



Real Time Claim  
Adjudication (RTCA)

**QUICK REFERENCE GUIDE**

## eBusiness Marketing Team

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### Technical Support

(423) 535-5717, Option 2

eBusiness Marketing Representative for all  
of your registraton  
and training needs.

**Go to:** [www.bcbst.com/providers/](http://www.bcbst.com/providers/)

**Step 1:** Click the + button to expand the Log In/Registration field.

**Step 2:** Enter User ID & Password and click the “log in” button to access BlueAccess<sup>SM</sup>, your secure provider portal called BlueAccess.

**Note:** If you do not have a User ID & Password, contact your eBusiness Marketing Representative or Service Center for personal assistance with registration and/or training.

**Step 1: Click + To Expand Log In Section**

**Step 2: Enter User Name & Password**

BlueCross BlueShield of Tennessee

Get Insurance | Manage My Plan | Health & Wellness | Why Choose Blue?

EMPLOYERS | PROVIDERS | BROKERS | Contact Us

+ Log In/Register to BlueAccess

- Log In/Register to BlueAccess

User ID

Password

REMEMBER ME

LOG IN

Forgot / Reset Password  
Register Now

Shop for Plans Individual & Family Plans GO

Things To Know About Health Care Find a Doctor

Home > Providers

### Providers

BlueCross BlueShield of Tennessee is committed to helping our members have access to the highest quality networks of physicians, hospitals and other health care providers. We value the strategic partnerships we have with health care providers across the state and look forward to working with you to deliver the best medical value to our members.

### BlueAccess Login for Providers

BlueAccess allows you to access secure services including e-Health, FEP, Membership Rosters and more.

**Step 3:** Click either the “Create Claim/Estimate” tab or click the “New Claim or Estimate” link as shown below.

**Note:** Either option will take you to the same screen as shown in step 4.

**Quick Jump »** [e-Health Services](#) [Additional Provider Services](#) [Account Management](#)

### e-Health Services ®

Electronic Claims Filing is the preferred method for claims submission. To sign up or discuss how to submit all claims electronically call (423) 535-5717 (select option 2). You can find additional information regarding enrollment and benefits of electronic claims filing on our website at [bcbst.com/providers/ecomm](http://bcbst.com/providers/ecomm).

#### Service Center

- [Prior-Authorization Contact Sheet](#)  
PDF
- [Specialty Pharmacy Quick Reference Guide](#)  
PDF
- [Web Authorization Quick Reference Guide](#)  
PDF
- [Milliman Care Guidelines® Disclaimer](#)

+ More

#### BlueCard / FEP

Coverage, eligibility & claims status inquiries for out-of-state BCBS & FEP plans.

[Electronic Provider Access \(EPA\) Out-of-Area Pre-service Review](#)

+ More

#### Inter-Plans Medical Policy and Pre-Certification/Pre-Authorization

### Real Time Claim Estimation/Adjudication

Enables claim submission & claim estimation to gain member liability for Commercial, BlueCare/TennCare *Select* and BlueAdvantage.

- [View tutorial](#)  
PDF

+ More

#### CHOICES

TennCare CHOICES in Long-Term Care is TennCare’s program for long-term care services.

+ More

#### BCBST Musculoskeletal Program

Medical Record submission requirement for prior authorizations has been delayed until April 23, 2012.

**Step 3: Click Link**

My Messages (0)

[Compose](#) [Message Center](#)

[Quick Reference Guide](#)

#### Additional Information

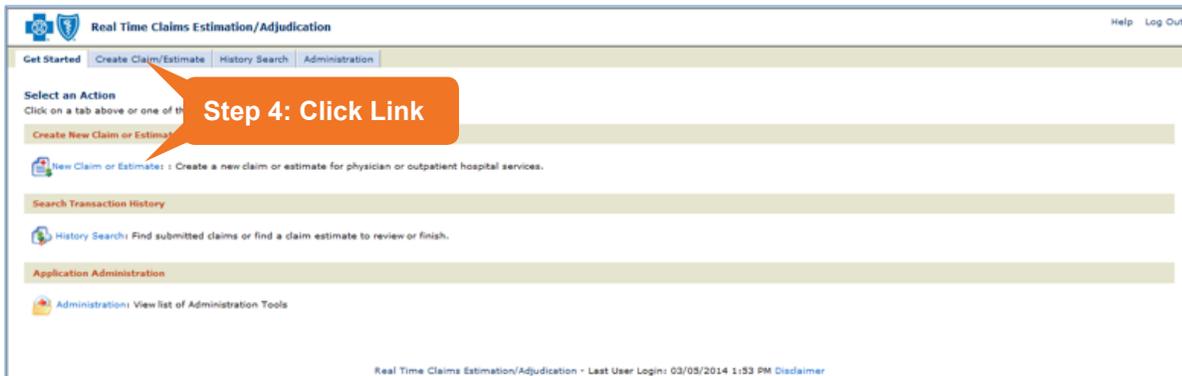
- + [Log Out](#)
- + [BlueAccess FAQs](#)
- + [Scheduled Maintenance Times](#)

#### BlueAlert Newsletter

- + [Read the latest BlueAlert. You can view it and past editions \[here\]\(#\).](#)

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**Step 4:** Click on either the New Claim or Estimate link OR to click on the Create Claim/Estimate tab.

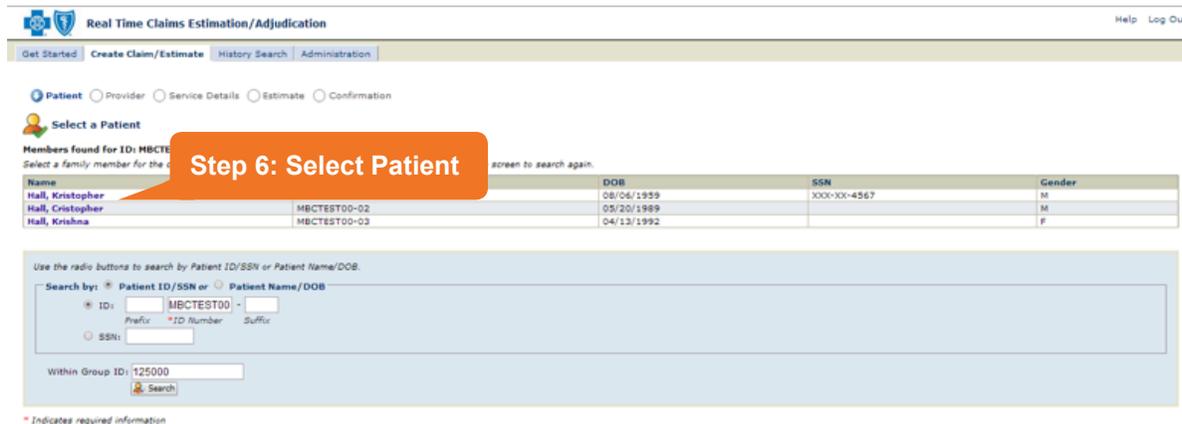


**Step 5:** Enter Member ID Number (or SSN) into patient search criteria.

**Note:** If you do not have Patient ID / SSN, you may search by Patient Name / DOB by selecting radio button.



**Step 6:** Select a patient by clicking his or her name



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**Step 7:** Select provider name from drop down list, if applicable.

**Note:** Claim Type defaults to Professional Claim / Estimate Outpatient Facilities should change claim type.

**Step 8:** Click the Continue button.

**Step 7: Select Provider Name**

**Default is Professional Claim/Estimate**

**Step 8: Click Continue Button**

**Step 9:** The patient account number is a required field. Enter the patient account number used in your office or if you do not track patient account numbers, simply enter a number to identify the patient, for example you could enter 123 to satisfy the required field

**Step 9: Fill Required Field**

#	Date of Service from*	Date of Service to*	Place of Service*	CPT/HCPCS*	Modifiers 1-4	Diagnosis*	Charge*	Units*
11	05/12/2014	05/12/2014	11					1
21	05/12/2014	05/12/2014	11					1
31	05/12/2014	05/12/2014	11					1
41	05/12/2014	05/12/2014	11					1
<b>Total Charge:</b>							<b>\$ 0.00</b>	

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**Step 10:** Click the Estimate Liability button if you wish to see patient liability. You may also click the Claim Submission button to submit the claim to BlueCross.

**Note:** If a billing clearinghouse is used to submit your office claims, you will need to suppress the claim from your practice management system if you submit the claim as shown below.

The screenshot shows the 'Medical Claim Details: New' form. It features a table with columns for #, Date of Service from, Date of Service to, Place of Service, CPT/HCPCS, Modifiers 1-4, Diagnosis, and Charge. Below the table are buttons for 'Estimate Liability' and 'Claim Submission'. Callouts include: 'Templates may be created and used' pointing to a 'Use Template...' button; 'Step 9: Enter Line Item Detail' pointing to the table; 'NDC Code' pointing to a field; 'Multiple Diagnosis Codes' pointing to the Diagnosis column; 'Step 10: Click Estimate Liability' pointing to the 'Estimate Liability' button; and 'Claim Submission Button' pointing to the 'Claim Submission' button.

The claim estimate displays as shown below: The benefits are based upon actual member contract benefits and provider network fee schedule.

**Note:** You may hover your cursor over the Procedure Code or Reason Code for a description.

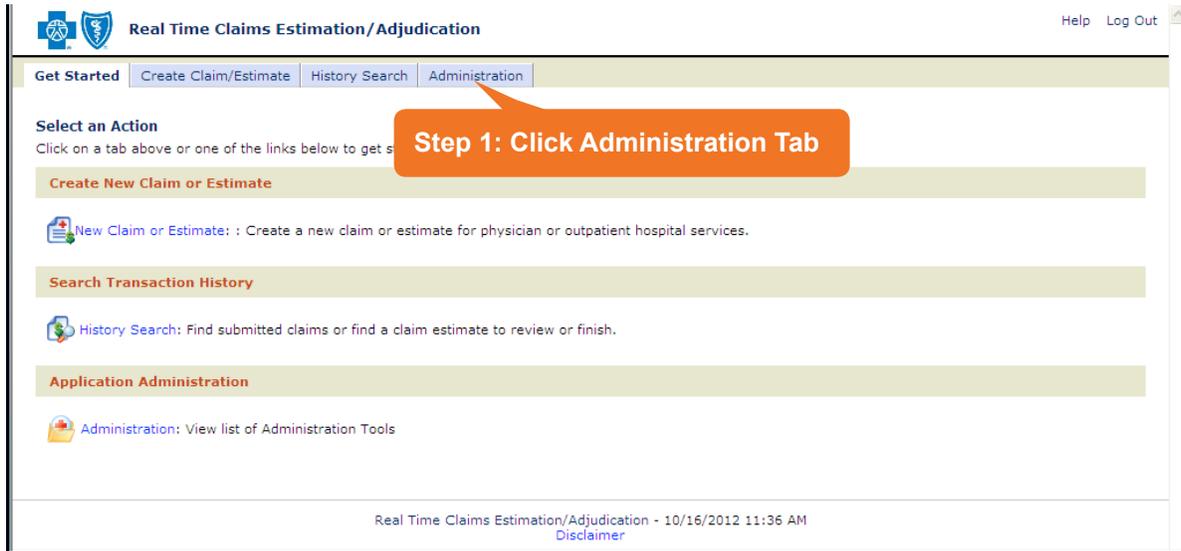
The screenshot shows the claim estimate summary page. It includes a 'Patient' section with name, address, and member ID. A 'Provider' section with name, address, and network indicator. A 'Claim Totals' section with a table of charges and savings. A 'Claim Details' table with columns for Service Date, Procedure, Charge, Allowed, Network Savings, Not Covered, Less HRA, Member Balance, BCBST Pays, Reason Code, and Prior Auth. Callouts include: 'Balance to collect from member displays in this section' pointing to the 'Balance to Collect from Member: \$0.00' line; 'Hover over Reason Code or Procedure Code for description' pointing to the 'Reason Code' column; and 'Claim Submission Button' pointing to the 'Claim Submission' button.

Service Date	Procedure	Charge	Allowed	Network Savings	Not Covered	Less HRA	Member Balance	BCBST Pays	Reason Code	Prior Auth
08/24/2011	90658	\$40.00	\$13.20	\$26.80	\$0.00	\$0.00	\$0.00	\$13.20	45	
<b>Grand Total:</b>		<b>\$40.00</b>	<b>\$13.20</b>	<b>\$26.80</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$13.20</b>		

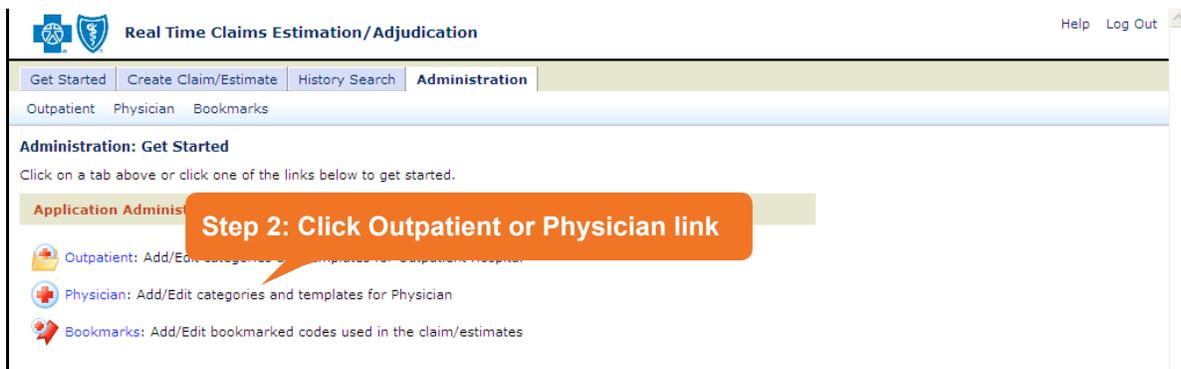
If you choose to submit the claim, simply click the Claim Submission button. The claim will enter the BlueCross adjudication system, and you may view the claim status in the eServices section of BlueAccess.

## How to create a template:

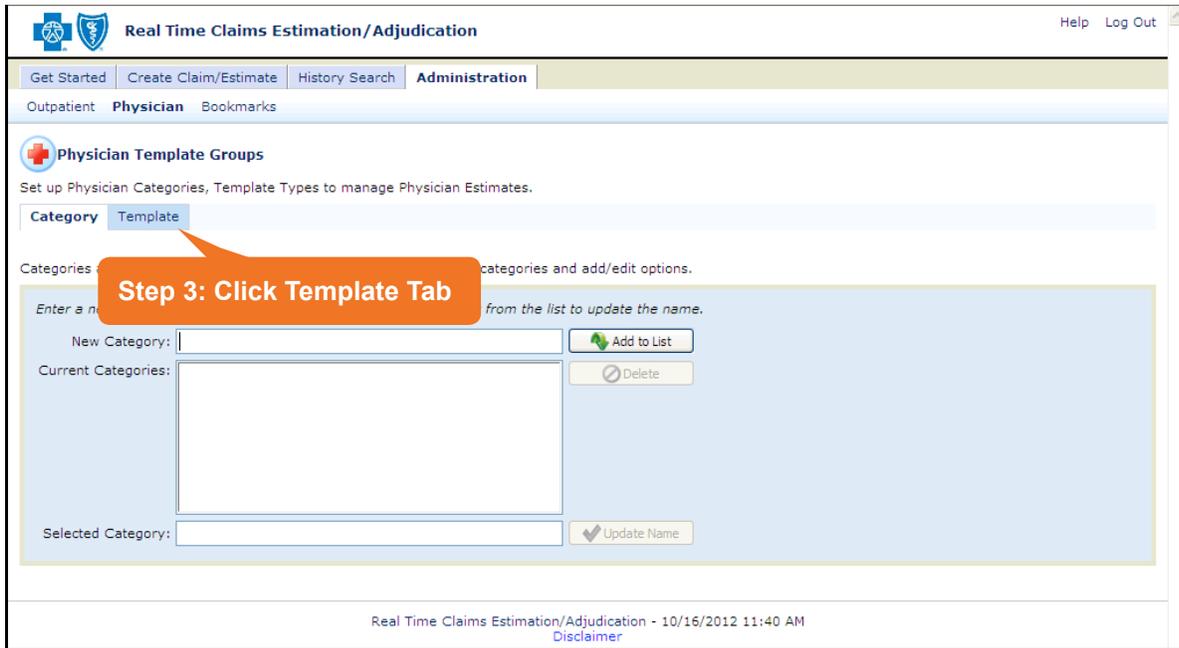
**Step 1:** Click on the Administration tab.



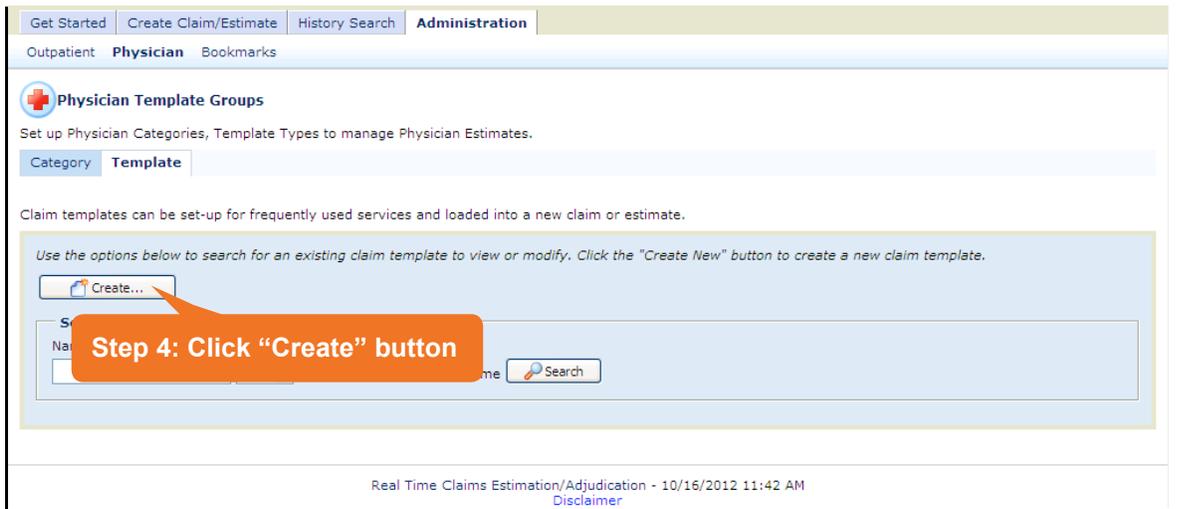
**Step 2:** Select either Outpatient or Physician link to create the appropriate template.



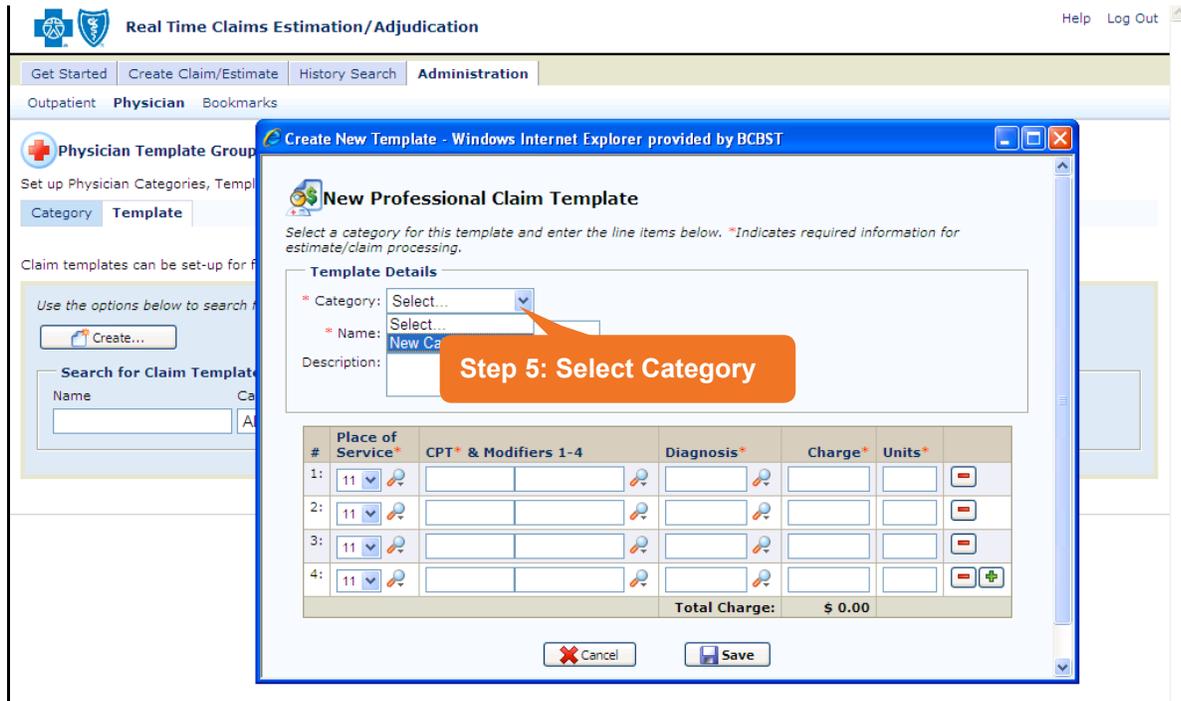
**Step 3:** Click the “Template” tab.



**Step 4:** Click the “Create” button.



**Step 5:** Click Category drop down box and either select a New Category, or you may select a category that may have already been created.

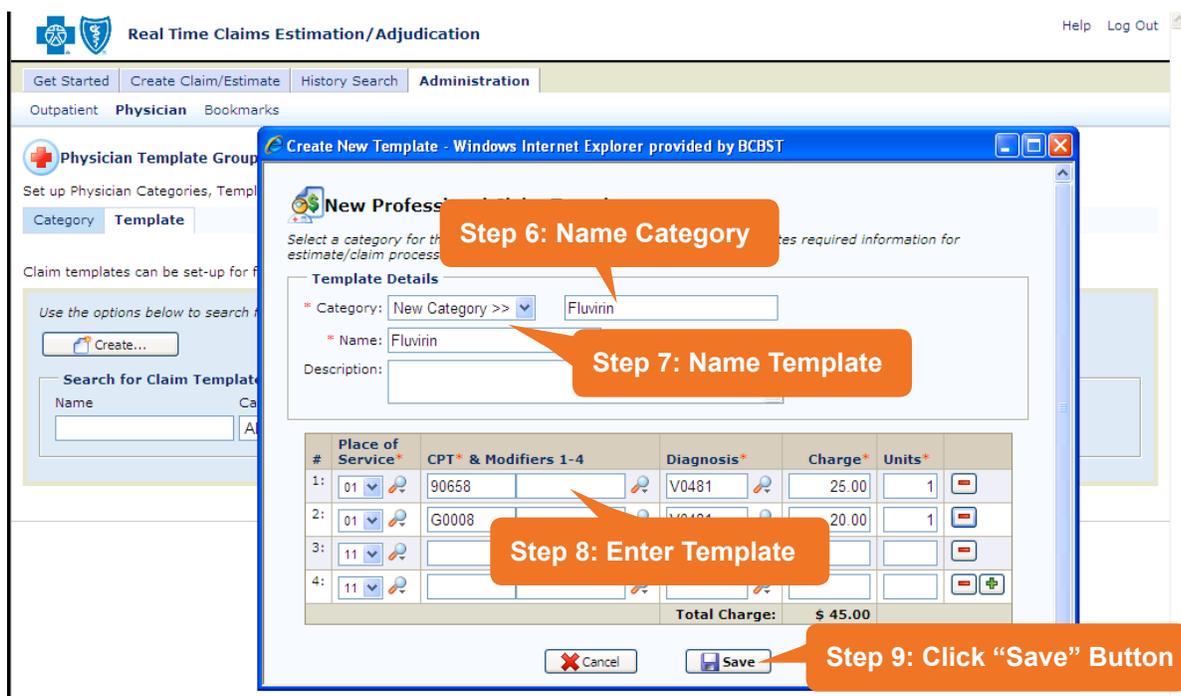


**Step 6:** Enter category name.

**Step 7:** Enter name of template.

**Step 8:** Enter template details.

**Step 9:** Click the "Save" button.



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The template has been saved as shown below. The icons under the Actions column allow you to view, edit, copy or delete the template. If you hover your cursor over the icons, you will see the name of each icon.

**Real Time Claims Estimation/Adjudication**

Get Started | Create Claim/Estimate | History Search | **Administration**

Outpatient | **Physician** | Bookmarks

**Physician Template Groups**  
Set up Physician Categories, Template Types to manage Physician Estimates.

Category | **Template**

Claim templates can be set-up for frequently used services and loaded into a new claim or estimate.

Use the options below to search for an existing claim template to view or modify. Click the "Create New" button to create a new claim template.

Create...

**Search for Claim Templates**

Name:  Category:  Show Only:  Templates modified by me

**Saved Template**

1 Professional Claim Templates Found

Name	Description	Category	Last Modified	Provider Id	Actions
Fluvirin		Fluvirin	10/16/2012 1:52 PM by null, null	Group Level Only	

### How to use the templates:

Follow steps 1 – 7 on pages 3 and 4 of this quick reference guide.

**Step 10:** Instead of entering the line item information, click the "Use Template" button to select your previously saved template.

+ Referring Provider (Optional): (none selected)

Patient Account No:

\* Indicates required information

+ Prior Authorization or Referral Number (Optional)

+ Patient's Condition Impact on Estimate (Optional)

**Medical Claim Details: New**

Use Template...

**Step 10: Click "Use Template" Button**

#	Date of Service from*	Date of Service to*	Place of Service*	CPT/HCPCS*	Modifiers 1-4	Diagnosis*	CI
1:	10/16/2012	10/16/2012	11				
2:	10/16/2012	10/16/2012	11				
3:	10/16/2012	10/16/2012	11				
4:	10/16/2012	10/16/2012	11				

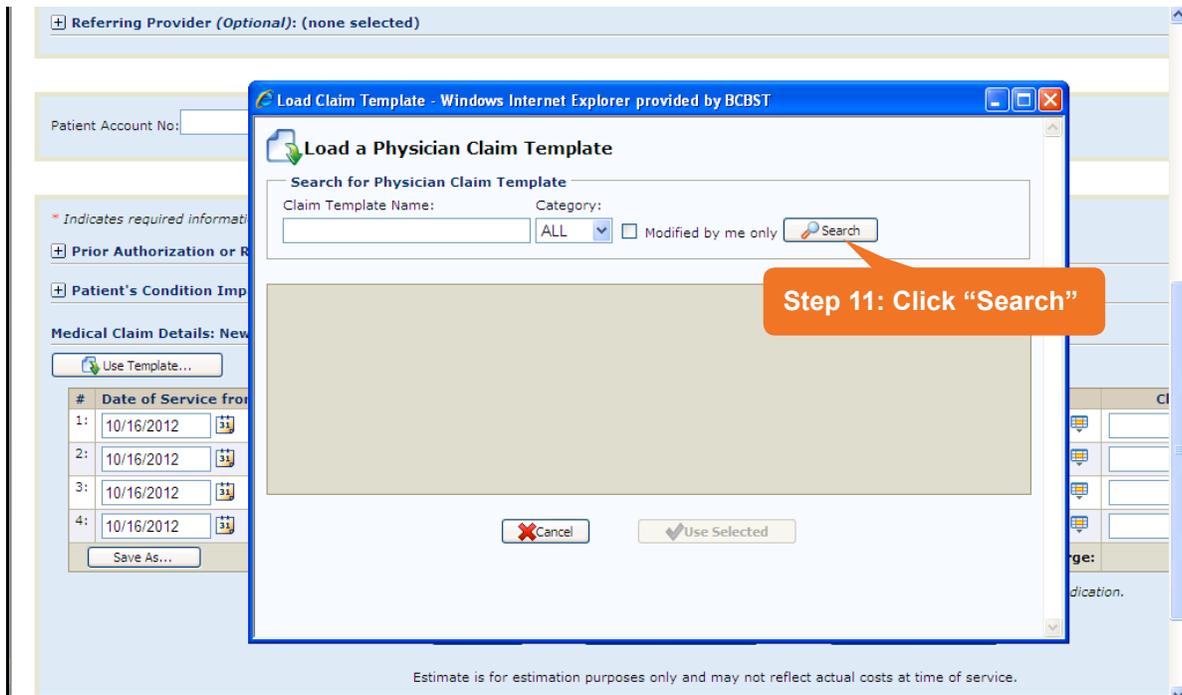
Save As...

**Total Charge:**

Click "Estimate Liability" to view the estimated patient liability or "Claim Submission" to send final claim for adjudication.

Estimate is for estimation purposes only and may not reflect actual costs at time of service.

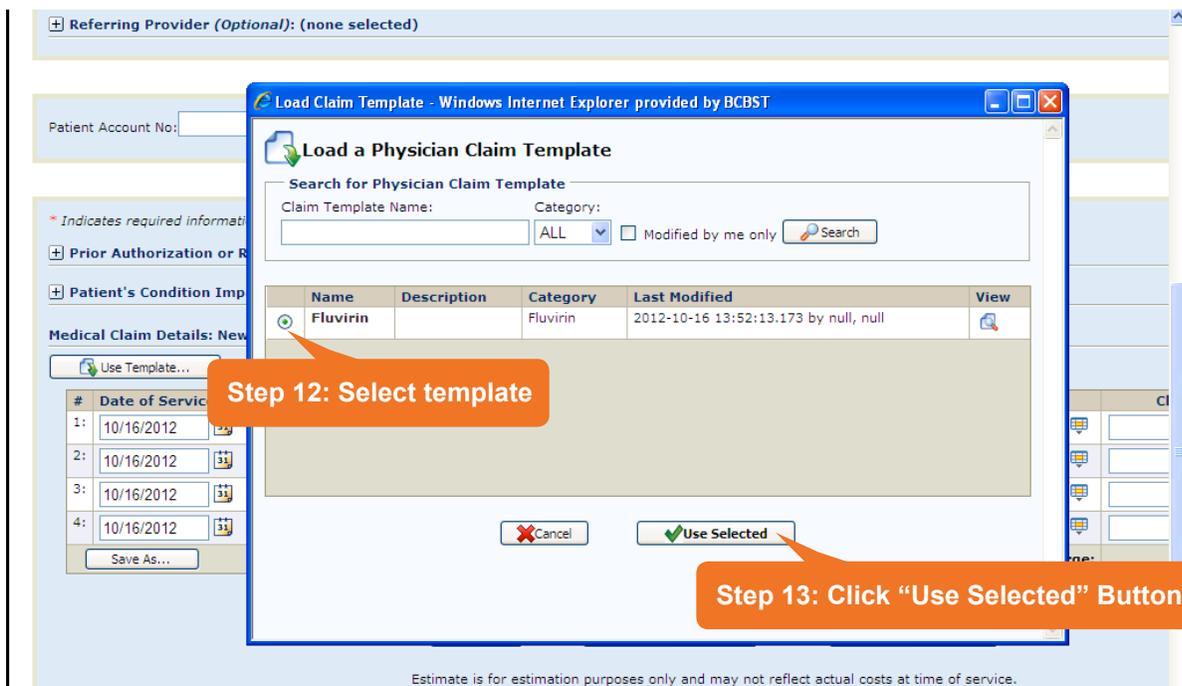
**Step 11:** Click the “Search” button.



All saved templates will display as shown below:

**Step 12:** Select template

**Step 13:** Click “Use Selected”



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The line-item details are populated based on the information saved on the chosen template.

**Note:** You do not have to enter all of the fields on the template form. Some providers like to use the templates, but prefer to add the Diagnosis code individually onto the RTCA claim form. In this scenario, the provider would save the template without having a Diagnosis code on the form.

**Important:** You may need to change the date of service on a claim where a template is used. Templates are saved without dates of service added, and the claim form always defaults to current date. If using RTCA to submit a claim, you will need to verify the correct date of service before clicking the “submit” button.

\* Indicates required information

Prior Authorization or Referral Number (Optional)

Patient's Condition Impact on Estimate (Optional)

**Medical Claim Details: New**

#	Date of Service from*	Date of Service to*	Place of Service*	CPT/HCPCS*	Modifiers 1-4	Diagnosis*	Charge
1:	10/16/2012	10/16/2012	01	90658		V0481	25.00
2:	10/16/2012	10/16/2012	01	G008		V0481	20.00
3:	10/16/2012	10/16/2012	11				
4:	10/16/2012	10/16/2012	11				
<b>Total Charge:</b>							<b>\$ 45.</b>

Click "Estimate Liability" to view the estimated patient liability or "Claim Submission" to send final claim for adjudication.

Estimate is for estimation purposes only and may not reflect actual costs at time of service.

Real Time Claims Estimation/Adjudication - 10/16/2012 2:06 PM  
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