



**Claim Encounter Reconciliation Application (CERA)** is a web-based application in the Availity® Provider Portal that helps providers manage and respond to Blue Cross and Blue Shield of Montana (BCBSMT) if potential coding opportunities are identified, based on claims data, for members with on and off-exchange health insurance plans. Mailing and faxing medical records remain options for providers when responding to requests for quality and risk adjustment purposes. Providers who are not Availity users will continue to receive these requests by mail, fax or in-person visits. If you are not a registered Availity user, you may complete the guided online registration process at [Availity.com](http://Availity.com) – at no charge. BCBSMT only accepts medical records through CERA in response to requests for additional medical record documentation used for risk adjustment purposes.

**To enable this feature, Administrators must complete the following instructions:** Log in to [Availity](#) > select **Enrollments Center** > **Claim Encounter Reconciliation Application (CERA) Setup** > complete three-step enrollment Wizard

## 1. Receiving CERA Requests

New CERA requests from BCBSMT will display in the Availity **Notification Center**

Select **Claims & Payments** > **Claim Encounter Reconciliation Application (CERA)**

The **Work Queue** list will display new and previously submitted CERA requests with the following color-coded status:

- **Green – New:** request has not been submitted
- **Yellow – Pending:** submitted & awaiting acceptance from BCBSMT
- **Gray – Submitted:** submitted & accepted by BCBSMT

Search
<div style="display: flex; justify-content: space-between;"> <span>New</span> <span>In Progress</span> <span>Completed</span> </div> <div style="border: 1px solid gray; padding: 5px;"> <p><b>FENDER, ARTURO</b> Member ID: 123456789 Birthdate: 12/13/1988</p> <p><b>PARKS, LORETTA</b> Member ID: 123456789 Birthdate: 10/25/1988</p> <p><b>JOHNS, BETSY</b> Member ID: 123456789 Birthdate: 11/13/1949</p> </div>

**Quick Tip:**

→ Utilize the **Search** feature above the **Work Queue** to search, sort and filter requests

To open a request, select the **Patient Card**

## 2. Completing CERA Requests – Assessment Code

Pre-populated patient and provider data displays at the top of the page

Diagnosis code(s) on the claim display in the middle of the page

Choose an **Assessment Code** for each condition in the **Were any of the following condition(s) also assessed for this patient?** section

**Quick Tip:**

→ If the **Patient Card** includes more than one date of service, click the arrow to open and close the **DOS** section

Fender, Arturo    Member ID: 123456789    DOB: 12/13/1988  
 DOS: 10/31/2017    Claim Amount: \$240.00    Payer: BLUE CROSS BLUE SHIELD OF MONTANA

**Provider Info**

**Billing Provider**  
 Name: Mountain View Family Practice  
 NPI: 1234567890

Diagnosis code(s) submitted on this claim:

ICD Type	Code	Description
ICD-10	F4323	Adjustment disorder with mixed anxiety and depressed mood

Were any of the following condition(s) also assessed for this patient?

Type	Code	Description	Last Reported	Assessment Code
HCC Group	15	HCC Group: Asthma and Chronic Obstructive Pulmonary		Select an answer...

Select an answer...

- The Clinician assessed and documented this condition.
- The Clinician did not assess and document this condition.
- The visit was not a face-to-face encounter with the patient.
- The Clinician treated, assessed or monitored this condition in the past, but is no longer an active condition.

### 3. Completing CERA Requests – Diagnosis Code(s)

Clinicians who assessed the condition during the date of service > select an ICD-10 in the **Select a diagnosis** code field

Were any of the following condition(s) also assessed for this patient?

Type	Code	Description	Last Reported	Assessment Code
HCC Group	15	HCC Group: Asthma and Chronic Obstructive Pulmonar		<input type="text" value="The Clinician assessed and documented this c..."/> × <input type="text" value="Select a diagnosis code..."/>

**Quick Tip:**


→ If the Clinician assessed a condition that is a hierarchical condition category (HCC) type, a replacement claim with the diagnosis code that closes the condition must be submitted

### 4. Completing CERA Requests – Medical Record Documentation


If prompted, drag and drop files or click a button to attach medical record documentation > **Submit**

Were any of the following condition(s) also assessed for this patient?

Type	Code	Description	Last Reported	Assessment Code
HCC Group	15	HCC Group: Asthma and Chronic Obstructive Pulmonar		<input type="text" value="The Clinician assessed and documented this ..."/> × <input type="text" value="J41.0 - Simple chronic bronchitis"/> ×

 Drag one or more files here to attach the Medical Documents.  
Supported types are PDF, JPEG, or TIFF files with a maximum size of 10 MB each.  
Alternatively Click Here to open File Browser.

**Attached Files**

File Name	Action
Medical Record.jpg	

**Quick Tips:**

- If uploading multiple files for the same date of service and/or patient, do not click **Submit** until all the applicable files have been uploaded
- Files can be up to 10MB
- Accept files formatted in TIFF (.tif), JPEG (.jpg) or PDF (.pdf)

**Have questions or need additional education?** Email the Provider eBusiness Consultants at [PECS@bcbsmt.com](mailto:PECS@bcbsmt.com)  
Be sure to include your name, direct contact information & Tax ID or billing NPI.

At this time, electronic medical record request and submission process through CERA are only available for quality and risk adjustment submissions, and are not available for medical record requests resulting from utilization review activities or the claims adjudication process. We anticipate offering additional capabilities throughout 2018.

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