance Plan Claim Line Adjustment* section from the *EOP*:

* Availity, LLC is an independent company providing administrative support services on behalf of the health plan.

- If you have more than one claim line adjustment to enter and only one group code, select:

[\[+\] Add Another Adjustment Line](#)

- If you have more than one claim line adjustment and more than one group code, select:

[\[+\] Add an Adjustment Group for Primary Claim](#)

- Example of how to enter claim line adjustments from an *EOP* with two group codes.
 - Primary health insurance *EOP*:

Service Date	Service Code	Charged Rate	Patient Amount	Adjustments Amount	Paid Amount
11/1/2022	90837	\$170.00	(\$109.59)	(\$60.41)	\$0.00
PR-1: Deductible Amount CO-45: Charge exceeds fee schedule/maximum allowable or contracted/legislated fee arrangement.			(\$109.59)	(\$60.41)	

- Complete the line adjustments from the *EOP*. PR and CO are the group codes, 1 and 45 are the reason codes.

Primary Insurance Plan Claim Line Adjustment 1
 [Remove](#)

Other Payer Primary ID:

Bundled or Unbundled Number:

* Procedure Code:

Description:

Modifiers:

* Paid Service Unit Count:

* Group Code:

* Reason Code 1:

Quantity:

* Adjustment Amount:

[\[+\] Add Another Adjustment Line](#)

[\[+\] Add an Adjustment Group for Primary Claim](#)

- Select *Add an Adjustment Group for Primary Claim* since there is more than one group code on the *EOP*.

- Enter the next group code and claim line adjustment from the *EOP*.

Primary Insurance Plan Claim Line Adjustment 2 [Remove](#)

Other Payer Primary ID:

Bundled or Unbundled Number:

* Procedure Code:

Description:

Modifiers:

* Paid Service Unit Count:

* Group Code:

* Reason Code 1:

Quantity:

* Adjustment Amount:

- Enter the primary payer amount paid.

Primary Insurance Plan Claim Line Adjustment Payment Information

* Payer Amount Paid:

* Adjudication or Payment Date: / /

MM DD YYYY

- When all claim adjustments and required fields have been completed, submit the claim.

If you have any questions, contact Availity Client Services at **1-800-282-4548** for help with submitting a claim or select the available options from the top navigation men, *Help & Training*, in Availity.

