



Lytec – 2kleanClaims Setup & Usage Guide

This guide is designed to help with the setup and daily use of 2kleanClaims with Lytec. The first portion of the guide will go over what needs to be entered in Lytec and how it should be entered. Use this guide not only for initial setup but also to check that data which has already been entered was entered correctly. The second portion of this guide will go over daily usage.

Please note the screen shots in this guide may show data that has already been entered, but are only for reference, do not enter what you see word for word.

Page 02-02: Setup – Practice

Page 03-05: Setup – Provider

Page 06-09: Setup – Insurance Companies

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Page 13-13: Usage – Overview

Page 13-16: Usage – Stage 1: Lytec

Page 16-22: Usage – Stage 2: 2kleanClaims

Setup – Practice

Start off by going to **Settings** then **Practice**. Check that all Name and Address fields are entered without extra spaces, and when possible without special characters. For instance in place of a # try using Suite or Box. Also remove dashes from the Tax ID. Finally ensure that the correct entity type is selected, in most cases this will be Non-Person, unless if it is a solo provider practice.

The screenshot shows a 'Practice Information' dialog box with two tabs: 'Practice Settings' and 'Billing Service Settings'. The 'Practice Settings' tab is active. The fields and their values are as follows:

- Practice Name: ANSI PROJECT PRACTICE
- Address 1: ADDRESS LINE ONE
- Address 2: ADDRESS LINE TWO
- City: PRACTICE CITY
- State: CA
- ZIP Code: 90277
- Telephone: (310) 555-1234
- Fax: (310) 555-5678
- Tax ID: PRACTICETAXID
- Bank Account: (empty)
- Sales Tax Rate: 8.025 %
- New Rate Effective Date: 01/01/2007
- Old Tax Rate: 8.025 %
- Practice Type: Solo Practice
- Entity Type: Person Non-Person
- Practice Category: Medical

Red arrows point to the following fields: Practice Name, Address 1, Address 2, City, State, ZIP Code, Tax ID, and Entity Type.

*No special symbols or characters such as: # - : * ~

*No extra spaces before or after words or numbers

Setup – Provider

The next area to check is the providers setup. Go to **Lists** then **Providers**, then the **Name and Address** tab. Again, ensure that there are no extra spaces before or after the first or last name. Also remove the middle initial if one has been entered. If one of the name fields contains more than one word, such as De La Gandara or Smith-Jones, the extra spaces or hyphenation must be removed. The former would be entered “DeLaGandara” or “Gandara” and the later “SmithJones” or pick one of the two names.

The screenshot shows a software window titled "Providers" with a search bar containing "PROV1". Below the search bar are tabs for "Name and Address", "License", "Other IDs", "Insurance IDs", "Contacts", and "Defaults". The "Name and Address" tab is active, displaying several input fields: "Full Title" (PROVIDER FULL TITLE), "Last Name" (PROVLASTNAME), "First Name" (PROVFIRSTNAME), "Middle" (empty), "Address 1" (PROVADDRESSONE), "Address 2" (PROVADDRESSTWO), "City" (PROVIDER CITY), "State" (CA), "ZIP Code" (90277), "Telephone" ((310) 555-1234), "Ext." (empty), and "Fax" ((310) 555-5678). Two red arrows point to the "Last Name" and "Middle" fields. On the right side, there are buttons for "New", "Save", "Delete", and "Close", along with an "Inactive" checkbox.

*No extra spaces before or after words or numbers

Setup – Provider (Continued)

Next go to the **License** tab. Check that the Tax ID is entered, without the dash. Check that there are no extra spaces, and that Signature on File is checked.

Providers

Provider Code: PROV1

Name and Address License Other IDs Insurance IDs Contacts Defaults

Social Security #: PROVSS

Tax ID: PROVTAXID

State License: PROVSTLIC

National Provider ID: 1234554321

Group NPI: 5432112345

Specialty License: PROVSPLIC

DEA Number: PROVDEAN

UPIN: PROVUPIN

Signature on File

New

Save

Delete

Close

Inactive

Setup – Provider (Continued)

Next go to the **Insurance IDs** tab. If you have more than one provider, please ensure that Provider Insurance IDs are always entered in the same order. In the example the Provider's BCBS Individual ID is entered on line 3. So every provider should have their corresponding BCBS ID entered on that line in their file. If another provider does not have a BCBS ID that line should be blank in their file.

For every Insurance carrier for whom claims will be sent using 2kleanClaims there should be an Individual ID entered on this tab. If the provider does not have specific ID for a particular carrier some ID should still be entered, whether it be a UPIN, State License, or another accepted Insurance Identifier. For Group Practice Insurance ID's see the Insurance setup later in this guide.

Provider Code: PROV1

Name and Address | License | Other IDs | **Insurance IDs** | Contacts | Defaults

Custom Insurance IDs:

	ID	Description	
1	LYTECMCRID	MEDICARE	1C - Medicare Provider f
2	LYTECMCDID	MEDICAID	1D - Medicaid Provider f
3	LYTECBCBSID	BCBS	1B - Blue Shield Provide
4	LYTECCOMID	COMMERCIAL	G2 - Provider Commerci
5			
6			
7			

Eligibility Enrollment IDs:

	Eligibility Payer	Enrollment ID
1	Blue Cross - California - CA	
2	Blue Shield - Florida - FL	
3	Blue Shield - Georgia - GA	

Inactive

*Enter IDs in the same order for every provider.

Setup – Insurance Companies

Next go to **Lists**, then **Insurance Companies**. On the **Name and Address** tab check that a name has been entered, and that the name and address lines do not have extra spaces, also try to avoid symbols such as #, try to use Suite or Box in those cases. The address 2 line is not used in electronic claims. Lastly ensure the correct Type is selected.

The screenshot shows a software window titled "Insurance Companies" with a search bar containing "MCD". The "Name and Address" tab is selected, showing fields for Name, Address 1, Address 2, City, State, ZIP Code, Telephone, Fax, and Type. Red arrows point to the Name, Address 1, City, ZIP Code, and Type fields. The Type field is a dropdown menu set to "Medicaid Physician".

Field	Value
Insurance Code	MCD
Name	MEDICAID
Address 1	MEDICAID ADDRESS ONE
Address 2	MEDICAID ADDRESS TWO
City	MEDICAID CITY
State	CA
ZIP Code	47887
Telephone	(310) 555-4226
Ext.	
Fax	(310) 555-7899
Type	Medicaid Physician

Setup – Insurance Companies (Continued)

Next check the **Identification** tab. First of all check that the Provider ID field is “pointing” to the correct Identifier for all Providers in regards to the Insurance company in question. As we can see in this example, for Medicaid the number 2 line (in the provider file) is being used. As we can see on page 5, line 2 is for Medicaid.

The next field on this tab to check is the **PayerID** field. This should be populated with a 5 digit numeric or alpha-numeric code. For direct to payer claim submission you may or may not have a PayerID to enter, if not enter 99999. For commercial claims through Availity the PayerID can be found at:

<http://www.availity.com>

Scroll to the bottom and click the [Availity EDI Guidelines](#) link, then click on the [Availity EDI Clearinghouse Health Plans List](#) link. This opens a PDF file, you can save this as PDF as well. On this list to the left of the Insurance Companies you will see a 5-digit numeric or alpha-numeric code. This is what should be entered in the **PayerID** field.

If a particular insurance company is not on this list then we should not be sending it through Availity, but instead should look at direct submission options. The same goes for any insurance company that is on the list but that requires enrollment. Availity may charge for those types of claims. Contact Availity for more information at (800)282-4548.

The last field on this to check is the Processing Type, this should be populated with: **C** for Medicare, **D** for Medicaid, **G** for BCBS, **H** for Champus, and left blank for commercial.

The screenshot shows a software window titled "Insurance Companies" with a search bar containing "MCD". Below the search bar are tabs for "Name and Address", "Identification", "Claims", "EDI/Eligibility", and "Categories". The "Identification" tab is active, displaying several input fields: "Provider ID" (containing "2"), "Medigap ID" (empty), "Payer ID" (containing "MCDPI"), "Destination ID" (empty), "Carrier ID" (empty), "Processing Type" (containing "D"), "Group Name" (empty), and "Fee Schedule Type" (empty). Red arrows point to the Provider ID, Payer ID, and Processing Type fields. On the right side of the window, there are buttons for "New", "Save", "Delete", "Required Fields...", "Close", and an "Inactive" checkbox.

Setup – Insurance Companies (Continued)

Next go to the **Claims** tab. If you have a Group Practice ID enter it here, otherwise select **Nongroup practice**. Also check the **Accept assignment** checkbox.

The screenshot shows the 'Insurance Companies' application window with the 'Claims' tab selected. The 'Insurance Code' field contains 'MCD'. The 'Claims' tab is active, and the 'Submit claims to this insurance company as a' section is highlighted with a red box. This section contains two radio button options: 'Group practice with this practice ID: MCDGRPID' (selected) and 'Nongroup practice'. Red arrows point to the 'MCDGRPID' text box and the 'Nongroup practice' radio button. Below this, the 'EDl Special Processing Agreement' checkbox is unchecked, and the 'Accept assignment' checkbox is checked. A red arrow points to the 'Accept assignment' checkbox. On the right side of the window, there are buttons for 'New', 'Save', 'Delete', 'Required Fields...', and 'Close', along with an 'Inactive' checkbox.

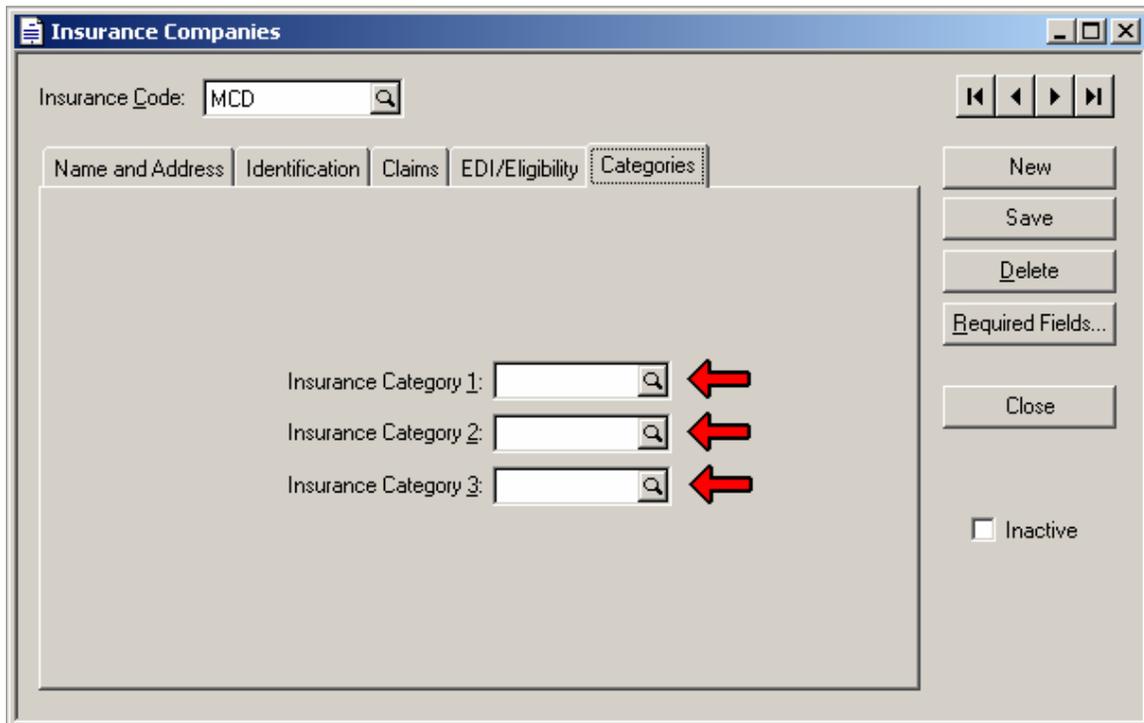
Setup – Insurance Companies (Continued)

The last tab to check under the Insurance companies setup is the **Categories** tab. This step is optional but can make batching and processing claims much easier if multiple insurances are being sent, for instance to Availity.

By setting up a category we batch multiple insurances at the same time rather than printing claims for one insurance then the next.

If a category is not already setup, click on the magnifying glass (on any of the available category fields, 1, 2, or 3 can be used), then click **Add**, then give the category a code, such as **AVAIL** (for Availity) and a description, such as “**Availity Electronic Claims**”.

If for instance you have multiple Medicare codes you can also group those by making a “**MCR**” or “**Medicare**” category, and giving it a description such as “**Medicare Electronic Claims**”.



The screenshot shows a software window titled "Insurance Companies" with a search bar containing "MCD". Below the search bar are five tabs: "Name and Address", "Identification", "Claims", "EDI/Eligibility", and "Categories". The "Categories" tab is selected. On the right side, there are buttons for "New", "Save", "Delete", "Required Fields...", and "Close". At the bottom right, there is an "Inactive" checkbox. In the main area, there are three input fields labeled "Insurance Category 1:", "Insurance Category 2:", and "Insurance Category 3:". Each field has a magnifying glass icon to its right, and a red arrow points to each magnifying glass icon.

This concludes the Lytec Setup portion of this guide. The next section goes over setup of 2kleanClaims.

Setup – 2kleanClaims: Account

When you log into www.2kleanClaims.com for the first time it will ask if you have SubmitterID's already. If you do not have SubmitterID's then click **No** and you will be directed to a page with more information regarding acquiring SubmitterID's. If you do have Submitter ID's then click **Yes**. You will then be directed to the first setup tab, the Account tab.

As always ensure that there are no extra spaces before or after any of the data entered on this tab. Also remove any dashes from identifying numbers such as the Tax ID.

Address Line 2 is optional and information entered there will not be included in electronic claims.

The **NPI Number** on this tab for the Group Practice NPI. If you do not have a Group NPI, but instead only have an Individual Provider NPI enter it here as well.

When you are finished filling out this tab, click **Save**, the page will refresh, scroll down and click on **Next**, this will take you to the next tab, the Provider tab.

ACCOUNT	PROVIDER	CARRIER	PROCESS CLAIMS	SCRUBBER	LOG OUT
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2Klean Claims Account Maintenance

(* = Required Field)

* Practice Name:

* Address Line 1:

Address Line 2:

* City:

* State:

* Zip:

* Tax ID:

NPI Number

* Contact First Name:

* Contact Last Name:

* Area Code:

* Phone Number:

Extension:

* Contact Email:

Setup – 2kleanClaims: Provider

After completing the **Account** tab setup, you should now be at the **Provider** tab.

Enter provider demographics, and remember to remove extra spaces before and after name fields, and do not enter dashes in numbers such as the Tax ID.

The **NPI Number** field on this tab should be the Provider’s Individual NPI.

Assign a specialty, this determines the Taxonomy Code that may be transmitted electronically depending on whether or not the carrier requires it.

You will not see “EDI Receivers, Provider#, or Group#” fields until the provider is saved... After setting up Carriers you can come back to these fields if you would like 2kleanClaims to pull Insurance ID’s from this tab rather than from Lytec. If you do choose to use these fields place a check in the box “**Use Group and Provider numbers given above for ANSI conversion**”.

When you are finished filling out this tab, click **Save**, the page will refresh, scroll down and click on **Next** (*unless you have additional providers to enter, in which case you should click on the **Add New** button and continue adding providers*), this will take you to the next tab, the **Carrier** tab.

Setup – 2kleanClaims: Carrier

This is the final tab related to 2kleanClaims setup is the **Carrier** tab. You can always return to this tab, and the provider tab if you acquire a new provider (Billing under the same Tax ID), or want to start electronic claims submission to a new payer.

Select an Insurance Carrier from the list and enter the Submitter ID provided by that payer in both the “**Submitter ISA ID**” and “**Submitter GS ID**” fields. You may also enter the corresponding “**Submitter Password**” if you wish, but it is not required except for claim submission to THIN. (If you are currently submitting to THIN, contact 2k Medical support about migrating to Availity).

Do not worry about the “**NM109 Loop 1000A**” field, unless your payer requires something other than your Submitter ID in that Loop / Segment.

Once you’ve entered all Carriers you have Submitter ID’s for the setup will be complete. You are now ready to start processing claims to be sent electronically.

ACCOUNT	PROVIDER	CARRIER	PROCESS CLAIMS	SCRUBBER	LOG OUT
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2Klean Claims

Add New Carriers/Receivers

** = (Required Field)*

* Carriers/Receivers: 

* Submitter ISA ID:

* Submitter GS ID:

Submitter Password:

NM109 Loop 1000A:

Note: Submitter password is only required by THIN

[Click here](#) for help obtaining Electronic Submitter ID's.

If you do not find your Carrier/Receiver listed please [click here](#) and fill out the form.

Usage – Overview

The basic order of operations for electronic claims using 2kleanClaims goes as follows:

Stage 1, generate and batch claims in Lytec.

Stage 2, convert the output from Lytec on the 2kleanClaims website to the ANSI X12 format, which what the payers accept.

Stage 3, upload the converted claim file to the payer.

Usage – Stage 1: Lytec

Start off in Lytec by printing the desired claims using the 2kleanClaims.lci form. We have 3 options here, all under the **Billing** menu.

Charges and Payments	Ctrl+B
Apply Insurance Payment	Ctrl+Y
Apply Patient Payment	Ctrl+D
Generate Finance Charges...	
Small Balance Write-off...	
Managed Care Payments	
<hr/>	
Patient Ledger	Ctrl+R
Insurance Ledger	Ctrl+T
<hr/>	
Print Insurance Claims...	Ctrl+M
Reprint Insurance Claims...	
Print Insurance Narratives...	
Print Insurance Tracers...	
Print Insurance Labels...	
Print Statements...	Ctrl+W
Print Billing Cycle Statements...	
Reprint Statements...	
Collection Letters...	
Open Print Jobs...	
<hr/>	
Claims Management	▶
Electronic Remittance Advice...	
Electronic Claims...	
Statement Processing	▶

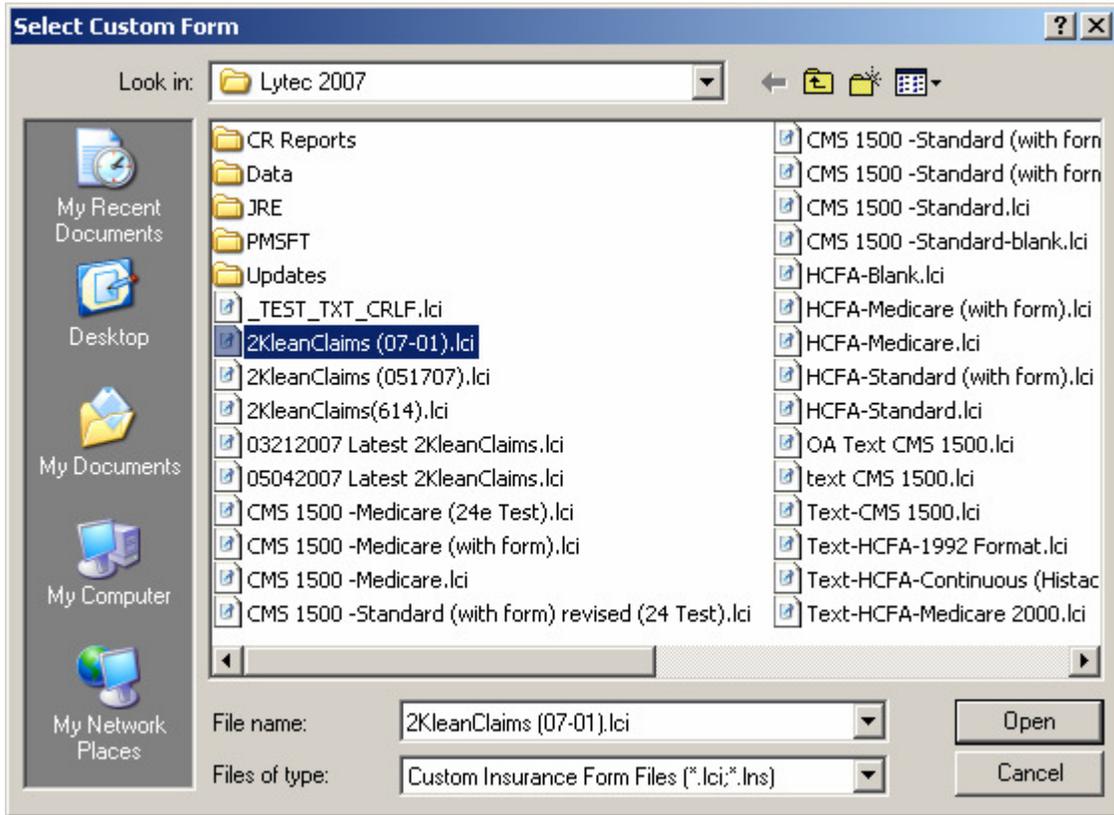
Print Insurance Claims – to batch any claims that have not yet been printed but are ready to go.

Reprint Insurance Claims – to batch any claims that have already been printed on a specific day.

Print Insurance Tracers – to batch any claims that have already been printed but not paid on yet.

Usage – Stage 1: Lytec (Continued)

The following screen will appear asking which form we want to use. Select your 2kleanClaims form. By default it will be called **2kleanClaims.lci**, but this may have been changed for practice specific needs.



Usage – Stage 1: Lytec (Continued)

After selecting the appropriate form and clicking **Open** the following screen will appear. Here is where we can set filters to specify what exactly it is we want to batch. On the options tab ensure that **Print Claims Type** is set to **Primary**, and **Diagnoses Per Page** is set to the default of **4**.

Next go to the **Include** tab. There are numerous ways to get the claims we want included in a batch. The most common would be by selecting the **Insurance Companies**, or the **Insurance Category**.

For instance if you are trying to batch Medicare claims, then the Medicare Insurance Code should be set in both the from and to range fields. If you have more than one Medicare Code setup in Lytec it may be beneficial to use Categories (see page 9 of this guide).

We can also use the **Exclude** tab, if there are specific cases which we do not want to include. Using the Exclude tab we can prevent specific Billing numbers, patients, doctors, etc from a batch.

Once all the appropriate includes and excludes have been set click “**Print**”.

The screenshot shows the 'Print Insurance Claims' dialog box with the 'Include' tab selected. The dialog contains the following fields and controls:

- Buttons: Print, Preview, Cancel, Options (dropdown)
- Fields with search icons (magnifying glass):
 - Insurance Companies: [] - [] (Red arrow)
 - Insurance Category 1: [] - [] (Red arrow)
 - Insurance Category 2: [] - []
 - Insurance Category 3: [] - []
 - Locations: [] - []
 - Patients: [] - []
 - Billing Numbers: [] - [] (Red arrow)
 - Billing Created Dates: [] - []
 - Patient Codes: [] - [] (Red arrow)
 - Patient Types: [] - []
 - Providers: [] - [] (Red arrow)

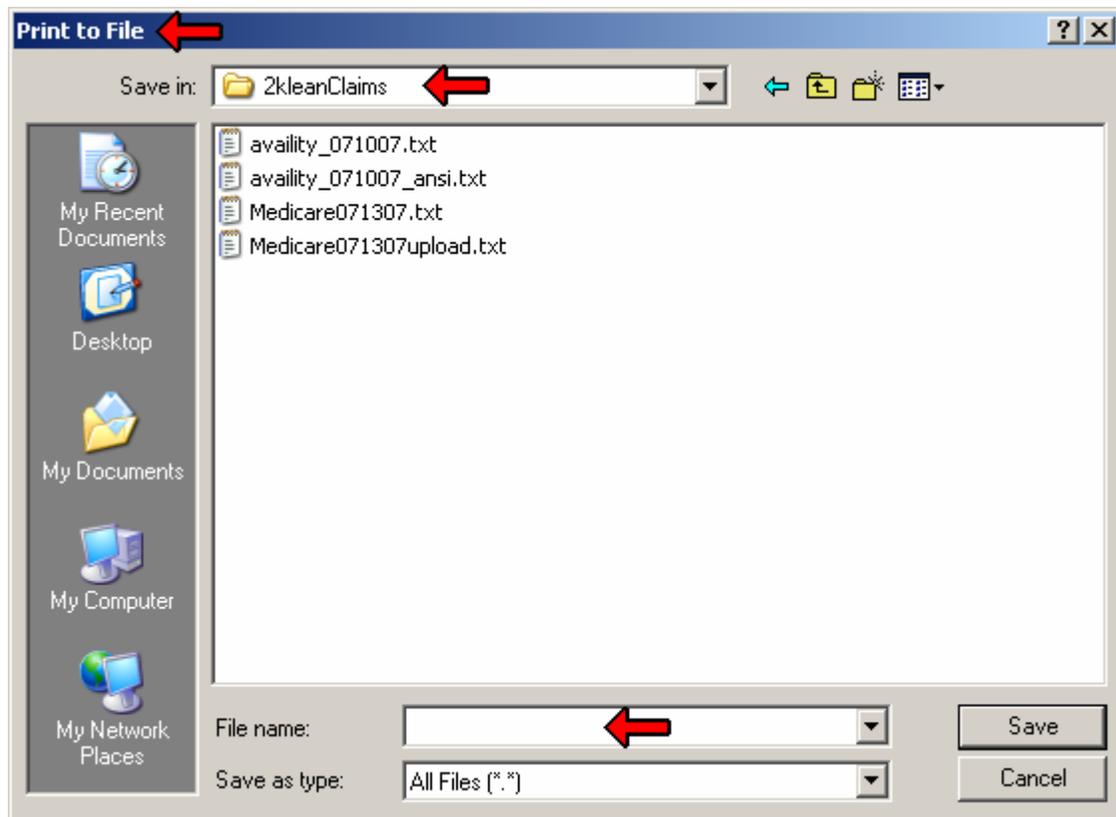
Usage – Stage 1: Lytec (Continued)

Depending on how your form is setup, after clicking **Print** the program will either automatically print to a specific file (to be processed on the 2kleanClaims site) or it will prompt for where you want to print to.

If your form is setup to prompt for file name, in the top-left hand corner it will say “**Print to File**”, the Save in should say “**2kleanClaims**” (or the name of the folder you created for storing these claim files). If it was setup by 2k Medical we typically create this folder at C:\2kleanClaims. (You should be able to browse to this by clicking on the drop-down field next to “**Save in:**” going through “**My Computer**” then the “**C**” drive.

In the file name we want to give this claim batch a name. There some examples below but use a naming convention that makes sense to you. Once you’ve named the file, click the **Save** button.

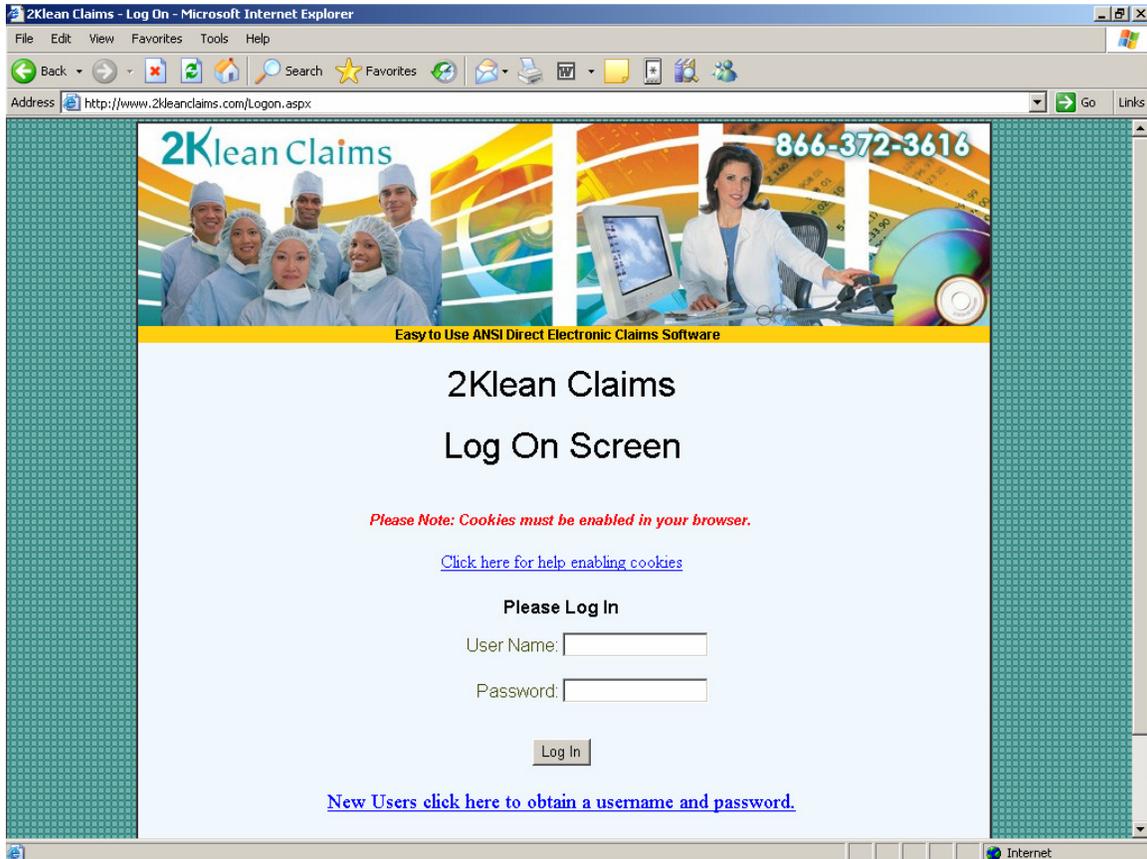
Otherwise, if your form was setup to print to a specific file, you’ll be ready to proceed to the next page of this guide, and begin the conversion to the ANSI format.



This concludes Stage one of the process. The next step is to convert the file that was just created and convert it on the 2kleanClaims website, and finally uploading to the payer.

Usage – Stage 2: 2kleanClaims

After generating a claim batch in Lytec go to <http://www.2kleanclaims.com> and log in.



Usage – Stage 2: 2kleanClaims (Continued)

Assuming the 2kleanClaims setup has been completed (refer to pages 10 through 12 for 2kleanClaims setup information), when you log into 2kleanClaims it will default to the “**Process Claims**” tab.

The first step is to click on the “Browse” button then browse to the claim file created in Lytec (See pages 13 through 16).

Once the file and path appear in the first box, ensure that the correct Receiver (Carrier / Payer) is selected.

Then click on the “**Convert HCFA 1500 to ANSI**” button.

ACCOUNT PROVIDER CARRIER **PROCESS CLAIMS** SCRUBBER LOG OUT

2Klean Claims ANSI Conversion Wizard

Step 1: Select HCFA 1500 text file to convert

Browse...

Step 2: Select Receiver

AVAILITY

Step 3: Convert HCFA 1500 to ANSI 837

Convert HCFA 1500 To ANSI

Usage – Stage 2: 2kleanClaims (Continued)

After clicking the **Convert** button, it may appear that the page refreshed, and if you scroll down the results of the conversion will be available. While converting the claims to the ANSI X12 format 2kleanClaims will run the individual claims through some checks, to attempt to catch rejections before you upload to the payer.

Just because claims pass the 2kleanClaims checks it is not guaranteed the payer won't reject. These are general checks, for instance 2kleanClaims will check that there is a Diagnosis code on the claim, it cannot tell if that code is invalid or been replaced.

Claims that passed 2kleanClaims checks will appear in green, claims that failed will appear in red.

Conversion Results

Messages:

Example07202007.txt uploaded.

3 claims processed.

2 Claims Passed			
Bill Number	Date Of Service	Chart Number	Claim Amount
1	05/24/2007	TESTPAT001	\$100.00
2	07/20/2007	TESTPAT001	\$50.00
Total Submission Amount:			\$150.00

1 Claims Rejected			
Bill Number	Date Of Service	Chart Number	Claim Amount
2	07/20/2007	TESTPAT001	\$50.00
Total Rejection Amount:			\$50.00

Step 4. Download ANSI file to transmit and review error log
[ANSI File ready to download](#) 
[Click here for a printable version of the error log](#) 

Step 5. Fix claims on the fly or get help on how to fix your errors within your billing system
[2Klean Claim's Fix on the Fly Wizard](#)

Usage – Stage 2: 2kleanClaims (Continued)

As we can see on the example, in this batch of 3 claims, 2 claims passed and 1 was rejected. We have a couple options at this point.

If we follow the “ANSI File ready to download” link at this point we will only get the claims that appear in green. Some practices will do just that, and then click the link below it and print the error log to fix those claims later.

Others prefer to first follow the “Click here for a printable version of the error log” link, correct the errors then rebatch or reprocess the claims. If this is the case, and corrections were made in Lytec, the claims will need to be reprinted and reconverted.

If all the claims passed, or you corrected errors then got all the claims to pass you can download the converted version of the claims. Either **right-click** on the “ANSI File ready to download” link and choose “Save Target As...” or left click on the link (a new page should open), then go to “File”, and then “Save As...”. Either way at this point we need to name the file...

Conversion Results

Messages:

Example07202007.txt uploaded.

3 claims processed.

2 Claims Passed			
Bill Number	Date Of Service	Chart Number	Claim Amount
1	05/24/2007	TESTPAT001	\$100.00
2	07/20/2007	TESTPAT001	\$50.00
Total Submission Amount:			\$150.00

1 Claims Rejected			
Bill Number	Date Of Service	Chart Number	Claim Amount
2	07/20/2007	TESTPAT001	\$50.00
Total Rejection Amount:			\$50.00

Step 4. Download ANSI file to transmit and review error log

[ANSI File ready to download](#) 

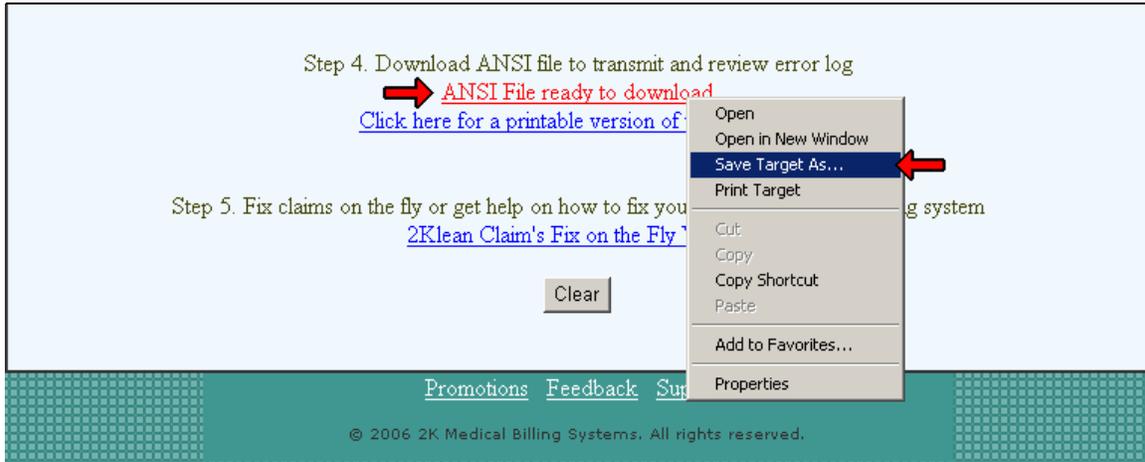
[Click here for a printable version of the error log](#) 

Step 5. Fix claims on the fly or get help on how to fix your errors within your billing system

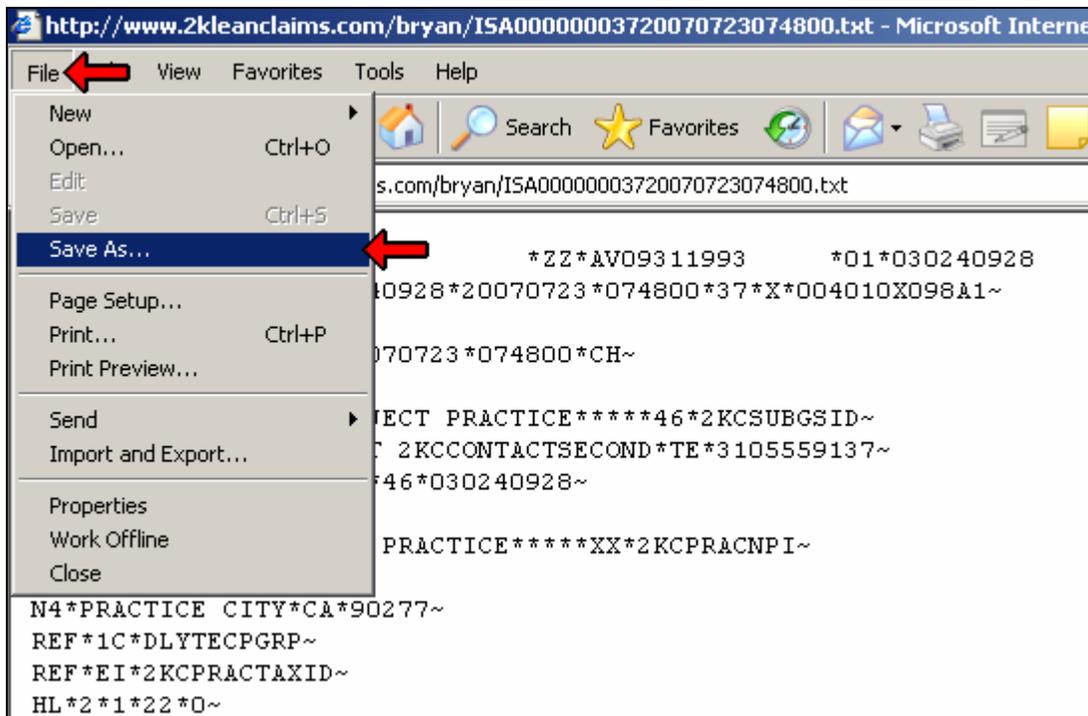
[2Klean Claim's Fix on the Fly Wizard](#)

Usage – Stage 2: 2kleanClaims (Continued)

OPTION 1: Again, once all the claims pass and appear in green, or if you only want to address the claims that did pass, **right-click** on the “ANSI File ready to download” link and choose “Save Target As...”



OPTION 2: Again, once all the claims pass and appear in green, or if you only want to address the claims that did pass, **left-click** on the “ANSI File ready to download” link, which will open a new window.



Usage – Stage 2: 2kleanClaims (Continued)

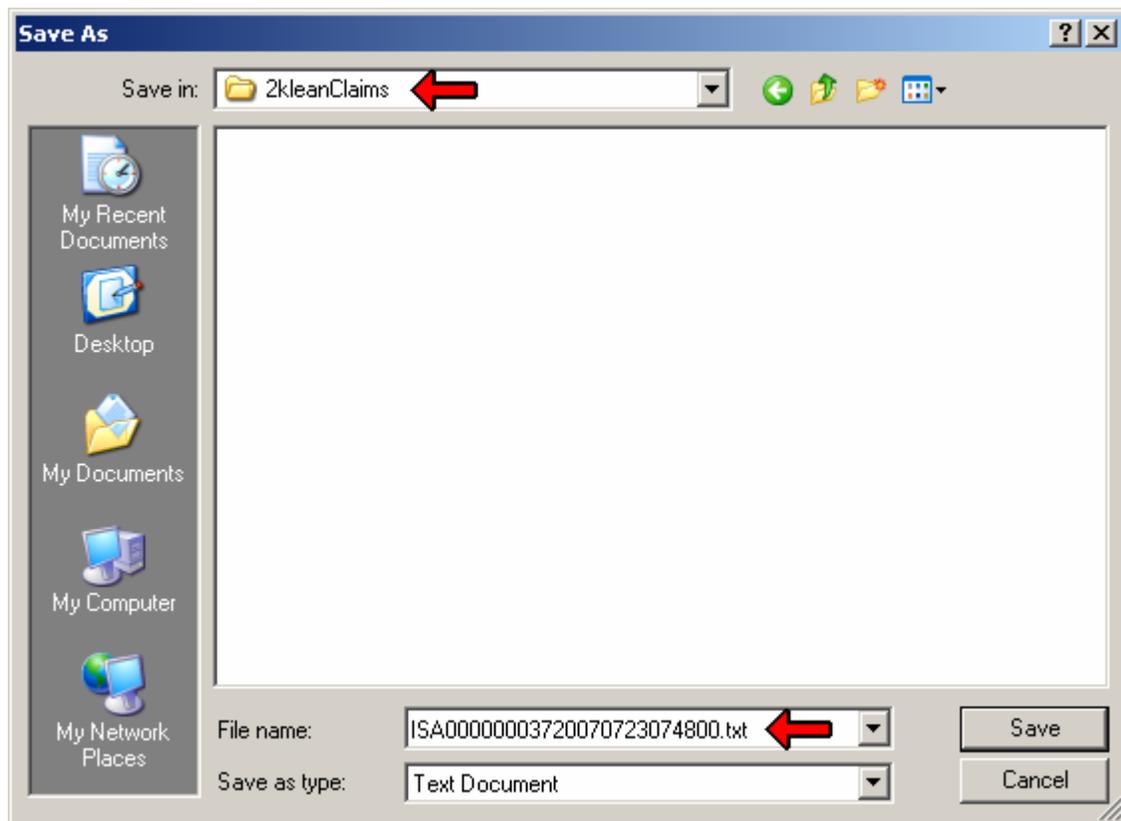
Either way, whether you save the file using option 1 or 2, make sure the file is being saved in the 2kleanClaims folder (or you claim files folder) and rename your file. By default a name such as the one seen in this example will populate the field. In most cases you will want to rename this. Some examples are:

Availity_07232007_upload.txt

Medicare072307ansi.txt

BCBSjuly23_converted.txt

As long as you use a naming convention that makes sense to you, any name.txt will work. This is the file which has been converted to ANSI, and the file that should be uploaded to the payer.



The final step is to upload the last file you created to the payer. The upload method varies from payer to payer, and for this reason cannot be addressed in this guide. However it will usually happen in one of the following ways:

(1) Web-portal based upload, (2) Dial-up through a Hyper-Terminal, (3) Secure FTP, or a program such as PC-Ace PRO-32. Contact your payer or 2k Medical for more information about the upload process.