

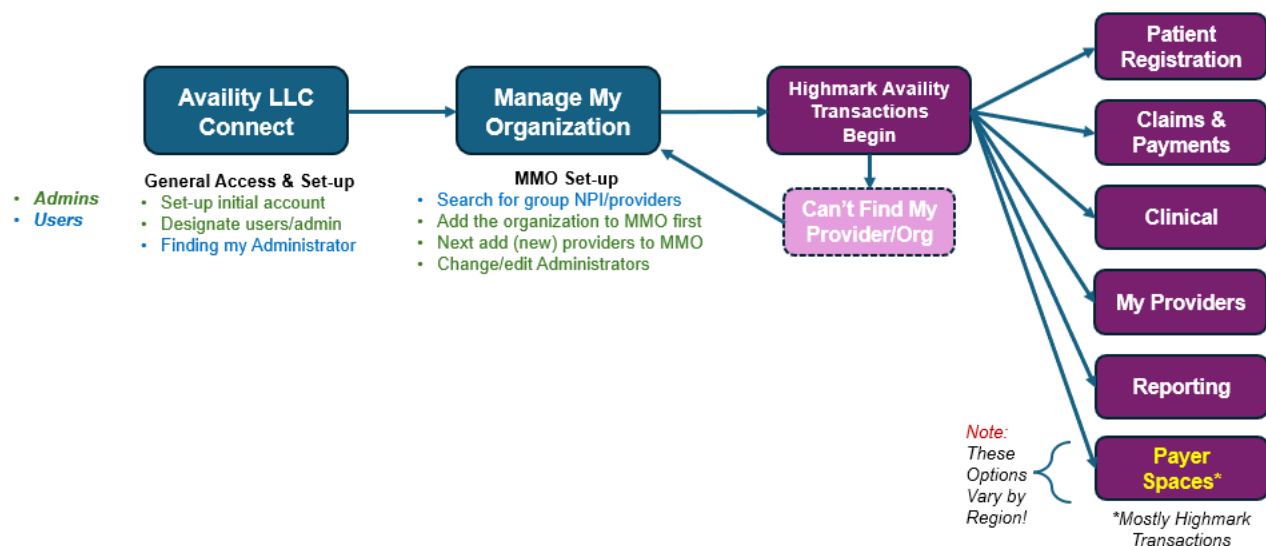
Availity Troubleshooting Guide

December 2024

Topics

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Process Flow of Availity Adoption



General Access and Support

Before beginning use of [Availity](#)[®], check that you are using the proper browser:

Web Browser Best Practices

Every **tab** you open consumes working memory (aka RAM), which can eventually lead to significant performance issues, so keeping the number of open tabs to a minimum is always in your best interest when using any web-based application.

YOU SHOULD KNOW...
Availity supports Google Chrome, Firefox[®] and Microsoft Edge v79, or higher

Be sure to allow for all pop-ups.
Clearing your cache and cookies can also ensure the best user experience.

PFA/ Value Insights Center should only be accessed using Google Chrome browser.

Steps to clearing the cache

Google Chrome	Microsoft Edge
<ol style="list-style-type: none">1. Open your browser and click the at the top right of the screen2. Choose Delete browsing data3. Click the Advance tab4. Change time range to "All time"5. Select the check boxes noted below, as desired:<ul style="list-style-type: none">• Browsing history• Download history• Cookies and other site data• Cached images and files <p>Note: If the check box next to cookies and other site data is selected, you will be signed out of most websites.</p> <ol style="list-style-type: none">6. Select Clear Data7. Once the cache is cleared, close all open Chrome browsers, and then restart Chrome.	<ol style="list-style-type: none">1. Open your browser and click the at the top right of the screen2. Choose Settings3. Choose Privacy, search and services4. Scroll down to select Clear browsing data now5. Click on Choose what to clear6. Ensure Cookies and Temporary Internet files are marked <p>Note: If the check box next to cookies and other site data is selected, you will be signed out of most websites.</p> <ol style="list-style-type: none">7. Select Delete

Note: If you are experiencing unexpected errors with functionality, reboot or check to see if the cache has been cleared.

Issue 1: I do not have an Availity account.

• Steps to follow:

- Register for an account with [Availity](#), LLC (Use the "Get Started" resource below).
- OR reach out to Availity Support at 800-282-4548 – Monday-Friday 8am to 8pm EST.
 - Have the Billing **Group (Type 2) NPI (National Provider Identifier)** available when calling.
 - If you are unsure of your Billing Group (Type 2) NPI:
 - Check your in-house sources *first* to determine who knows your NPI.
 - Check with the Centers for Medicare and Medicaid Services (CMS) at: [National Plan and Provider Enumeration System](#).
- When registering, select someone in your organization (office, practice, or facility) to serve as the primary **Availity Administrator**.
- The Administrator does the following to initially set up user accounts:
 - Creates a personal user account.
 - Registers the organization on www.Availity.com.
 - Gives each user in the organization access to Availity Essentials.

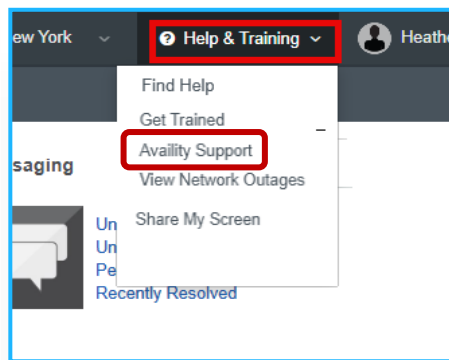
- Assigns roles to your user accounts as needed.

- **Availity Set-Up Resources**

- **Availity**
 - [Availity New User Guide](#) (slides 2-3)
 - [Register and Get Started with Availity Essentials](#)
- **Highmark Provider Resource Center**
 - [Availity \(highmark.com\)](#)
 - [Registration \(highmark.com\)](#)

Issue 2: I am having navigation issues in Availity, and I cannot find what I need.

- Within Availity, go to **Help & Training** on the main menu for training resources.
- Contact support at: 800-AVAILITY/800-282-4548.
- A chat feature is also available in **Availity Support > Contact Support**:



NOTE: All images in this document feature test data.

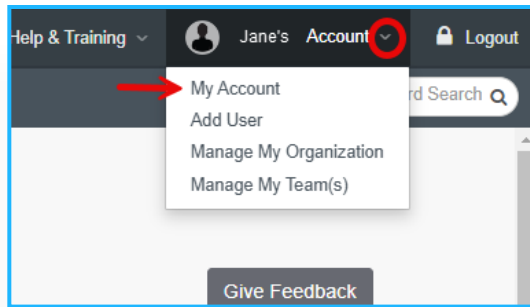
- **Resources for Availity Navigation**

- **Availity Trainings** (must log into Availity to use)
 - [Catalog - Courses | Payer Learning and Resources \(learnupon.com\)](#)

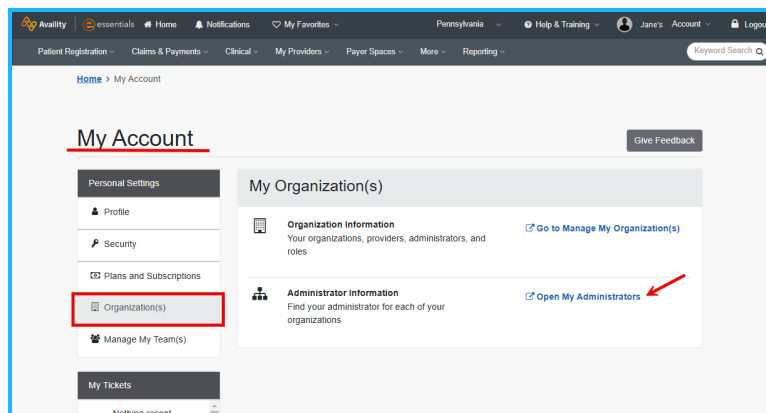
Issue 3: I do not know who my Availity Administrator is.

- **Note:** Availity users can view *only* those Administrators associated with their organization.
- **Steps to follow:**
 - Select the down arrow to the right of your **Account** in the top right portion of the screen; a dropdown menu will appear.
 - Select **My Account** from the dropdown menu.

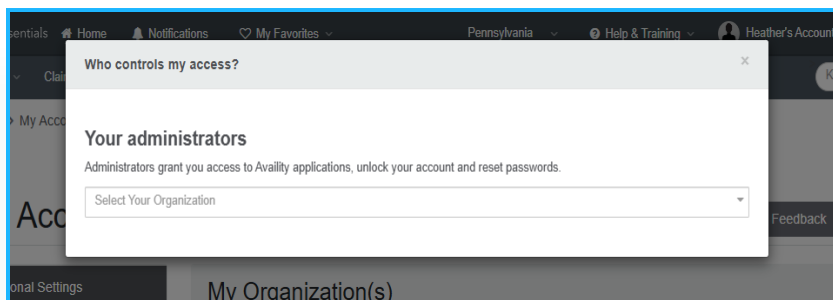
- **Note:** At this point, you may be asked to complete the two-step security process to verify your ID before being allowed to proceed with the login.



- Once the **My Account** window appears, click on **Organization(s)** from the menu on the left; select the blue **Open My Administrator** link.



- When, the **Who Controls My Access?** pop-up window appears (see below), select the arrow to the right for the dropdown menu to **Select Your Organization** to get a list of the Administrators associated with your Organization:
 - **Note:** If you only have one organization, the list of Administrators will automatically populate.



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- **My Account Training Resources – For Administrators Only**
 - Availity Essentials Trainings (*must be logged into Availity to access*):
 - (Users only) [My administrators \(availability.com\)](#)
 - (Administrators only) [View and edit roles & permissions](#)

Payer Spaces Access

Issue 1: I do not have access to Payer Spaces.

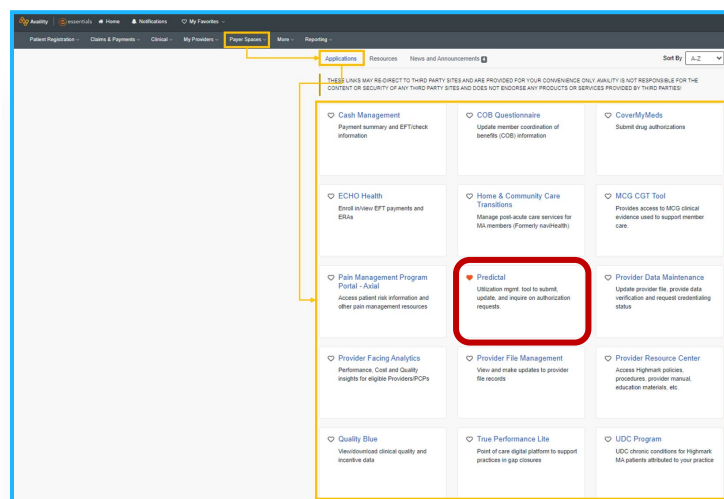
- You can check with your Administrator to ensure that your account was set up properly in Availity.
- *If the Administrator confirms proper access, notify Availity Client Services.*
 - Availity Trainings (*must log into Availity to access*):
 - Provider Crosswalk Document: [Availity Essentials Provider Help Center](#)
 - [Payer Spaces overview \(availity.com\)](#)

Issue 2: I cannot access the Highmark applications under Payer Spaces.

- Follow the instructions presented on the screen within the specific application.
- OR reach out to Highmark Provider Service.

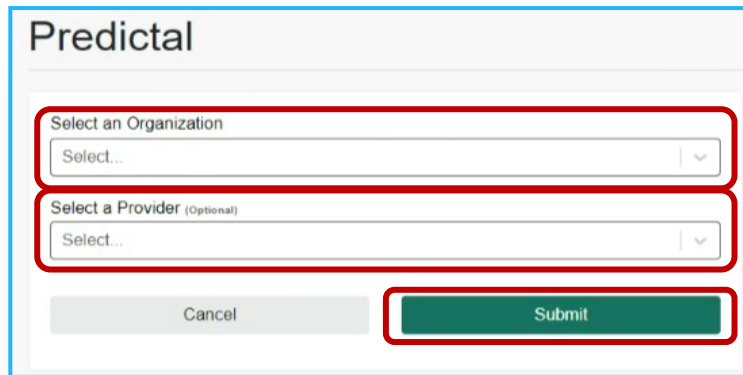
Issue 3: I do not see the Provider or organization that I need under Payer Spaces in Availity.

- **Steps to Follow:**
 - Verify the state (of the provider) from the main menu at the top of the screen.
 - Select **Payer Spaces** from the main menu.
 - Select the appropriate Highmark payer option.
 - Scroll down to view all the tile options for various transactions.
 - **For example**, select the **Predictal** tile (*as highlighted below*):



NOTE: All images in this document feature test data.

- The **Select an Organization** window will appear (as seen below).
- Select the name of the organization from the dropdown of the **Select an Organization** field (or type in the name of the organization).



The image shows a screenshot of a web application window titled "Predictal". The window contains two dropdown menus. The first dropdown is labeled "Select an Organization" and has a "Select..." placeholder. The second dropdown is labeled "Select a Provider (Optional)" and also has a "Select..." placeholder. Below these dropdowns are two buttons: "Cancel" and "Submit". The "Submit" button is highlighted with a red border.

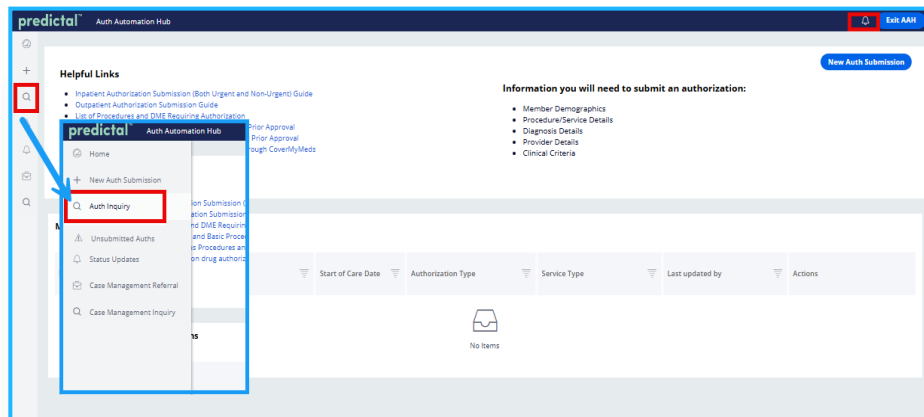
- **Note:** The **Select a Provider** option (under **Select an Organization**) can be used to narrow down the Provider search.
- If you do NOT see the Provider listed, then check the [Manage My Organization guide](#) on the Provider Resource Center.

Authorizations

Issue 1: I am not sure how to check the status of my authorizations submitted in Predictal.

- **Steps to follow:**

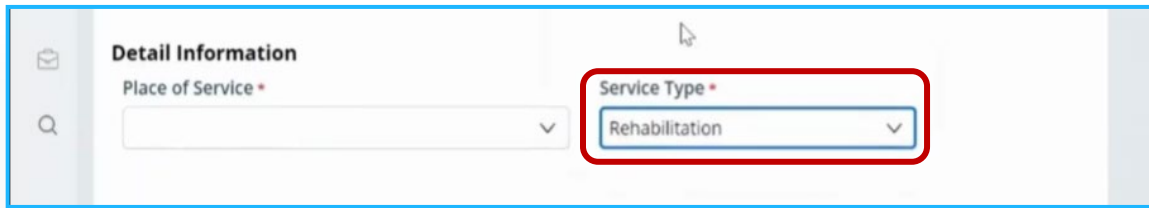
- Verify the state (of the provider) from the main menu at the top of the screen.
- Select **Payer Spaces** from the main menu and click on the **Predictal** tile.
- When the **Predictal** tile opens there are two ways to check authorization status:
 1. Click on the alerts bell icon (*top right*) to view authorizations submitted by you.
 2. Search via Auth Inquiry using the magnifying glass on the left side navigation menu.



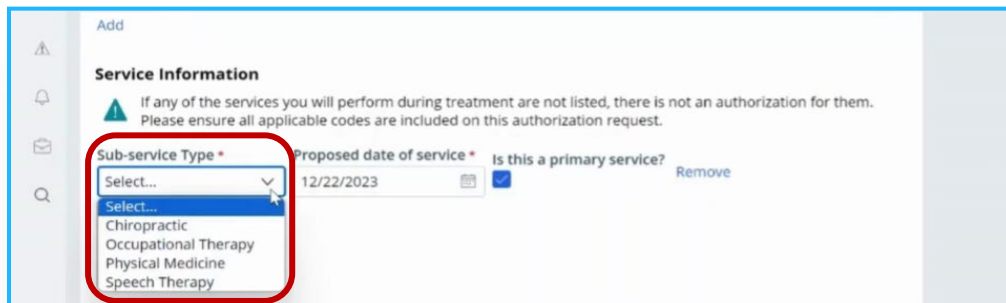
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Issue #2: I am not sure how to submit an authorization for a member's rehabilitation (e.g., PT, OT, or chiropractic). My authorization is denying "no authorization on file" when I know it is needed.

- For Rehabilitation services, you must choose the correct:
 - Place of service
 - Service type
 - Sub-service type
 - **Note:** Choosing this incorrectly could cause the authorization to **not** be processed or the claim could deny for "no authorization on file".
- **Steps to follow on authorizations for Rehabilitation services:**
 - Verify the state (of the Provider) from the main menu at the top of the screen.
 - Select **Payer Spaces** from the main menu.
 - Scroll down and select the **Predictal** tile.
 - Once you have advanced into the Predictal screens, be sure to select the correct information:
 - Under the **Service Information** section of the screen, select **Rehabilitation** from the **Service Type** field's dropdown menu.



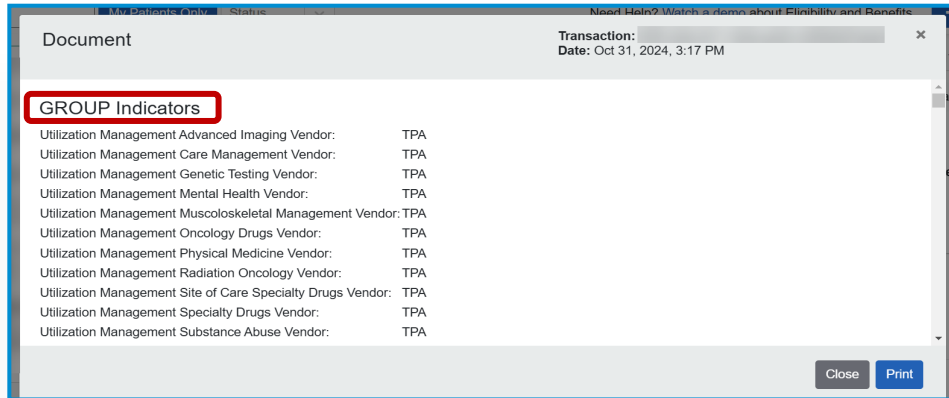
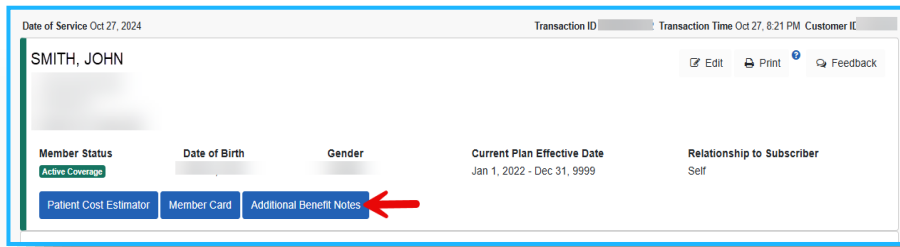
- Select the appropriate therapy type from the Sub-Service Type dropdown menu (Each therapy type has specific procedure codes that fall within the therapy type range).



- Do **NOT** change the Service Type to Medical Care to change the code manually.
- Continue through the remaining fields to complete the authorization request.

Issue 3: I am unsure of how to submit out-of-area vs. in-area authorizations.

- All Highmark authorizations can be started through **Patient Registration > Authorizations & Registration** in Availity, including eviCore and Helion.
 - **Note:** All out-of-area authorizations must be submitted through this process.
 - In-area authorizations may also be submitted through **Payer Spaces > Predictal** tile.
- Only CoverMyMeds, Home & Community Care Transitions (formerly naviHealth), or Third-Party Administrators (TPAs) have separate pathways.
 - **Note:** CoverMyMeds and Home & Community Care Transitions are accessible via **Payer Spaces**.
- Third-Party Administrator authorizations:
 - Must go through those companies' portals.
 - To find out if a member has a TPA, review member information listed under **Eligibility and Benefits > Additional Benefit Notes** (blue button):



- Also check the back of the member's ID card.

- **Resources for Authorizations**

- [Obtaining Authorizations](#) page on the PRC
 - [Authorization Training & Resources](#)
- Predictal videos on the PRC:
 - [Case Management Referral Process on Vimeo](#)
 - [Electronic Authorization Submission Process on Vimeo](#)
- Availity Trainings (*must log into Availity to access*):
 - [Submit an authorization request \(availity.com\)](#)

Eligibility and Benefits (E&B)

Issue 1: I do not know how to check the E&B of my member in Availity to determine whether or not an authorization is required, specifically via a Third-Party Administrator (TPA).

- **Steps to follow:**

- Verify the state (of the Provider) from the main menu at the top of the screen.
- Select **Patient Registration** from the main menu (a drop-down menu appears).
- Select the **Eligibility and Benefits Inquiry** from the options on the dropdown menu.
- Search for **Patient Information** by:
 - Member Search
 - Single Patient – *this search must be used for Out-of-Area members*
 - Multiple Patients
- Enter **Service Information** and click the **Submit** button at the bottom of the screen:

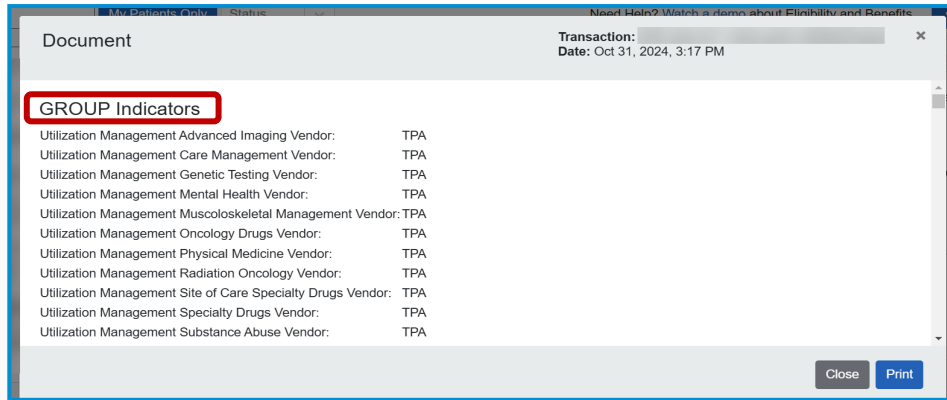
The screenshot shows the 'Eligibility & Benefits' form. At the top, there is a yellow warning banner: 'To search for out of area members, use the Single Patient Search tab. Enter the facility or group NPI instead of the individual provider NPI.' Below this, there are fields for Organization (Highmark) and Payer (HIGHMARK BLUE CROSS BLUE SHIELD). The 'Provider Information' section includes a dropdown for Provider, a search field, and input fields for Provider NPI, Provider Tax ID, Organization or Provider Last Name, and Provider First Name. The 'Patient Information' section has tabs for Member Search, Single Patient, and Multiple Patients. It includes a search instruction and input fields for Member ID/Policy Number, Date of Birth, Member ID/Policy Number, and Date of Birth. The 'Service Information' section is highlighted with a red box and contains 'All of Date' (10/20/2024) and 'Benefit / Service Type' (Health Benefit/Plan Coverage (H)). A 'Submit' button is highlighted with a red box at the bottom right.

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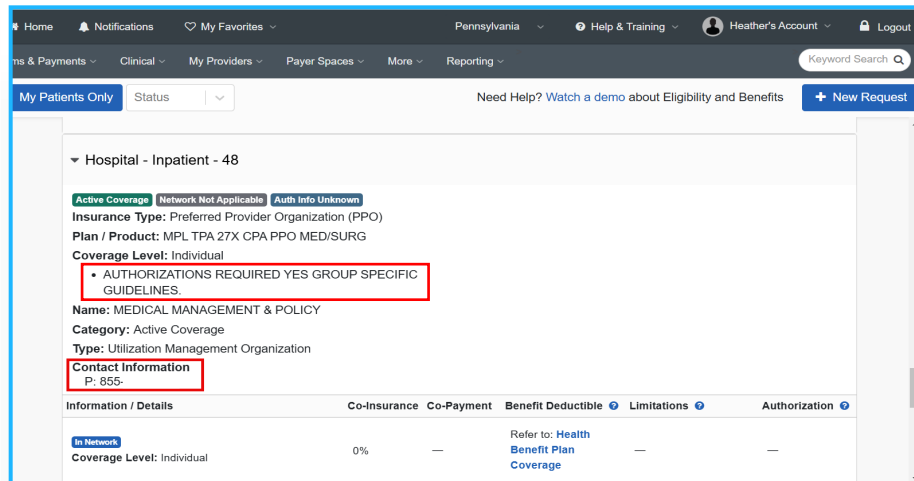
- From the **Eligibility & Benefits Details** page, select the blue **Additional Benefit Notes** button to review the **Group indicators** (seen further below):

The screenshot shows the 'Eligibility & Benefits Details' page for member SMITH, JOHN. At the top, it displays 'Date of Service Oct 27, 2024', 'Transaction ID', 'Transaction Time Oct 27, 8:21 PM', and 'Customer ID'. Below this, there are icons for Edit, Print, and Feedback. The member's name 'SMITH, JOHN' is displayed. Below the name, there are fields for Member Status (Active Coverage), Date of Birth, Gender, Current Plan Effective Date (Jan 1, 2022 - Dec 31, 9999), and Relationship to Subscriber (Self). At the bottom, there are three buttons: Patient Cost Estimator, Member Card, and Additional Benefit Notes. A red arrow points to the Additional Benefit Notes button.

- If the **Additional Benefit Notes** information indicates that the utilization management (UM) is managed by a TPA, look at the member's ID card for the TPA contact information, or look at the service under the **Benefit Information**.



- Click on the arrow to expand the information and call the TPAs telephone number under the **Contact Information** field. (See the example below).



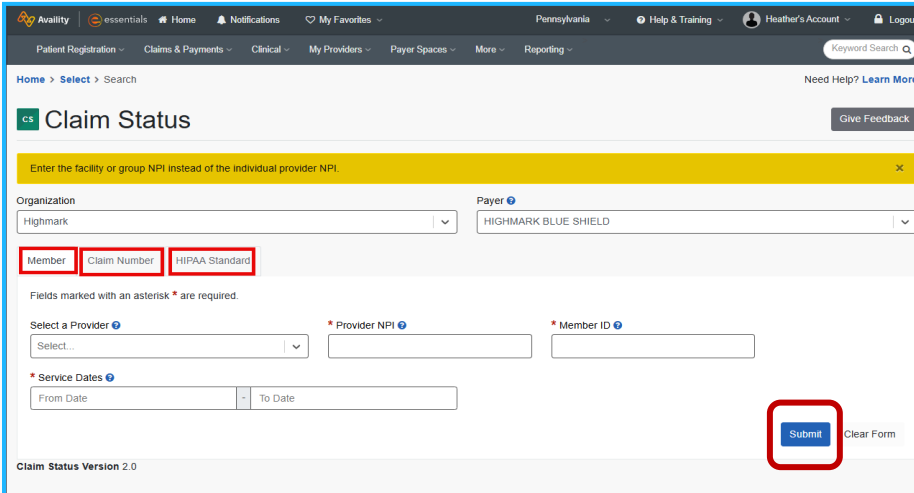
- **Resources for Eligibility and Benefits**

- Availity Trainings (must log into Availity to access):
 - [Access the Eligibility and Benefits Inquiry application \(availity.com\)](https://www.availity.com)

Claims Inquiry

Issue 1: I cannot see the status of the claim that I submitted or if it was denied.

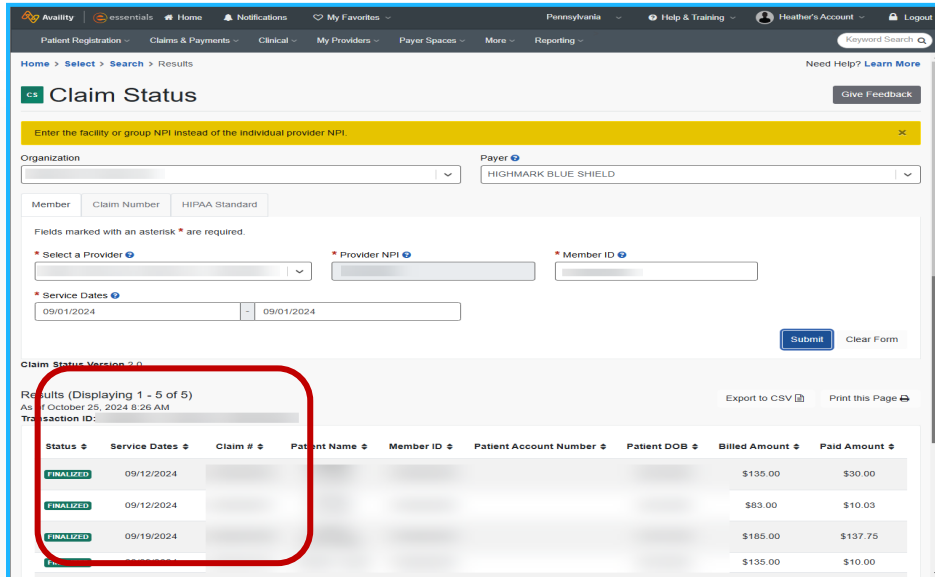
- **Note:** For Highmark, to initiate a claims inquiry, a user must use the **Message this Payer** feature (instead of the **Dispute Claim** feature which has been disabled for Highmark).
- **Steps to follow:**
 - Verify the state (of the Provider) from the main menu at the top of the screen.
 - Select **Claims & Payments > Claim Status** from the main menu.
 - There are three ways to search for a claim (as highlighted below):
 - Member
 - Claim Number
 - HIPAA Standard – this must be used when searching for out-of-area (BlueCard) claims.
 - Enter the required information and select the blue **Submit** button at the bottom of the window.



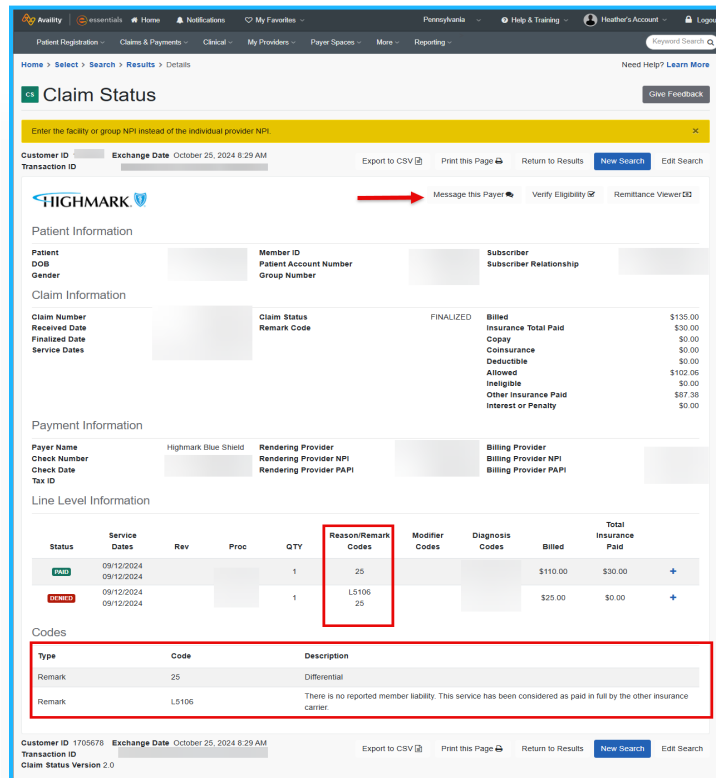
The screenshot shows the Avality web application interface for the 'Claim Status' page. At the top, there is a navigation bar with 'Avality' logo, 'essentials', 'Home', 'Notifications', 'My Favorites', 'Pennsylvania', 'Help & Training', 'Heather's Account', and 'Logout'. Below the navigation bar, there are tabs for 'Patient Registration', 'Claims & Payments', 'Clinical', 'My Providers', 'Payer Spaces', 'More', and 'Reporting'. A search bar is located on the right. The main heading is 'Claim Status' with a 'Give Feedback' button. A yellow banner提示 says 'Enter the facility or group NPI instead of the individual provider NPI'. Below this, there are dropdown menus for 'Organization' (set to 'Highmark') and 'Payer' (set to 'HIGHMARK BLUE SHIELD'). Three radio buttons are visible: 'Member', 'Claim Number', and 'HIPAA Standard', all of which are highlighted with red boxes. Below the radio buttons, there is a note: 'Fields marked with an asterisk * are required.' There are three input fields: 'Select a Provider' (dropdown), '* Provider NPI' (text), and '* Member ID' (text). Below these is a '* Service Dates' section with 'From Date' and 'To Date' fields. At the bottom right, there is a blue 'Submit' button (highlighted with a red box) and a 'Clear Form' link. The footer text reads 'Claim Status Version 2.0'.

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- When the search **Results** display, click on the claim that you would like to review:

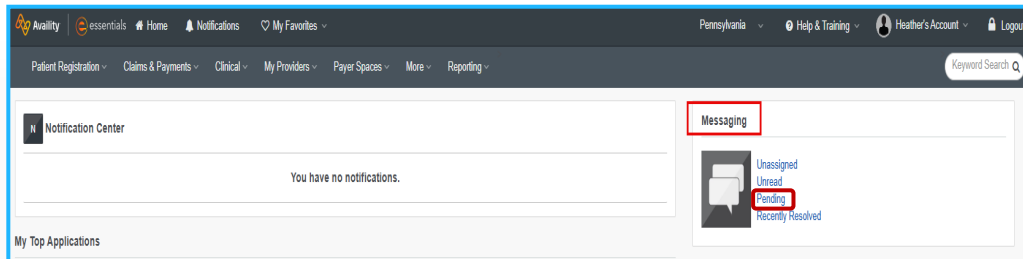


- After selecting the claim, the **Claim Status Detail** page appears along with the **Reason/Remark Codes** column (as highlighted below) for the specific claim.
- Select the **Message this Payer** link from this page if you would like to send an inquiry to Highmark's Provider Services department.

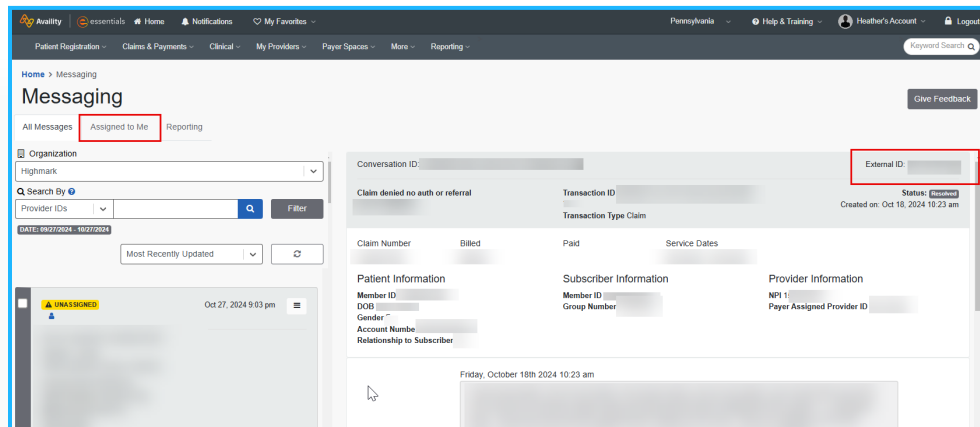


Issue #2: I cannot find the ID number for the claim inquiry that I just submitted in Availity.

- Users do get a reference ID number, but it is not viewable after hitting the **Submit** button.
- Users will receive a success message after submitting the inquiry via **Message this Payer**.
- **Steps to follow:**
 - To view the External ID, which is the equivalent of a claim inquiry number, users must go to the **Messaging Center**.



- Select the **Pending** option and the **Messaging** screen appears.
- Select the **Assigned to Me** option on the left side of the screen and your claims appear.



- The **External ID** (claim inquiry number) can be seen to the right of the screen.

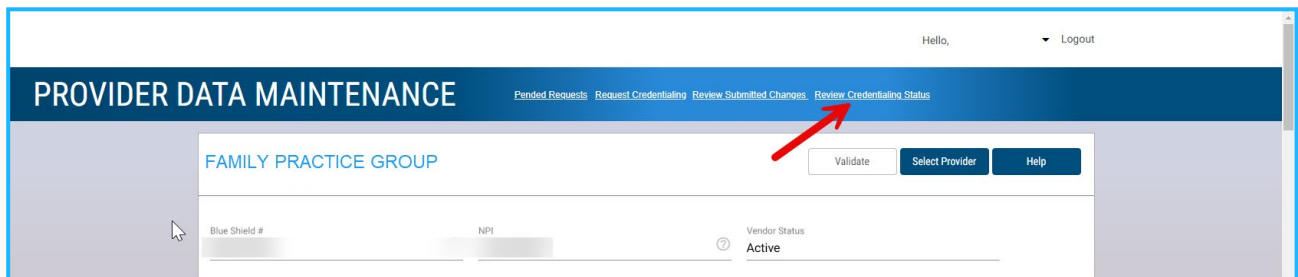
Resources for Claims Inquiries

- <https://providers.highmark.com/claims-and-authorization/reimbursement-resources/electronic-claims-submission-status-and-inquiry>
- Availity Trainings (*must log into Availity to access*):
 - [Access the Claims & Encounters application \(availability.com\)](https://providers.highmark.com/claims-and-authorization/reimbursement-resources/electronic-claims-submission-status-and-inquiry)

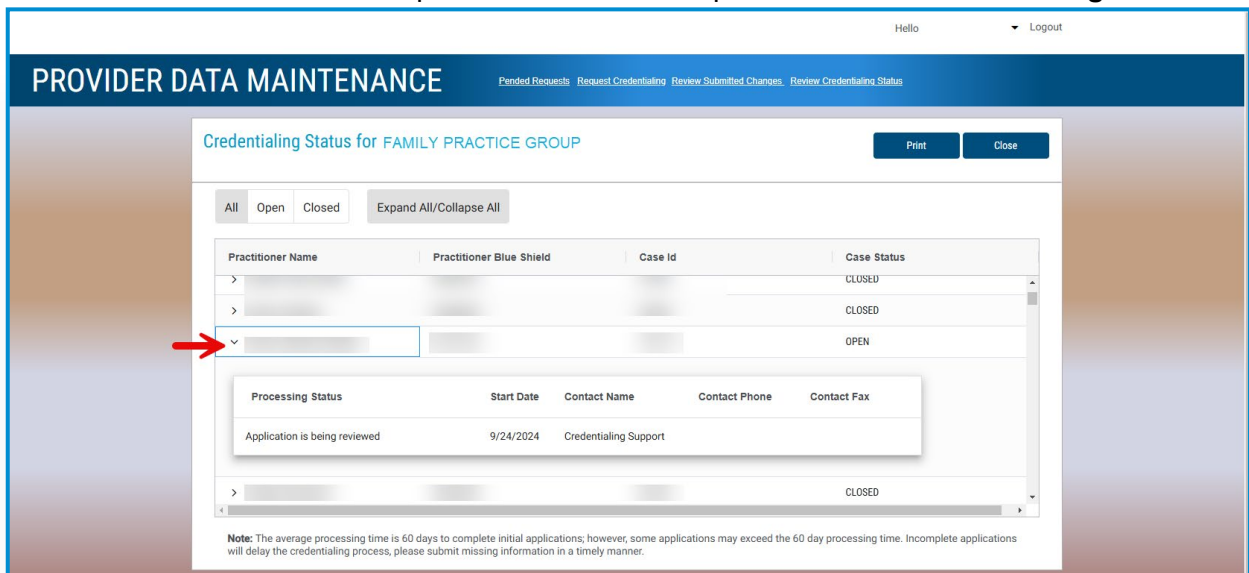
Credentialing

Issue 1: I am not sure how to confirm the credentialing status of the Providers at my organization.

- **Steps to follow:**
 - Verify the state (of the Provider) from the main menu at the top of the screen.
 - Select **Payer Spaces** from the main menu.
 - Select the **Provider Data Maintenance** tile.
 - Select the Billing Group (Type 2) NPI where the practitioner in question works.
 - Select the **Review Credentialing Status** link in the upper right corner of the **Provider Data Maintenance** screen (the **Credentialing Status for Family Practice Group** screen appears).



- Click on the arrow beside the practitioner's name in question to view a **Processing Status**.



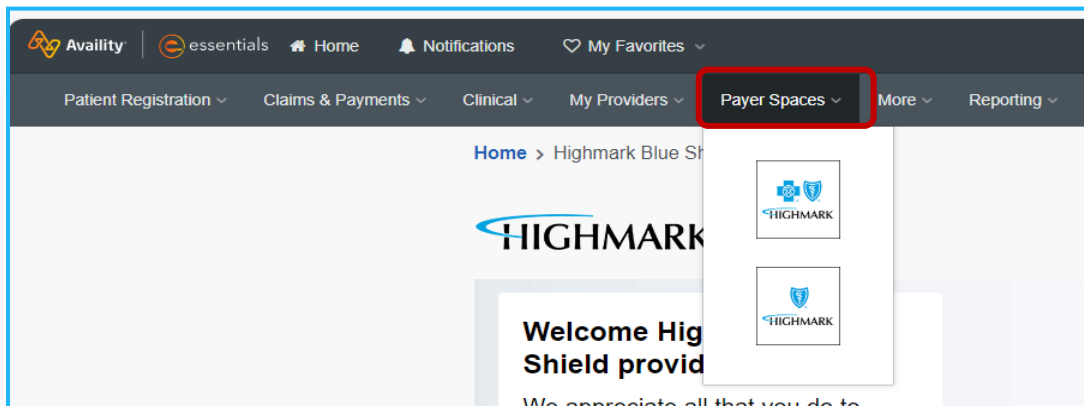
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- **Resources for Credentialing**
 - [Professional Credentialing \(highmark.com\)](https://www.highmark.com)

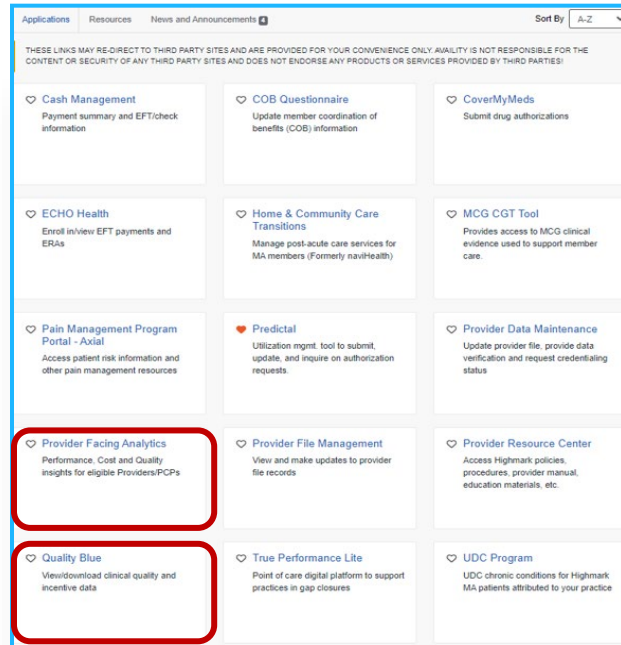
Reporting Access – Provider Facing Analytics (PFA) and Quality Blue

Issue 1: I cannot access the **Provider Facing Analytics (PFA)** tile via **Payer Spaces**. OR When selecting the payer, I receive an error message for the PFA option.

- Please refer to **Web Browser Best Practices** (at the beginning of this document) to ensure optimal functionality within the application.
- **Steps to follow:**
 - Verify the state (of the Provider) from the main menu at the top of the screen.
 - Select **Payer Spaces** from the main menu.
 - Choose the appropriate payer logo from the dropdown menu under **Payer Spaces** (the number and variety of payers shown will vary by Organization):



- Scroll down and select the **Provider Facing Analytics** tile (**Note:** The **Quality Blue** data tile is here also):



NOTE: All images in this document feature test data.

- After selecting **Submit**, the PFA application should open.
- If it does not and this error message appears (*as seen below*), send an email to ProviderFacingAnalytics@highmark.com.



- **PFA Resources**

- [EXTERNAL Value Insight Center Provider Training Stars & TP Quality 6.2024.pptx \(sharepoint.com\)](#)

Issue 2: I cannot access Quality Blue analytics data via **Payer Spaces**.

- Please refer to **Web Browser Best Practices** (*at the beginning of this document*) to ensure optimal functionality within the application.
- **Note:** *Accessing QB has the same exact steps as accessing Provider Facing Analytics (PFA).*
- **Steps to follow:**
 - Verify the state (of the Provider) from the main menu at the top of the screen.
 - Select **Payer Spaces** from the main menu and select the **Quality Blue** tile.

- After hitting **Submit**, the application will open,
- If an error occurs or the expected information does not display in the application when it loads, please contact your Medicare Advantage Quality Consultant or Provider Services department.

- **Quality Blue Resources**

- All resources for Value Insight Center (VIC), including QBs, are available through two areas:
 1. [Value Insight Center - Home \(sharepoint.com\)](#). There will be additional training videos added to this site as they are developed.
 2. In Availity through **Payer Spaces**:
 - a. Select **Education and Resources** section of the screen.
 - b. Select the PowerPoint under the **External Resources** option to the right.
 - c. A presentation will appear that provides instructions to access the VIC.

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All references to "Highmark" in this document are references to the Highmark company that is providing the member's health benefits or health benefit administration and/or to one or more of its affiliated Blue companies.

