

# Phase 3

† Modified on 02/26/2025 2:57 pm EST

## Phase 3 Introduction

Phase 3 will cover How to submit and track test claims and go over moving into Production Mode to allow your claims to go out live to your payers. In addition, we will discuss claim follow-up best practices and verify the status live claims and walk through correcting any rejections using Claim Tracking.

The Training for this phase is divided into two training sessions to spend more time in the Claim Section giving the Trainee more exposure and time to ask questions.

In **Phase 3.1** we will check agreement status' and validate that your account is on track with Clearinghouse payer agreement set up for all payers added after Phases 1 & 2 staying on track with continuing to have all Top Payers set up if applicable for Claims, ERAs and Eligibility (as needed).

The Claim Control will be reviewed as a refresher by searching for claims and feature functionality. We will then transition over to the Claim Tracker where we will learn how to track claims in Test, review the test results, correct claims, resubmit claims and mark Errors Fixed. After reviewing the claim notification results the account can then move from Test to Production Mode where the claims will be allowed to leave and the account will be live (If Applicable).

In **Phase 3.2** we will be available for any questions including payer agreements and their status. At this time we will again through the same features reviewed in Phase 3.1 assisting the user in grasping the Claim Control to search for claims in Send to Insurance and submit as a batch using the Real-Team Claim Submission in Production Mode. We will review how to Review Claims/Scrubbing.

In **Phase 3.2** we will again walk through and do refreshers in the Claim Control, Claim Tracker, recapping how to read claim tracking results, correcting, resubmitting and marking errors as fixed. In addition, we will then review the Follow-up Management feature that helps you to focus on priority follow-ups, based on the line item status of outstanding claims. We will also discuss how to generate actionable tasks, follow-up productivity, check claim status' and the easy to use follow-up screen where all pertinent claim patient, payer and practice information can be utilized with contacting the payer all on one screen.

This phase will give the user all the tools they need to send, monitor and follow-up on claims assisting in maintaining a low A/R.

---

## Phase 3 Entrance Criteria

- Understand Look-up Payer Agreements in CollaborateMD and Connect Center
- Document Storage (If Applicable)
- Create and Manage Patients

- Able to add new patients
- Understand Insurance Information, adding of copays to
- Understand How to check eligibility
- Understand How to print patient Ledger & Statement
- Understand Billing Info & Claim defaults
- Understand Print & Patient Merge Options
- Understand More Options
- Perform batch-level items
  - Interface Tracking for interface claims
  - Claim Control for interface claims
  - Batch Print Claims
  - Batch Eligibility
- Add and Manage Claims
  - Understand Claim Settings and enabling of RTCS
  - Understand Enabling of Unapplied Copays when claims entered
  - Understand invoicing by Rendering Provider Name
  - Understand COPAY field when associated with the Unapplied Copay and functions
  - Understand Charges and Other field for NDC and CLIA numbers
  - Understand benefits of fee schedules
  - Understand Claim Summary vs. Activity, benefits of Alerts
  - Understand Print Options, Show Preview
  - Understand More Options
  - Understand How Claims Scrubbing/Review works (if applicable)
  - Understand Batch Print Claims
  - Understand how to submit Test Claims
- Managing claims using Claim Control

- Understand how to locate/review and submit interface claims
  - Understand claims in a batch for test
  - Understand Waiting for Review/Incomplete claims and save filters
  - Understand Right click capabilities: Show Details or Open Claim/Patient
  - Understand Submitting claims (Default billing status for payer/code)
  - Create and manage appointments (if applicable)
    - Configuration requirements: Resources, Appt Types, and Custom Status & Settings
    - Create and modify appointments
    - Create and Manage Block Schedule
    - Understanding searching for appointments
    - Understand benefit of Appointment Reminders
- 

## Phase 3 Exit Criteria

- Payer Agreement
  - Understanding [New Agreement](#)
  - Understanding [Search Existing Agreement - Status](#)
- Claim Control
  - Understanding Filters
  - Understanding Search Claims
  - Understanding Review Claims
  - Understanding Interface Claims (If Applicable)
  - Understanding Update Status and submit batch of Live Claims
  - Understanding RTCS Results
- Claim Tracker
  - Understanding Track Live Claims

- Able identify and review clearinghouse and payer acceptance and rejected claims
- Able to Create Filters (Yesterday, Last 7 days, & Last 30 days) search claims
- Understanding and Read results - example Correcting, resubmitting and marking as Error Fixed
- Understanding Right-click capabilities: Open Claim etc
- Understanding and able to view Reports (Clearinghouse & Payer Generated), proof of timely filing (CA, SR, SB and SE files)
- Follow-up Management
  - Understanding Filters
  - Able to search claims submitted
  - Understanding batch options, adding notes, set follow-up, claim status
  - Understanding follow-up screen, reference information, contact payer info, benefits of using Expected Payment info
  - Understanding how to add Follow-up Note

---

## Phase 3 Training Actions/Homework

**Action 1.** Submit live claims in a batch using [Claim Control](#)

**Action 2.** Learn how to print paper claims using [Claim Batch Print](#)

**Action 3.** Monitor the success of LIVE claims using [Claim Tracker](#)

**Action 4.** Understand how to address claim rejections & denials using [Claim Tracker Descriptions & Icons](#)

**Action 5.** Define Claim Follow-Up workflow

- [Follow-Up Management](#)
- [Verify Claim Status](#)

**Action 6.** Learn [How to troubleshoot rejected claims](#) video

**Action 7.** Learn [How to resubmit rejected claims](#) video

**Action 8.** Monitor your Patients, Appointments or Claims using [Interface Tracker](#) if using a CMD Interface.

In order to successfully complete Phase 3 of your training and move into Phase 4, you must complete all of your assignments indicated above. During Phase 3, you will learn how to configure and ensure the success

of your claims using Claim Tracker and define best practices the benefit your practice or organization. I will  
conduct a follow-up call to help you monitor the success of your claims, define best practices and help you  
determine how you will train your staff

---