

Check Claim Status

† Modified on 07/17/2026 2:42 pm EDT

Claim Status provides the capability for users to submit status requests and receive responses in real-time regarding their claims. The claim status response provides information about your claim within the payer's adjudication process, including how much is being paid on the claim once approved. Users can retrieve this information within the CollaborateMD application without having to contact the payer. There are no additional fees for this service.

Claim status can be verified for any claim that meets the following criteria:

1. The payer supports electronic Real-Time Claim Status (RTCS).
2. The claim was submitted electronically to the payer.
3. The claim status must not be set to any the following restricted statuses:

Standard & custom statuses listed as "Not Billed"

Balance Due Patient

Collection

Paid

Denied at Insurance

Rejected at Clearinghouse

Rejected at Insurance

 Depending on the payer, an agreement may need to be filled out prior to checking claim status. Please refer to our [Payer Agreements Help Article](#) for more information.

Follow the steps below to check claim status.

1. Select **Claim > Claim**.
2. Use the **Search** field to search for your claim.

 Place a check in the **"Show exact matches only"** box to search for exact matches or **"Show unpaid claims only"** to show claims that may need follow-up.

3. Open the claim.

4. Click the **More** button.
 5. Select **Check Claim Status**.
 6. The Claim Status window will open, informing you of the status of the claim.
 7. Click **Close**.
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