



# ▶▶ How to enter claims using Direct Data Entry in Online Services

## Introduction

Direct Data Entry (DDE) in Online Services can be used for professional claims when a Blue Cross Blue Shield Plan is the primary payer and no supplemental documentation is required. Registered users of our provider website, Provider Central, must complete an additional DDE registration in Online Services to use this tool.

This Quick Tip summarizes the steps for entering claims using DDE. For detailed instructions and cautions, review our [Direct Data Entry Set-up & User Guide](#).

## Before you begin

Disable your browser's pop-up blockers.

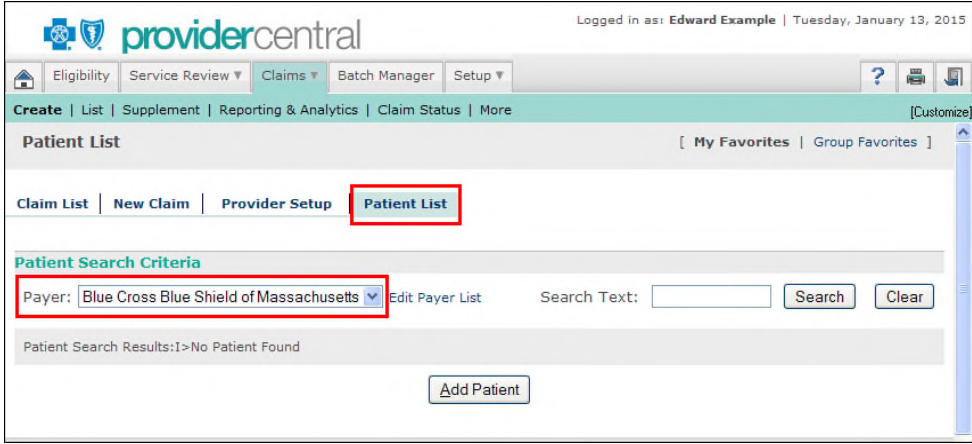
Open Online Services by logging on to [bluecrossma.com/provider](http://bluecrossma.com/provider) and clicking Online Services in the eTools area of your home page. If you do not see a link for Online Services, ask your Provider Central administrator for access.

If you have not yet completed the DDE registration process, begin by going to **Claims>Create** and then clicking **Start Setup**. For help with registration, refer to the resources at the end of this Quick Tip.

**Important!** After registering, wait 24 hours before submitting a claim. We recommend using this time to begin entering patients into your Patient List.

## How to add a patient to your Patient List

Follow the steps below to add a patient to your Patient List in Online Services.

Step:	Action:
1	Go to <b>Claims&gt;Create</b> and then click <b>Patient List</b> .
2	<p>The Patient List screen will appear. From the <b>Payer</b> menu, select Blue Cross Blue Shield of Massachusetts.</p> 
3	Click <b>Add Patient</b> .
4	The Add Patient screen will appear. Complete the fields marked with a red asterisk.

- The **Patient Account #** field must be completed with a number your practice has assigned to the patient. If your practice does not use patient account numbers, create a number to enter in Online Services.
  - If you create a patient account number:
    - Do not use a special character in the first position
    - Do not use the patient's Member ID number as their account number
    - Do not enter more than 16 characters.
- Include the prefix in the **Member ID** field.
- If the patient is a dependent, you must enter the subscriber's information into the **Insured Details** tab.

The screenshot shows the 'Add Patient' form in the providercentral system. The form is divided into two tabs: 'Patient Details' and 'Insured Details'. The 'Insured Details' tab is selected. The form contains several fields: 'Patient Account #', 'Last Name', 'Date of Birth', 'Address', 'City', 'State', 'Zip', 'Phone', 'Member ID', 'Employment Status', and 'Student Status'. There are also buttons for 'Next Tab', 'Save', 'Reset', and 'Cancel'. Three red callout boxes provide instructions: one points to the 'Patient Account #' field with the text 'Complete this field with a unique number your practice has assigned to the member.', another points to the 'Insured Details' tab with the text 'Enter the subscriber's information in this tab.', and a third points to the 'Member ID' field with the text 'Include the prefix with the Member ID number.'

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Click **Save**.

## How to enter a claim

Follow the steps below to enter a claim.

**Important!** Receiving a batch number for your submitted claims does not guarantee that we have received your claims. Be sure to track your claim (Step 6).

Step:	Action:
1	To open the claim template, go to <b>Claims&gt;Create</b> and select options from each of the four drop-down menus.  If you have multiple service addresses, be sure to select the correct service address (when the options appear) and then click the <b>Continue to Claim Data</b> button. A claim template will open in a new window.

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Eligibility Service Review Claims Batch Manager Setup

Create | List | Supplement | Reporting & Analytics | Claim Status | More [Customize]

New Claim [ My Favorites | Group Favorites ]

Claim List New Claim Provider Setup Patient List

Step 1 - Select organization  
ABC Medical

Step 2 - Select pay to address and provider  
Main Office: 123 Main St Boston MA 02298  
Smith Sarah

Step 3 - Select payer name  
Blue Cross Blue Shield of Massachusetts

Step 4 - Select a service address

Service Address	Prov NPI				Tax ID	Sub ID
<input checked="" type="radio"/> Main Office: 123 Main St Boston MA 02298	1508863911	NPI	NPI	Allopathic & Osteopathic Physicians: Psychiatry & Neurology : Psychiatry	012345678	0001

Step 5 - Choose an action  
Continue to Claim Data

2 To access your Patient List, click the **Select Patient** button in the left-hand corner of the form.

**Important!** Using the Patient List is required. Do not type patient demographic information directly into the claim template as this will result in your claim not processing.

Blue Cross Blue Shield of Massachusetts Claim

Select Patient... Use Ctrl + ' or Ctrl + ' key strokes to jump to next/prev required field

Step 1 - Payer/Insured Information

Payer ID: SB700 Claim Office: None Name: Blue Cross Blue Shield of Massachusetts

Insured ID: Group ID:

3 Use the search tool to find the patient in your list, and then click the **Select** link in the row for the correct patient.

(1 - 1) out of 1 Patients

Add Patient Close Window

* Patient Name	Relation	DOB	Account #	Member ID	Gender	Address	Actions ?
<input type="checkbox"/> Sample, Samuel	Insured	01/01/1970	sample123	XXH981234567	F	10 Main Street, Boston, MA 02215	Select Delete

\* To add a dependent to an existing insured patient, check the corresponding checkbox prior to [Add Patient].

(1 - 1) out of 1 Patients

Add Patient Close Window

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Complete the required fields, which are highlighted in pink.

Tips:

- Use the scroll bar at the bottom of your screen to see the claim line fields at the far right.
- If you render services in an office setting, leave the **Place of Service** field on its default value of 11.
- Use the **More Lines** button to create additional lines. You can enter up to 10 lines per claim. Any more than 10 lines per claim will cause the claim to reject.

Delete	*Start Date	*End Date	*Performing Provider #	Spec	*Place Code	Type Code	*Proc	Mods	*ICD-9 Ptrs	*Unit Type	*Unit Q
X			NPI:Smith, Sarah	026	11					Units	
X			NPI:Smith, Sarah	026	11					Units	
X			NPI:Smith, Sarah	026	11					Units	

Total \$0.0  
Amount Paid by Patient \$0.0

- The **Claim Receiver Type** field and the **Accepts Assignments** field (not shown) should remain on their default values.
- Select **Yes** for the **Assignment of Benefits** and the **Release of Information** fields.

\* Patient Account # sample123  
 \* Claim Receiver Type Commercial insurance company  
 \* Assignment of Benefits Yes  
 \* Release of Information Indicator Yes

When you have completed all required fields, click the **Save**.

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Submit the claim. Saved claims appear in the Claim List, where they can be submitted, edited, or printed. You can submit up to 10 lines per claim and no more than 99 claim lines in a batch.

Go to **Claims>List** and select **Saved/Unsubmitted** in the **Status** drop-down menu. Then click **Search**. To submit the claim, click the checkbox by the claim and then click the button, **Submit Selected**.

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Eligibility Service Review Claims Batch Manager Setup

Create | List | Supplement | Reporting & Analytics | Claim Status | More

Claim List [ My Claims | Group Claims ]

Claim List New Claim Provider Setup Patient List

Claims Search Criteria  
Status: Saved/Unsubmitted Claim Type: ---Select--- Service From: To: Search Text: Search Clear

Select All (1 - 3) out of 3 Claims Delete Selected Submit Selected

	Patient Name	Provider ID / NPI	Claim Type	Payer Name	Status	Status Date	Total Charges	Service Date	Batch ID	Modified By	Action
<input type="checkbox"/>	Brown,Sue	NPI / 1508863911	Commercial	Blue Cross Blue Shield of Massachusetts	Saved	01/13/2014	\$125.00	01/13/2014		Edward Example	Edit   CMS 1500
<input type="checkbox"/>	Jones,Timothy	NPI / 1508863911	Commercial	Blue Cross Blue Shield of Massachusetts	Saved	01/13/2014	\$75.00	01/13/2014		Edward Example	Edit   CMS 1500
<input checked="" type="checkbox"/>	Sample,Samuel	NPI / 1508863911	Commercial	Blue Cross Blue Shield of Massachusetts	Saved	01/13/2015	\$150.00	01/01/2015		Edward Example	Edit   CMS 1500

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**Tips:**

- If you would like to print the claim for your records, click the **CMS 1500** link on your Claim List search results page, and then click the Print button in the top left-hand corner of the screen. (The CMS 1500 view is for reference purposes only; printouts mailed to us cannot be processed.)
- To edit the claim for resubmission, click the **Edit** link, correct the claim, and then click the **Save As New Claim** button. Submit the claim as described above.

--Select--

Remarks  
CRNNPI\*1508863911,CRTQ\*E,BLGNPI\*1508863911

Save Save as New Claim Cancel

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Track the claim. Log on to Online Services to monitor the status of your submitted claims. Begin by reviewing your *Claim Confirmation Report* e-mail for an initial analysis of your claim file.

You will receive this e-mail in your Message Center in Online Services within 24 hours of submitting your claim batch. Verify in the report that every claim you submitted was accepted by the clearinghouse.

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Eligibility Service Review Claims Batch Manager Setup

Online Services Home

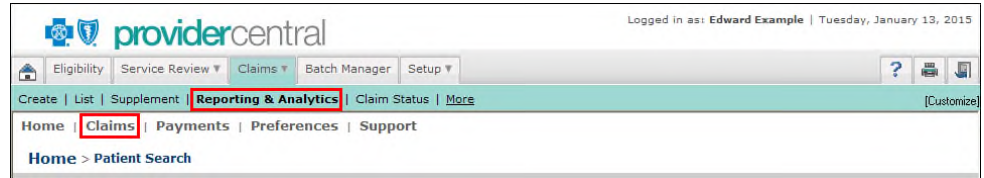
Message Center  
You have 3 unread mail messages.  
You have 0 claims batches to supplement.  
You have 0 claims requiring attachment.  
You have 0 unworked claim rejections.

Flash Messages  
View Archived Flash Messages

Customer Support  
General User Guide PDF  
Real Time User Guide PDF  
Claims User Guide PDF  
System Requirements  
Contact Us  
HIPAA Statement

**Important!** Acceptance of a claim by the clearinghouse, Change Healthcare™ (formerly Emdeon), does not guarantee that we can accept it.

Once your claims have been accepted by the clearinghouse Change Healthcare, monitor their status by viewing the *Claim Summary and Claim Detail* reports available in the **Claims** tab under **Reporting & Analytics**. This is the final step to ensure that we have received your claims for processing.



## Related resources

The following resources are available by logging on to [Provider Central](#) at and selecting **eTools>Online Services**.

- [How to register for Direct Data Entry in Online Services](#)
- [How to view Direct Data Entry reports in Online Services](#)
- [DDE Set-up & User Guide](#)

For additional help, please call our EDI/Provider Self-Service Support Team at **1-800-771-4097**.

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