OREGON HEALTH AUTHORITY

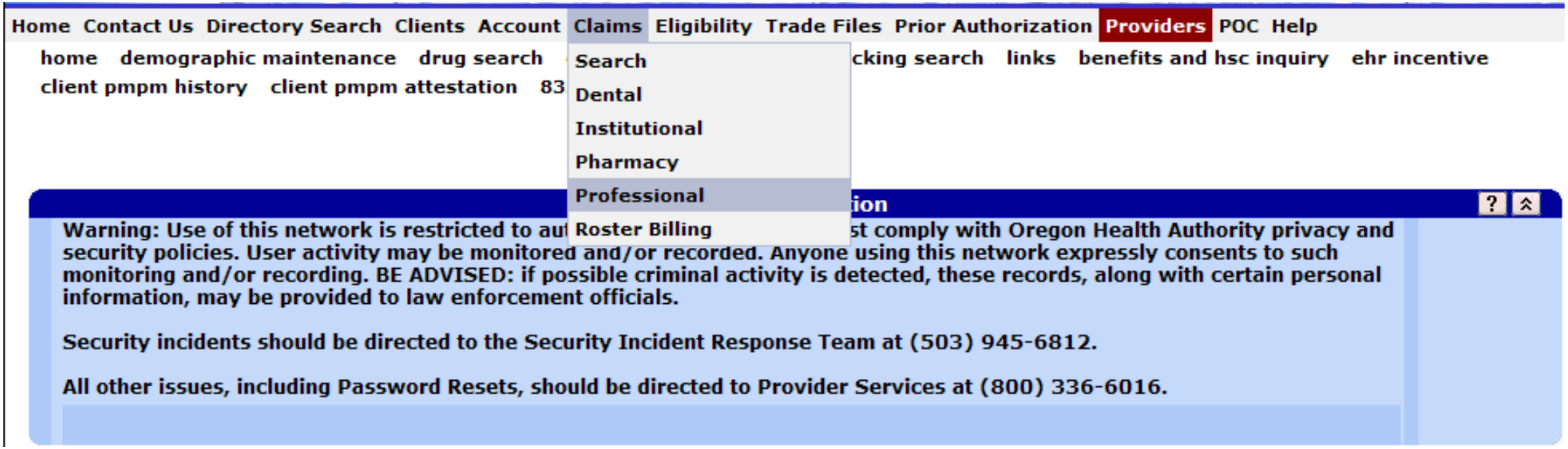
September 2024

MMIS Provider Portal Professional Claim

Find program-specific instructions in supplemental guides for each program

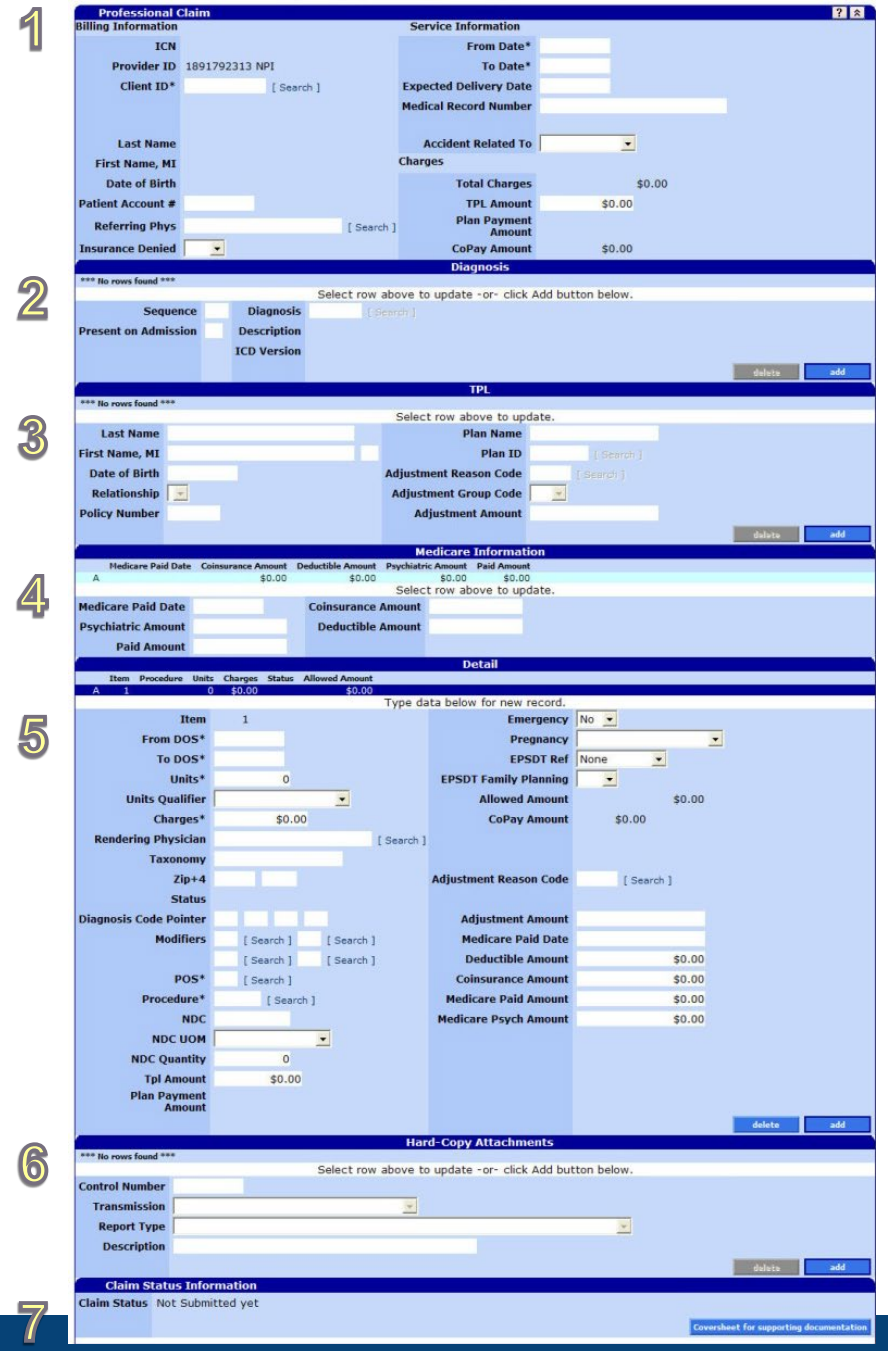
Go to https://www.or-medicaid.gov

- Click **Account > Secure Site**
- After login, click **Claims > Professional**



Professional claim sections

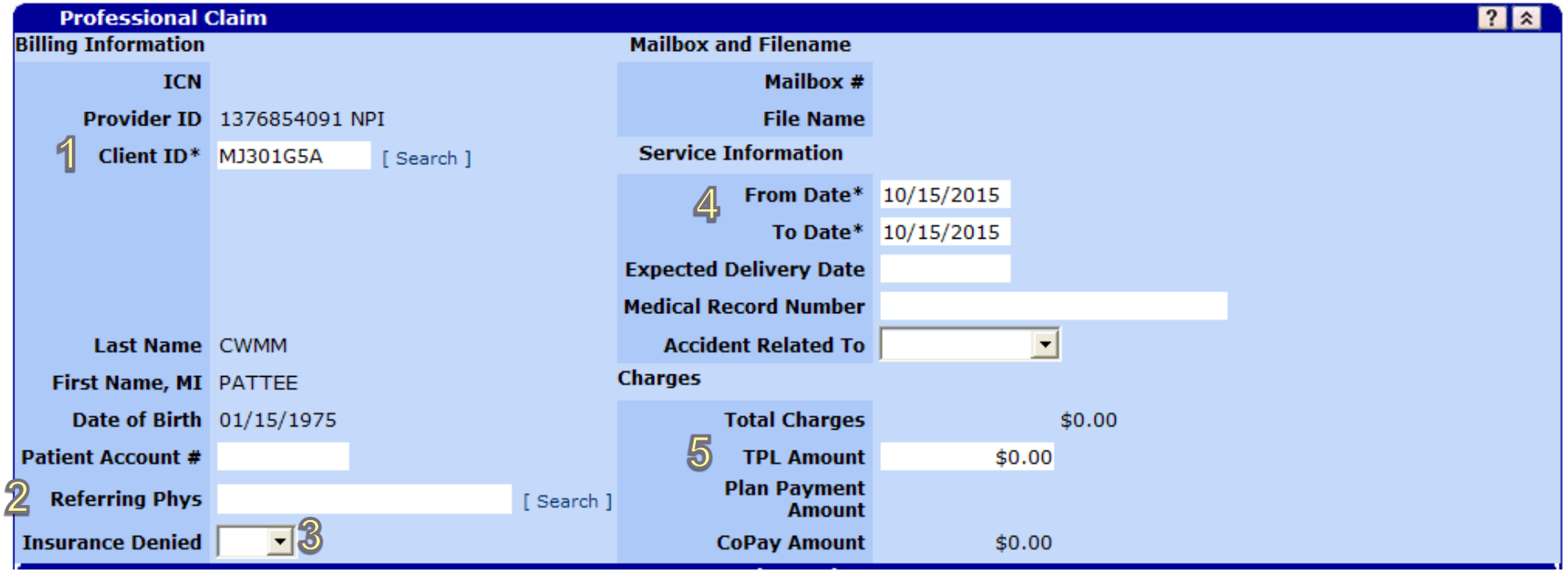
1. Professional Claim (header)
2. Diagnosis
3. TPL: Third-Party Liability
4. Medicare Information
5. Detail
6. Hard-Copy Attachments
7. Claim Status Information



Professional Claim (header): Required fields

Fields marked with an asterisk (*) are required on all claims

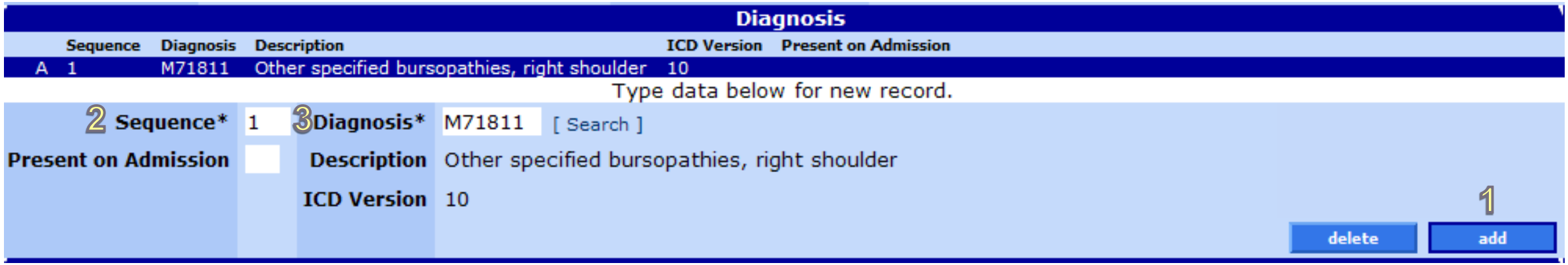
1. Client ID*
2. Referring Phys (only when the service requires a referral)
3. Insurance Denied (only if client has TPL; does not include Medicare)
4. From and To Dates*
5. TPL Amount (does not include Medicare)



Diagnosis

To add a diagnosis:

1. Click **add**
2. Enter sequence (1 for primary diagnosis, 2 for second, etc.)
3. Enter the ICD-10-CM diagnosis code without the decimal

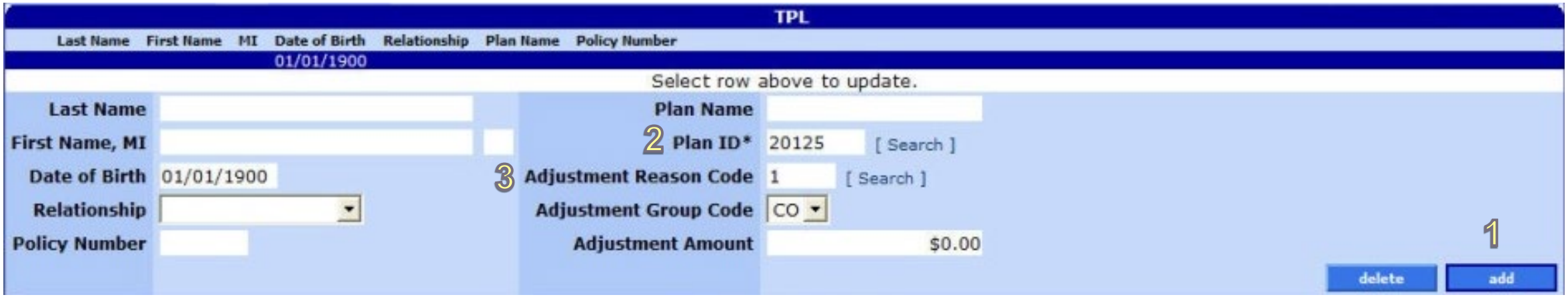


TPL

Only complete this section when client has third-party insurance; does not include Medicare. To add TPL:

1. Click **add**
2. Enter Plan ID
3. Enter Adjustment Reason Code

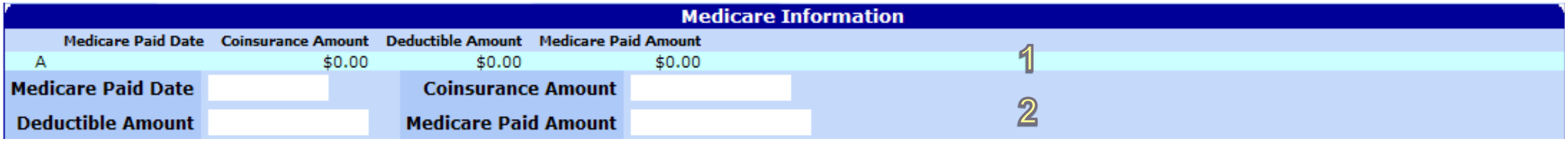
The Date of Birth and Adjustment Group Code fields are not required; they auto-populate upon claim submission



Medicare Information

If the client has Medicare coverage:

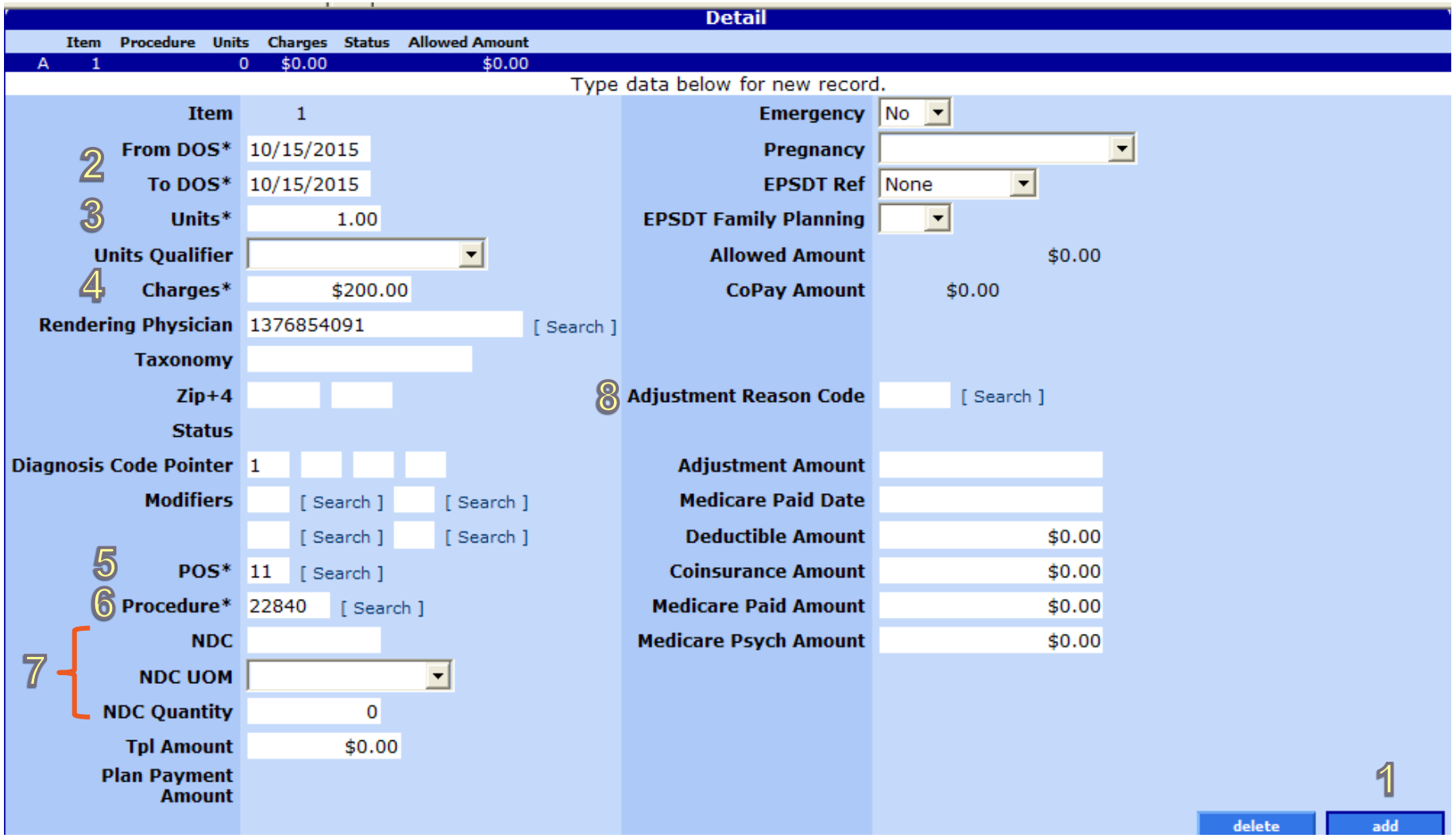
1. Click the row to activate fields
2. Fill in all fields



Detail

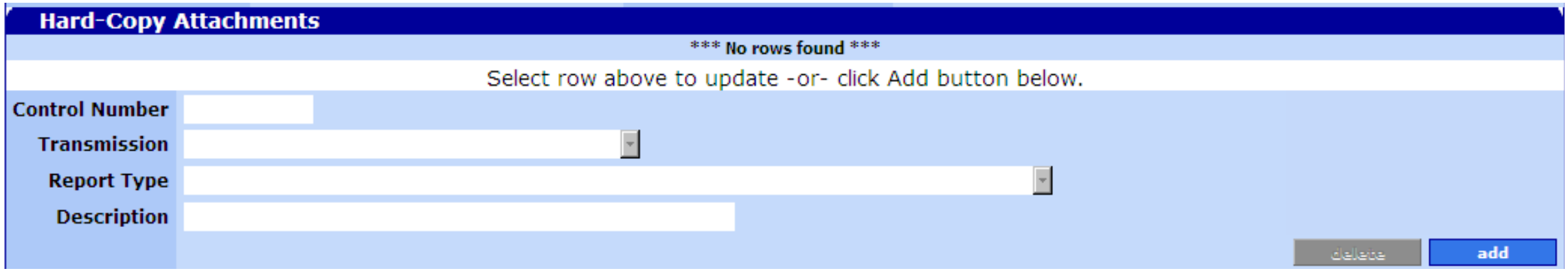
For each detail line:

1. Click **add**
2. Enter From and To DOS* (dates of service)
3. Enter Units*
4. Enter Charges*
5. Enter POS (Place of Service)*
6. Enter Procedure*
7. Enter NDC information (for physician-administered drugs only)
8. Adjustment Reason Code (for claims already billed to Medicare)



Hard-Copy Attachments

MMIS does not use information entered in this section. If you need to submit hardcopy attachments, please submit a paper claim.



Claim Status Information

Before you submit the claim, you have two choices:

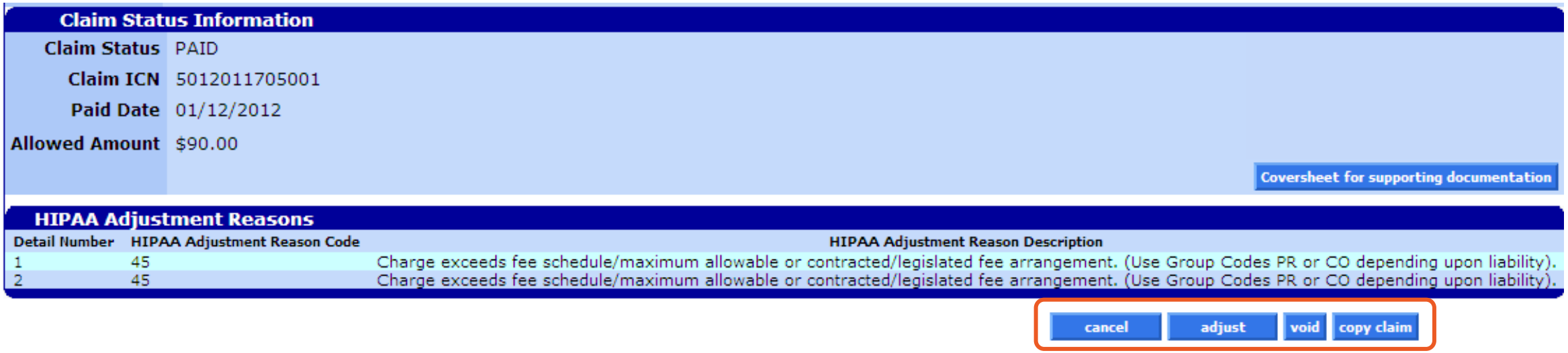
- Click **submit** to submit the claim for processing.
- Click **cancel** to clear information you have entered on the claim.

Once you click **submit**, you will see one of three claim status options: Paid, Denied, or Suspended.

Claim Status: PAID

On paid claims, you can:

- Click **cancel** to clear changes made during this session
- Click **adjust** to adjust with changes made during this session
- Click **void** to cancel the claim. OHA will recover payments made on the claim.
- Click **copy claim.** This creates a new claim. It will have all the information entered on the paid claim, with a status of “Not Submitted Yet.”



Claim Status: DENIED

On denied claims, you can:

- Click **resubmit** to make changes to the claim and submit the changes during this session.
- Click **cancel** to clear changes made during this session.

Error messages on new or adjusted claims

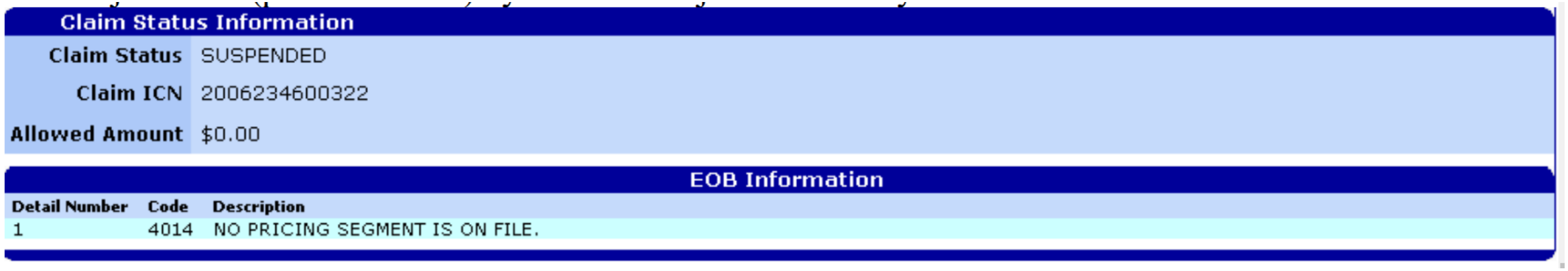
- If there are no errors, new and adjusted claims will process and get a new ICN.
- If there are errors, the top of the claim will display why the claim did not process.
  - The “Message Description” column explains the error.
  - The “Panel,” “Field” and “Row” columns show where the error occurs.
  - You can fix the errors and try to process the claim again.

The following messages were generated:

Message Description	Panel	Field	Row
From Date is required.	Professional Claim	From Date	1
To Date is required.	Professional Claim	To Date	1
To DOS is required.	Professional Claim	To Date	1
From DOS is required.	Professional Claim	From Date	1
ProcedureCode is required.	Professional Claim	ProcedureCode	1
A valid POS is required	Professional Claim	POS	1
A valid Procedure is required	Professional Claim	Procedure	1
Units must be greater than 0.	Professional Claim		1
A valid Client ID is required	Professional Claim	Client ID	1

Claim Status: SUSPENDED

- You cannot take any action on a suspended claim.
  - OHA staff will give the claim a Paid or Denied status after internal review.
  - The review should not take longer than 30 days.



Claim Status Information

Claim Status	SUSPENDED
Claim ICN	2006234600322
Allowed Amount	$0.00

EOB Information

Detail Number	Code	Description
1	4014	NO PRICING SEGMENT IS ON FILE.

Need help?

Contact OHP Provider Services

800-336-6016

team.provider-access@oha.oregon.gov

Thank you

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact OHP Provider Services at dmap.providerservices@oha.oregon.gov or 800-336-6016 (voice). We accept all relay calls.

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