Navigating the Birth to Three Fiscal Portal: Workable Claims-Medicaid

This report shows claim rejections and claim denials. Denied claims deemed workable are claims that providers can correct and resend. It is critical to work denied claims daily due to timely filing is a factor and making sure claim data is accurate. Any claim record the provider cannot not manually correct, the provider should contact PCG support for additional assistance. Best practice is to check these claims daily.

8 Steps View most recent version

Created by	Creation Date	Last Updated
Shelbi Neely	Apr 02, 2025	Apr 02, 2025

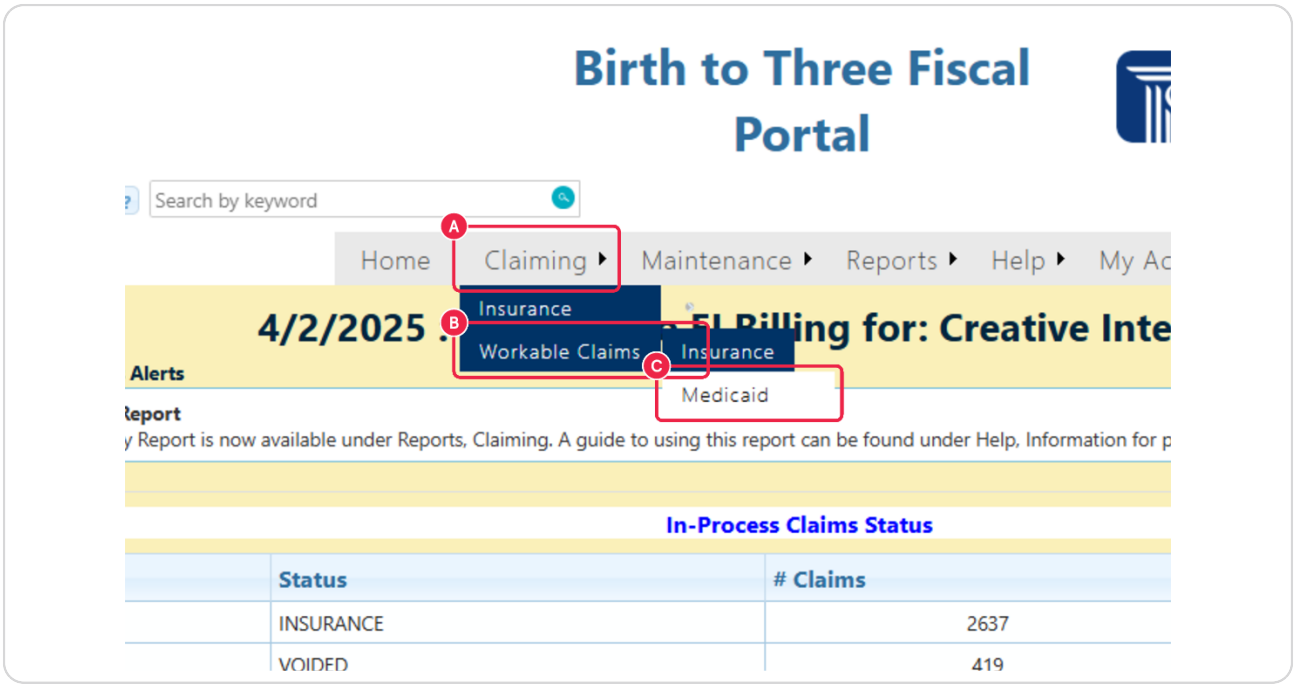
STEP 1

Click on Birth to Three Fiscal Portal

Log into the Portal

STEP 2

A. Select Claiming tab
B. Select Workable Claims button
C. Select Medicaid button



STEP 3

A. Select Category 1 – Problems Detected by Central Billing Office tab to see claims

B. Select Category 3 – 835 Errors tab to see claims

STEP 4

Claims Information

If you have claims needing attention, you will see Child name, Medicaid/Policy Number, Adjustment Reason Code, Remark Code, Service Date, Procedure Code, and ICD Code.

STEP 5

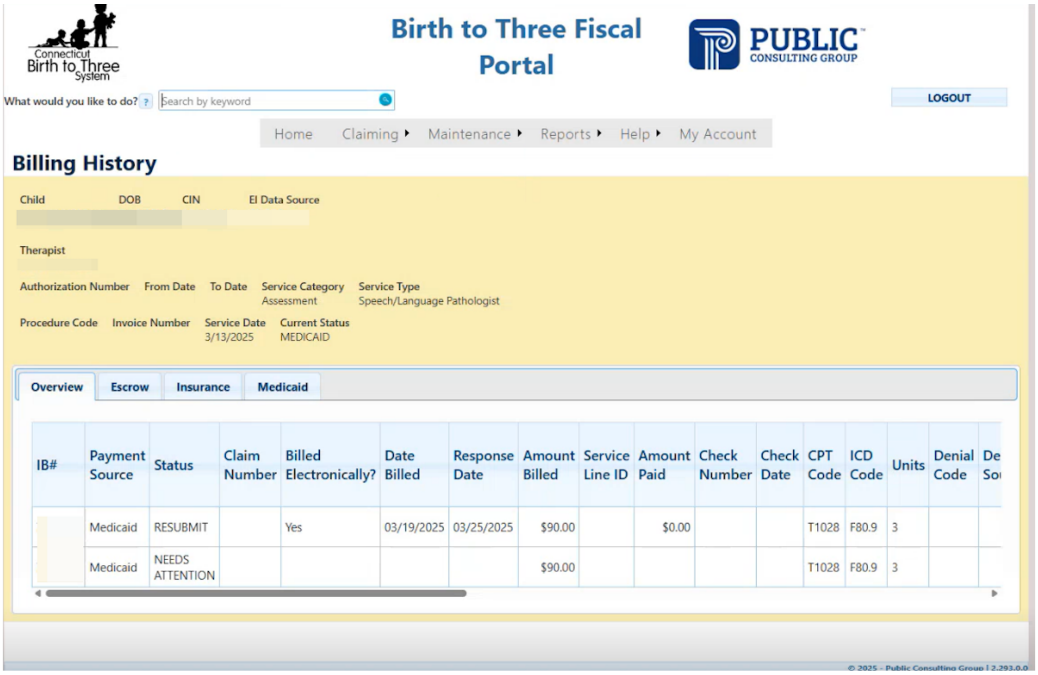
Billing History

The provider can look at the billing history be selecting the Child's Name that will open their record or selecting Billing History for that specific date of service and Procedure code.

STEP 6

Open Billing History

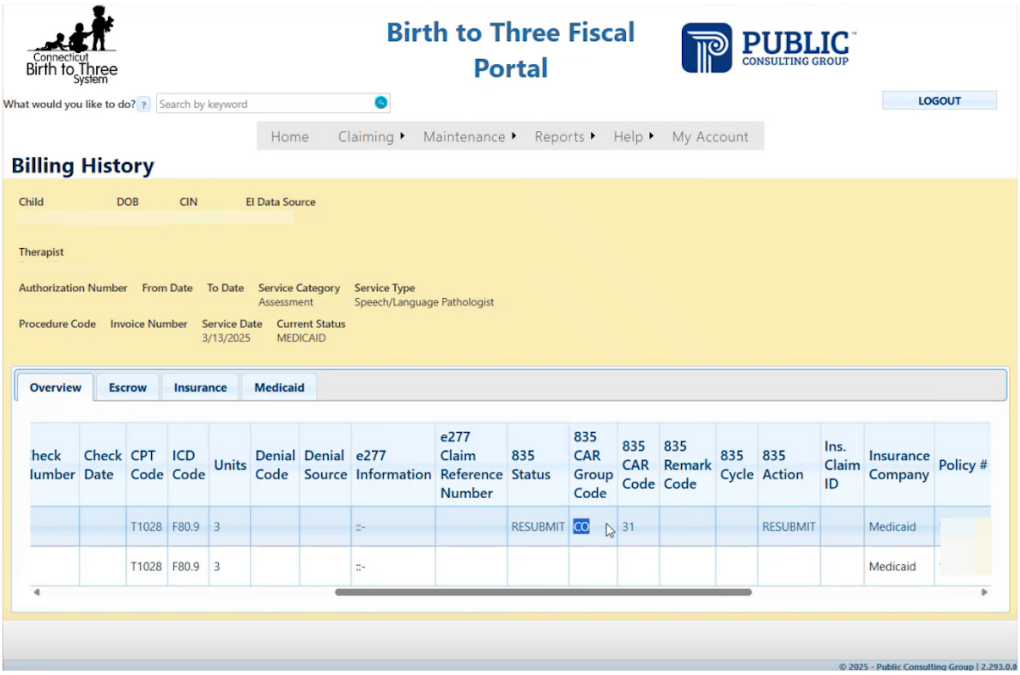
When the provider opens the billing history they will see information regarding that service date and code. In this example, you see the claim has been submitted.



STEP 7

Billing History

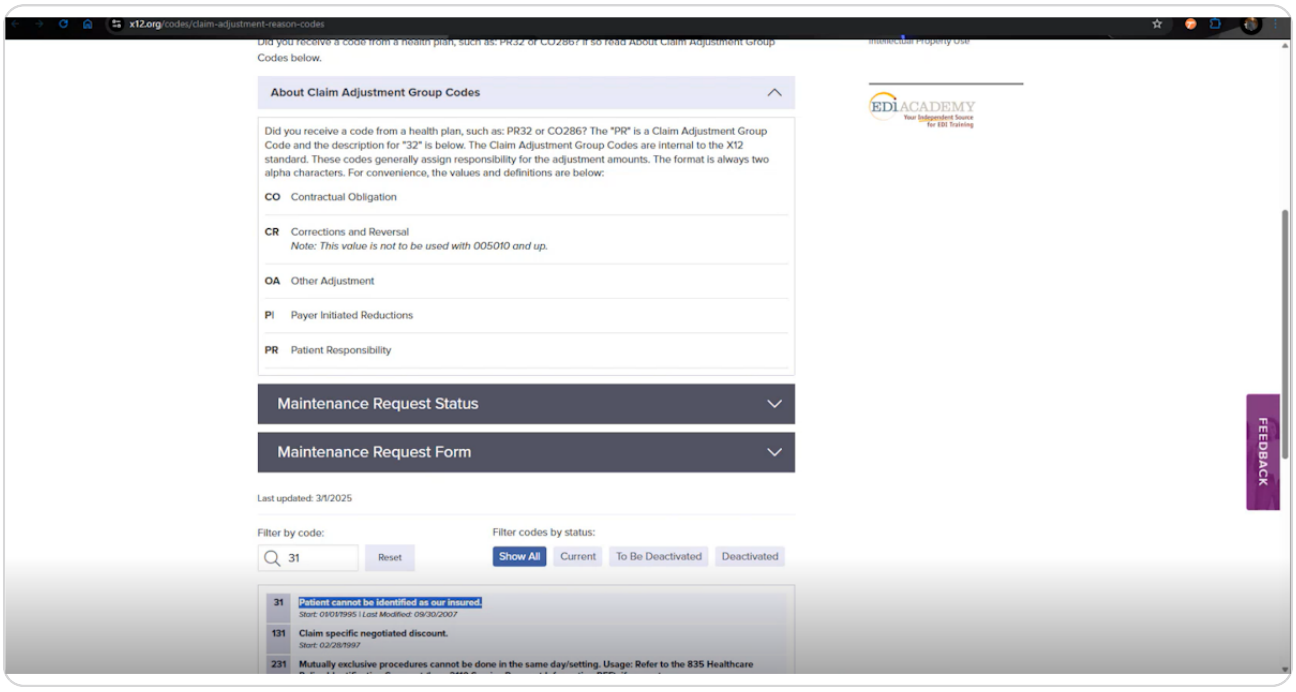
The provider see in this example that the claim was denied for CO 31 with the action to resubmit the claim.



STEP 8

Why was the Claim Denied?

The provider can look up why that claim was denied by going to x12.org and looking under Claim Adjustment Group Codes. It is then up to the provider to correct the issue and resubmit the claim.

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