Interactive voice response unit (IVR) Part B - [All other questions]

* Jurisdiction L (JL) (PA, NJ, MD, DCMA, DE): 1-877-235-8073

Option #5: All other questions

Choose your option:

| Say... | Press... | Description |
| --- | --- | --- |
| "[Eligibility](ddocname:00004417)"  \*Effective July 1, 2025, Eligibility will no longer be available in the IVR for NJ providers. | 1 | Eligibility, deductible and preventive service information |
| "Claim status" | 2 |  |
| "Patient account number" | 3 | Patient account number associated with refund request |
| "Financial information" | 4 | Checks and remittance |
| "Pricing" | 5 |  |
| "I have a question" | 7 |  |

[(1) Eligibility](ddocname:00004417)

 (2) Claim status

* Say or enter your NPI number.
* Say or enter your PTAN.
* Say or enter the last 5 digits of your tax identification number (TIN).
* Say or enter the patient’s Medicare beneficiary ID number.
* Say or enter the patient’s name as it appears on their Medicare card. (If using touch tone, enter the first 6 letters of the last name and the first initial.)
* Say or enter the date of service in MMDDYYYY format, or you can say the month, day and year.

You will receive the following claim information:

Claim level details

* Number of claims for the date of service (DOS)
* Pending, processed, denied, rejected, or suspended
* Amount billed
* Allowed amount
* Amount applied to the deductible
* Amount paid
* Paid date
* Receipt date
* Paycheck number or no Paycheck number
* Date of development, and to whom
* Projected finalization date for pending claims

Line level details (you must select claim details to hear this information)

* Claim control number
* Number of line items
* Date of service (DOS)
* Amount billed
* Allowed amount
* Amount paid (when applicable)
* Procedure code and modifier
* Diagnosis code
* Policy number used to process the claim if applicable
* Confirmation that the claim crossed to supplemental insurer and name of insurer if applicable
* Reason for denial or rejection

Denial details (you must voice "denial details" when prompted to hear this information)

When your claim has denied for home health, beneficiary entitlement/date of death, Medicare secondary payer (MSP), hospice, Medicare Advantage plan, or skilled nursing facility (SNF) overlap, the information below will be voiced.

In addition, the IVR will validate whether the eligibility information impacting the claim is still active. If this information has changed since the processing of your claim, you may be given the option to perform an automated claim correction if there are no remaining eligibility records that could impact your claim.

* Beneficiary entitlement / date of death:
* IVR will voice if the beneficiary was not entitled or if they were deceased for the DOS
* Instructions on next step
* Home health:
* Facility name
* Facility address
* Effective date
* Termination date
* Instructions on next step
* Hospice:
* Facility name
* Effective date
* Facility address
* Revocation date (If applicable)
* Instructions on next step
* Medicare Advantage plan:
* Insurance name
* Contractor ID
* Type of Medicare Advantage plan (HMO, PPO, etc.)
* Address
* Phone number
* Effective date
* Termination date (If applicable)
* Instructions on next step
* MSP:
* MSP trailer description
* Insurance name
* Effective date (If applicable)
* Policy number (If available)
* Instructions on next steps
* SNF overlap:
* Facility name
* DOS (from and to)
* Facility address
* Facility phone number
* Instructions on next steps
* In addition, if your claim denied due to SNF consolidated billing regulations, the IVR will validate whether professional services are permitted to be paid separately for the procedure code billed and offer the ability to add the appropriate professional services modifier to the code and automatically reprocess your claim.

 After you receive your information, you can:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Next claim" | 2 |
| "Previous claim" | 3 |
| "Claim details" | 4 |
| "Additional information" | 5 |
| "Change the date" | 6 |
| "Change the Medicare number" | 7 |
| "Change the PTAN" | 8 |
| "Change the NPI" | 9 |
| ["Main menu"](dDocName:00004415) |  |

(3) Patient account number

* Say or enter your NPI number.
* Say or enter your PTAN.
* Say or enter the last 5 digits of your tax identification number (TIN).
* Say the financial control number (FCN) of the refund request located on your remittance statement.

You will receive:

* The patient account number
* The date of service

After you receive your information, you can:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Change FCN" | 2 |
| "Change PTAN" | 3 |
| "Change NPI" | 4 |
| ["Main menu"](dDocName:00004415) |  |

(4) Financial information

* Say or enter your NPI number.
* Say or enter your PTAN number.
* Say or enter the last 5 digits of your tax identification number (TIN).

Choose one of the following options:

| Say... | Press... |
| --- | --- |
| "Checks" | 1 |
| "Provider summary" | 2 |
| "Duplicate remittance" | 3 |

(1) If you chose the checks option, how do you want to search for your check?

| Say... | Press... |
| --- | --- |
| "Check number" | 1 |
| "Status" | 2 |
| "Range of dates" | 3 |

Check number

* Say or enter the 9-digit check number.

You will receive the following check information:

* Check number
* Check issue date
* Check amount
* Cash date
* Check status if not cashed– outstanding, cancelled or voided

After you receive the check information:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Duplicate remittance" | 2 |
| "Change the check number" | 3 |
| "Change the PTAN" | 5 |
| "Change the NPI" | 6 |
| ["Main menu"](dDocName:00004415) |  |

Check status

Choose one of the following check statuses:

| Say... | Press... |
| --- | --- |
| "Outstanding" | 1 |
| "Paid" | 2 |
| "Stopped" | 3 |
| "Voided" | 4 |

You will receive the following check information:

* Check number
* Check issue date
* Check amount
* Cash date
* Check status if not cashed– outstanding, cancelled or voided

After you receive the check information:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Duplicate remittance" | 2 |
| "Next check" | 3 |
| "Previous check" | 4 |
| "Change the status" | 6 |
| "Additional information" | 7 |
| "Change the PTAN" | 8 |
| "Change the NPI" | 9 |
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Range of dates

Say or enter the starting date and ending dates in MMDDYYYY format.

You will receive the following check information:

* Check number
* Check issue date
* Check amount
* Cash date
* Check status if not cashed– outstanding, cancelled or voided

After you receive the check information:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Duplicate remittance" | 2 |
| "Next check" | 3 |
| "Previous check" | 4 |
| "Change the date" | 5 |
| "Additional information" | 7 |
| "Change the PTAN" | 8 |
| "Change the NPI" | 9 |
| ["Main menu"](dDocName:00004415) |  |

(2) If you chose the provider summary information:

You will receive the following information:

* Pending claims - The total number of assigned claims pending.
* Approved to process claims - The total number of assigned claim in the approved-to-process status.
* Finalized claims - The total number of year-to-date transactions resulting in payment to your provider number this year.
* Month-to-date earnings
* Year-to date earnings
* Current approved to pay amount

After you receive this information, you can:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Change the PTAN" | 2 |
| ["Main menu"](dDocName:00004415) |  |

(3) If you chose the duplicate remittance:

Say or enter your 9-digit check number.

After your remittance is ordered you can:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Another duplicate remittance" | 2 |
| "Change the PTAN" | 3 |
| "Change the NPI" | 4 |
| ["Main menu"](dDocName:00004415) |  |

Helpful hints if you do not know the 9-digit check number:

* If you know the date or approximate date of the remittance, select the “Checks option” from the main menu, then “Range of dates” and enter your date range. The checks will be voiced in date order and will include an option to order a duplicate remittance after hearing the check information.
* If you know a claim that was on the remittance, select the “Claim Status Option” from the main menu and enter the beneficiary claim information. The check number is voiced within the claim level details. Write down the check number and come back to the duplicate remittance option to place your order.

(5) Pricing

* Say or enter your NPI number
* Say or enter your PTAN number
* Say or enter the last 5 digits of your tax identification number (TIN).
* Say or enter the procedure code.
* Say or enter the modifier (TC or 26) or say "No modifier"
* Say or enter the locality of your office (\* This prompt will only occur for states with multiple localities).
* Say or enter the date of service.

| Contracts | Locality / Localities |
| --- | --- |
| DE | 01 |
| DC Metro, MD / VA | 01 |
| MD | 01 - Baltimore / Surrounding counties  99 - Rest of the state |
| NJ | 01 - Bergen, Essex, Hudson, Hunterdon, Middlesex, Morris, Passaic, Somerset, Sussex, Union or Warren counties  99- Rest of the state |
| PA | 01 - Philadelphia, Bucks, Chester, Delaware or Montgomery counties  99 - Rest of state |

Note: The IVR voices the maximum allowable amount and that you should reference our website for more detailed pricing information.   
After you receive the pricing information, you can:

| Say... | Press... |
| --- | --- |
| "Repeat that" | 1 |
| "Change the procedure code" | 2 |
| "Change the PTAN" | 3 |
| "Change the NPI" | 4 |
| ["Main menu"](dDocName:00004415#MainMenu) |  |

(6) I have a question

Choose your option:

| Say... | Press... |
| --- | --- |
| "Medicare news" | 1 |
| "Appeal rights" | 2 |

[[ Return to the Customer Service Center]](dDocName:00004397)