

Apixio and Ensuring Payment Integrity

July 2024



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Apixio

Provider Portal Account Creation & Login Guide

What is the Apixio Provider Portal?

The Apixio Provider Portal is a tool utilized by Providers to upload Medical Record documentation and access Patient claim review findings from Apixio. An independent national review firm, Apixio has been engaged to perform retrospective DRG audits on paid medical claims.

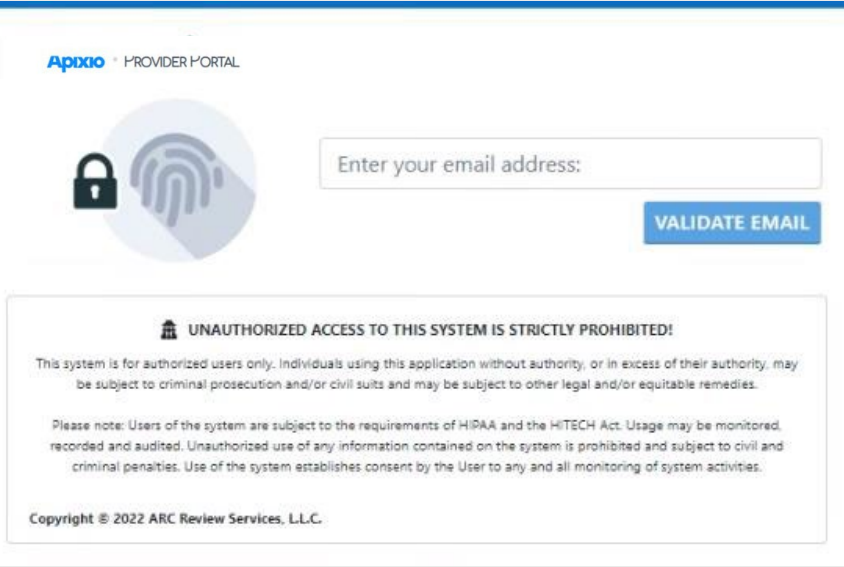
- Each facility will have a unique URL for Provider Portal access.
- Providers will only be able to view their specific claims within the Provider Portal.

Apixio is part of the Payment Integrity Initiative of the Blue Cross and Blue Shield Association to ensure accurate processing and payment of claims.



Account Creation/Login

An account will need to be created to access the Apixio Provider Portal specifically for your organization. Apixio has been engaged to perform retrospective DRG audits on paid medical claims.



The screenshot shows the Apixio Provider Portal login interface. At the top left is the Apixio logo and the text "PROVIDER PORTAL". Below this is a circular graphic containing a padlock and a fingerprint icon. To the right of this graphic is a text input field with the placeholder "Enter your email address:". Below the input field is a blue button labeled "VALIDATE EMAIL". At the bottom of the page, there is a disclaimer box with a warning icon and the text "UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!". The disclaimer text states: "This system is for authorized users only. Individuals using this application without authority, or in excess of their authority, may be subject to criminal prosecution and/or civil suits and may be subject to other legal and/or equitable remedies. Please note: Users of the system are subject to the requirements of HIPAA and the HITECH Act. Usage may be monitored, recorded and audited. Unauthorized use of any information contained on the system is prohibited and subject to civil and criminal penalties. Use of the system establishes consent by the User to any and all monitoring of system activities." At the very bottom of the disclaimer box, it says "Copyright © 2022 ARC Review Services, LLC."

Users are instructed to enter in their email address for validation.



User not found, please enter your information and request registration.

Enter your name:



user.name@apixio.com

Enter your password:



Password must be at least 16 characters long and contain 1 uppercase, 1 lowercase, 1 number, and 1 special character
(!@#\$%^&*)

Verify your password:

REQUEST ACCESS



UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!

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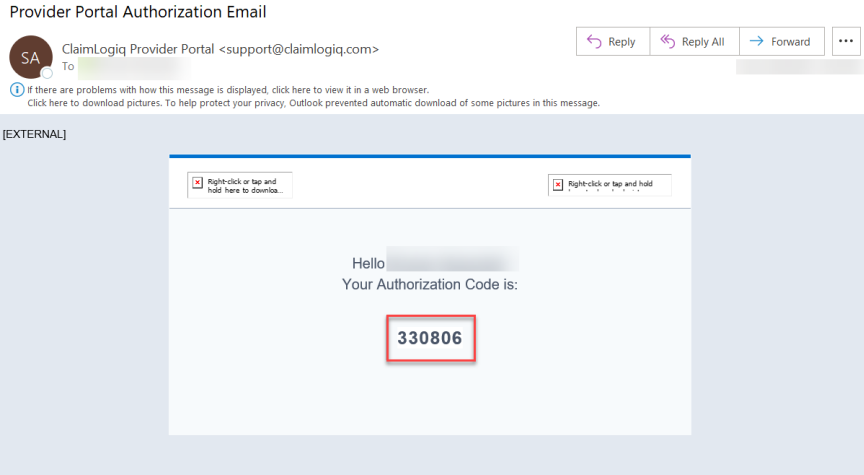
Account Creation/Login

If this is the User's first time logging in, a window will appear to enter your name and password for the account creation. User email address will automatically populate.

Passwords must be at least 16 characters long (one uppercase, one lowercase, one number, and one special character !@#\$%^&*).

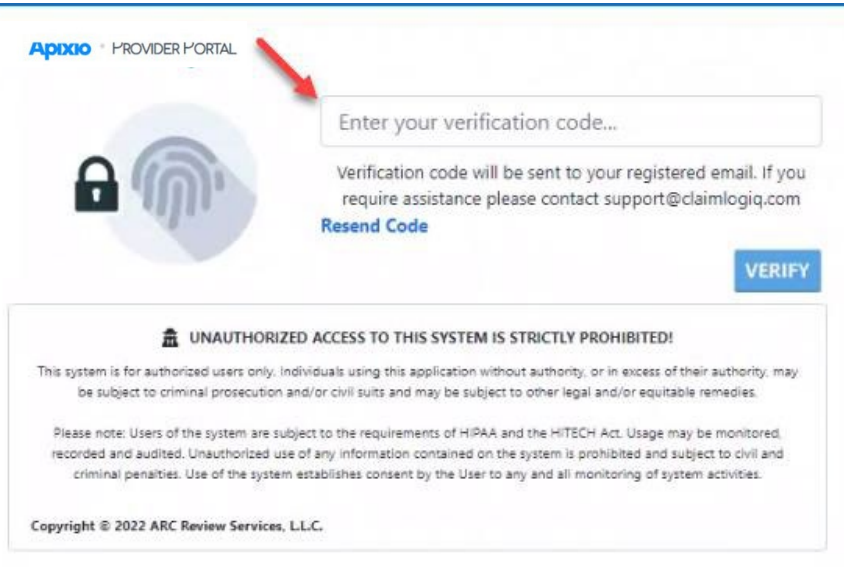
Account Creation/Login

User will receive a six-digit verification code to the provider email address provided (where the initial Medical record request letter was received).



Account Creation/Login

When the verification code is received, please enter within the Apixio Provider Portal Login page for account creation and completion.



Apixio PROVIDER PORTAL

Enter your verification code...

Verification code will be sent to your registered email. If you require assistance please contact support@claimlogiq.com

[Resend Code](#)

VERIFY

UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!

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Users can resend the verification code for any timeout issues, if needed.

Account Creation/Login

Once the user account has been verified and all account criteria has been met, users are instructed to re-enter their password. User email address will automatically populate


Apixio PROVIDER PORTAL





[Reset Password](#)

[LOGIN](#)

 **UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!**

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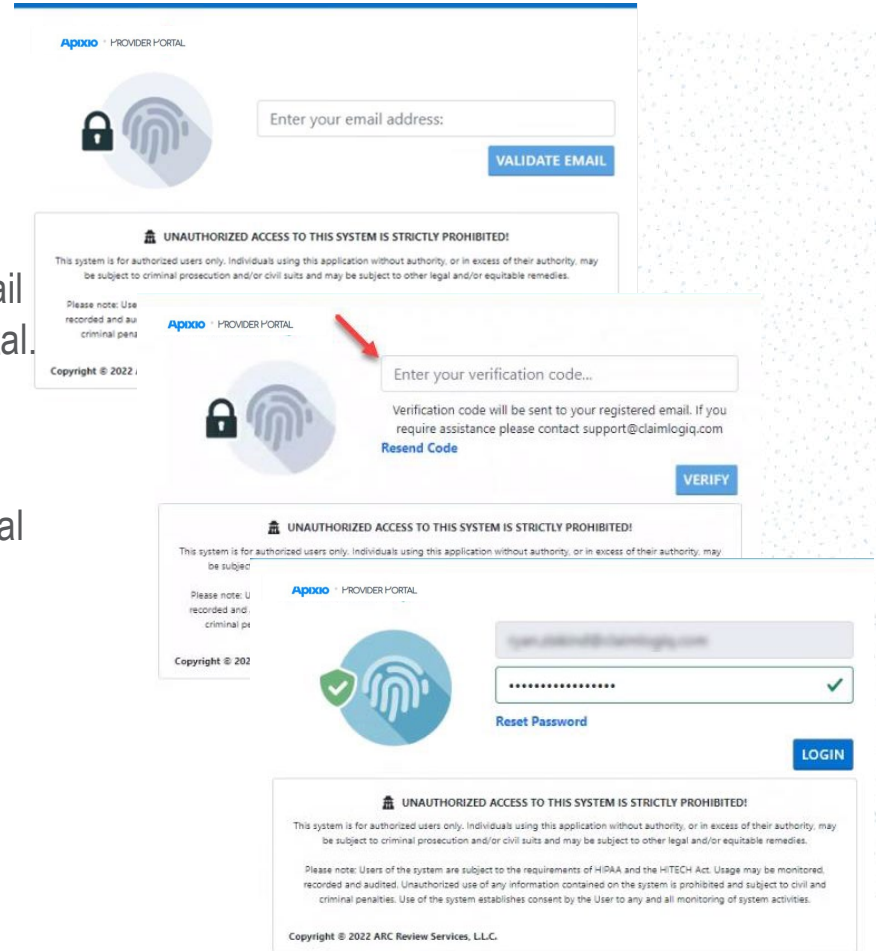
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Selecting Login will open the Apixio Provider Portal home page. Your account has been successfully created.

Subsequent Logins

- Users who have already completed account creations and have previously logged into the Apixio Provider Portal will be asked for their email address upon access to the Apixio Provider Portal.
- If a user has an existing account, a verification window will appear for two-factor authentication.
- The Verification Code will be sent to the individual user's email address, not the provider email address as appeared in the account creation.
- Once verification is received and entered, users are instructed to enter their password. This will open the Apixio Provider Portal home page.



The image displays three sequential screenshots of the Apixio Provider Portal login interface. The top screenshot shows the initial login screen with a 'VALIDATE EMAIL' button. The middle screenshot shows a verification code entry screen with a 'VERIFY' button. The bottom screenshot shows a password entry screen with a 'LOGIN' button. A red arrow points from the 'VALIDATE EMAIL' button in the first screenshot to the verification code entry screen in the second screenshot. The bottom screenshot also includes a 'Reset Password' link.

Apixio - PROVIDER PORTAL

Enter your email address:

VALIDATE EMAIL

UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!

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Please note: Use recorded and/or criminal penalties.

Apixio - PROVIDER PORTAL

Enter your verification code...

Verification code will be sent to your registered email. If you require assistance please contact support@claimlogiq.com

Resend Code

VERIFY

UNAUTHORIZED ACCESS TO THIS SYSTEM IS STRICTLY PROHIBITED!

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Please note: Use recorded and/or criminal penalties.

Apixio - PROVIDER PORTAL

Enter your password:

Reset Password

LOGIN

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Apixio

Navigating the Provider Portal

Provider Email Notification

You will receive weekly Records Request email when records are needed.

- The weekly notification will list the outstanding requests within the Apixio Provider Portal.
- Providers will not receive the email notification if there are no pending requests.
- A unique link to your Apixio Provider Portal will be included in the Record Request email.
- The Apixio Provider Portal will make available the Records Request letter to view and save, if desired.

Date: [REDACTED] APIXIO DOCUMENT REQUEST

To whom it may concern,

Apixio was engaged by [REDACTED] to perform a **DRG Validation**. In order to complete our review, please submit the requested documents outlined in the document request letter.

FIRST REQUEST

PROVIDER	NUMBER OF OUTSTANDING MR
----------	--------------------------

SECOND REQUEST

The following medical records have not been uploaded to the portal and are now > 30 days

PROVIDER	NUMBER OF OUTSTANDING MR
----------	--------------------------

THIRD REQUEST

The following medical records have not been uploaded to the portal and are now > 60 days

PROVIDER	NUMBER OF OUTSTANDING MR
----------	--------------------------

INFO OUTSTANDING - CORRECTION REQUEST

The following medical records have not been uploaded to the portal and are now > 90 days

PROVIDER	NUMBER OF OUTSTANDING MR
[REDACTED]	1

Please log into our [Provider Portal](#) by following the hyperlink or simply clicking on the "Provider Portal" button below to be directed to the site where you will be able to download the document request letter and submit requested documents. (If you have not previously used the portal you will be required to create and validate your user access.)

[PROVIDER PORTAL](#)

If you have any questions, please feel free to contact [Apixio](#) at **555-555-5555** between 9:00 AM and 5:00 PM (EST), Monday - Friday.

Sincerely,
Apixio



Homepage Overview

The Apixio Provider Portal homepage displays the following claim information:

- Group
- Patient Name
- Provider Name
- Date of Birth
- Patient Account/HAR #
- Medical Record #
- **Claim Status**
- **Request Status**
- **System ID**
- **Initial Request Date**
- **Claim #**
- **Service Date From**
- **Service Date To**

APOLLO PROVIDER PORTAL

Search.....

FILTER BY: Providers (3) Claim Status (3)

Group	Provider Name	Claim Status	Request Status	Initial Request Date	Claim #	Patient Name	DOB
> INFO OUTSTANDING(3)							
	XXXXXXXXXX MEDICAL CENTER	Info Outstanding	First Request	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
	XXXXXXXXXX MEDICAL CENTER	Info Outstanding	First Request	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
	XXXXXXXXXX MEDICAL CENTER	Info Outstanding	First Request	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
	XXXXXXXXXX MEDICAL CENTER	Info Outstanding	First Request	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
	XXXXXXXXXX MEDICAL CENTER	Info Outstanding	First Request	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
> CLOSED - PER CLIENT (3)							
	XXXXXXXXXX MEDICAL CENTER	Closed - Per Client	Completed	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
> CLOSED - REVIEW COMPLETE - FINDINGS ACCEPTED(2)							
	XXXXXXXXXX MEDICAL CENTER	Closed - Review Complete - Findings Accepted	Completed	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
	XXXXXXXXXX MEDICAL CENTER	Closed - Review Complete - Findings Accepted	Completed	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023
> DISPUTE RECEIVED(2)							
	XXXXXXXXXX MEDICAL CENTER	Dispute Received	Completed	12-01-2023	XXXXXXXXXX	XXXXXXXXXX PATIENT	12-01-2023

Page 10

Homepage Overview









- If users have multiple facilities, these will be found within the Provider dropdown menu at the top of the homepage.
- The homepage defaults to active statuses that may require end user's action. An end user may modify status selection via Claims Status dropdown menu.

[illegible]

- All requests are visible within the homepage. Each can be easily filtered by selecting the Claim Status dropdown menu option. Users must select the magnifying icon to process selections.
- Outstanding request requiring action will be marked with an action icon.

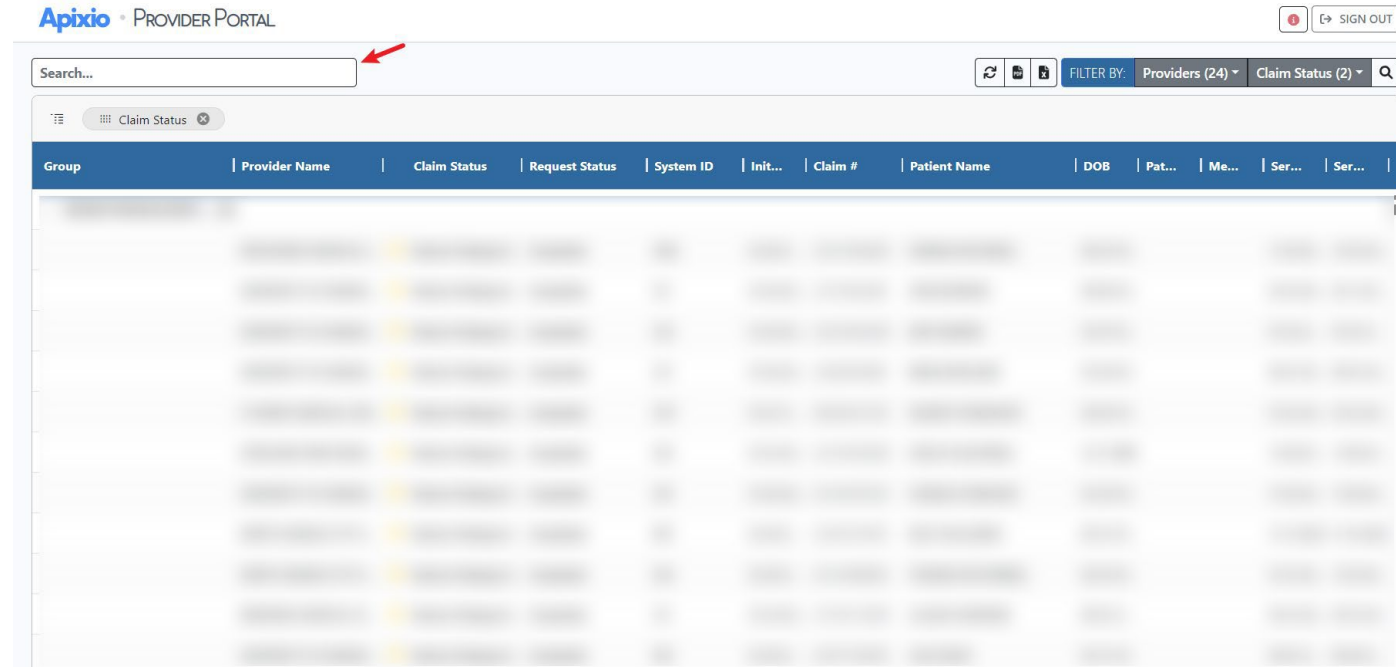
Action Icon Legend

The icons in the right column correspond to the claim status for quick identification of where a claim is in the process.

Claim Status	Action Icon
First Request	
Second Request	
Third Request	
Technical Denial Issued	
Review Complete Findings	
Dispute Review Upheld	
Correction Request	
Error	

Portal Search Feature

Users are also able to search cases within the Search box for patient name, date of birth, system ID, claim numbers, services dates, or status.



Request Letter Overview

- Users will be able to review the Record Request letters with information relating to outstanding requests within the Provider Portal.
- Documentation required to complete the request will be listed within the letter as well as in the Provider Portal.
- Please use the coversheet on the last page of the letter when submitting documentation.



Date: December 06, 2023

Document Request (First Request)

To whom it may concern,

Apixio was engaged by to perform a DRG Validation on the following claim. In order to complete our review, please submit the documents listed below:

Patient Name:	[REDACTED]	Payer:	[REDACTED]
Patient Acct #:	[REDACTED]	Payer Claim ID:	[REDACTED]
Patient DOB:	[REDACTED]	Apixio Claim ID:	[REDACTED]
Date(s) of Service:	[REDACTED]		
Facility:	[REDACTED]		

Documents Requested:

- Wrong patient submitted
- Incorrect date submitted for patient
- Discharge/narrative summary
- History and physical
- Consultant/consultation report(s)
- Operative report(s)
- procedural notes
- brief operative notes
- Physician/nursing/office notes (if patient was admitted directly from the clinic)
- Emergency department notes (if patient was admitted directly from the ER)
- Ambulance report/transfer records
- Ancillary/diagnostic reports
- e.g.
- laboratory
- radiology
- physical therapy
- respiratory
- pathology
- nursing notes
- Medication reconciliation

This document is proprietary and confidential. No part of this document may be disclosed to any other person without the prior written consent of Apixio.

Initial Request

- Initial Document Requests (first) letters are new requests available within the Provider Portal.
- Documentation is being requested for Apixio to complete the review of the claim.



Date: December 06, 2023

Document Request (First Request)

To whom it may concern,

Apixio was engaged by to perform a DRG Validation on the following claim. In order to complete our review, please submit the documents listed below:

Patient Name:

Patient Acct #:

Patient DOB:

Date(s) of Service:

Facility:

Payer:

Payer Claim ID:

Apixio Claim ID:

Documents Requested:

- Wrong patient submitted
- Incorrect date submitted for patient
- Discharge/narrative summary
- History and physical
- Consultant/consultation report(s)
- Operative report(s)
- procedural notes
- brief operative notes
- Physician/nursing/office notes (if patient was admitted directly from the clinic)
- Emergency department notes (if patient was admitted directly from the ER)
- Ambulance report/transfer records
- Ancillary/diagnostic reports
- e.g.
- laboratory
- radiology
- physical therapy
- respiratory
- pathology
- nursing notes
- Medication reconciliation

Correction Request

A Correction Request is an Initial or Follow-up Request that has been completed but is missing important documentation within the submitted records.

- Correction Requests will have at least one attachment uploaded to the claim.
- Missing documentation that is being requested will be listed within the Provider Portal on the document upload screen.
- A Correction Request letter will be available once a claim with missing/incorrect documentation has been identified.
- The cases will appear under the Claim Status “Info Outstanding” and Request Status “Correction Request.”

CLAIM # [REDACTED]

PATIENT INFORMATION

Name: [REDACTED] **Date of Birth:** 05-25-1988
Claim Status: Info Outstanding **Patient Account #:** 766
Record Status: **Correction Request** **Service Date From:** 05-25-2022
Medical Record #: N/A **Service Date To:** 05-25-2022

Required Documentation

- Discharge/narrative summary
- History and physical
- **Consultant/consultation report(s)** ▲
- **Operative report(s), procedural notes, brief operative notes** ▲
- Physician/nursing/office notes (if patient was admitted directly from the clinic)
- Emergency department notes (if patient was admitted directly from the ER)
- Ambulance report/transfer records
- Ancillary/diagnostic reports, e.g., laboratory, radiology, physical therapy, respiratory, pathology, nursing notes
- Medication reconciliation

Date Created	User	Document	Accepted/Disputed
12-06-2023	system	DocumentRequestLetter.pdf	N/A
12-06-2023	system	DocumentRequestLetter.pdf	N/A

Drop files here to upload

The max allowed file size is 2 GB.

Uploading Documentation

To upload documentation, select the specific patient. A popup window will appear.

- This will allow the user to add PDF files up to 2GB per file.
- If the comprehensive document is greater than 2GB, an end user can upload multiple documents.

To add documents, click the “Select Files” button.

- Once the file is selected, the user will be able to see the file name displayed within the Provider Portal for verification.
- Clicking “Upload” will upload and automatically send the attached files to Apixio to start the claim review process.

Please note – Required documentation is listed for each request. Please review to make sure your attachment includes all documents needed to complete the review.

CLAIM # 1234567890

PATIENT INFORMATION

Name: [Redacted] Date of Birth: [Redacted]
 Claim Status: [Redacted] Patient Account #: [Redacted]
 Record Status: [Redacted] Service Date From: [Redacted]
 Medical Record #: [Redacted] Service Date To: [Redacted]

Required Documentation

- Discharge/transfer summary
- History and physical
- Consultant/consultation reports
- Operative reports, procedural notes, brief operative notes
- Physician/nursing/office notes (if patient was admitted directly from the clinic)
- Emergency department notes (if patient was admitted directly from the ED)
- Ambulance report/transfer records
- Ancillary/diagnostic reports, e.g., laboratory, radiology, physical therapy, respiratory, pathology, nursing notes
- Medication reconciliation

Date Created	User	Document	Accepted/Disputed
12-06-2023	system	DocumentRequestLetter.pdf	N/A
12-06-2023	system	DocumentRequestLetter.pdf	N/A

Select files... Drop files here to upload

The max allowed file size is 2 GB.

CLAIM # 1234567890

PATIENT INFORMATION

Name: [Redacted] Date of Birth: [Redacted]
 Claim Status: [Redacted] Patient Account #: [Redacted]
 Record Status: [Redacted] Service Date From: [Redacted]
 Medical Record #: [Redacted] Service Date To: [Redacted]

Required Documentation

- Discharge/transfer summary
- History and physical
- Consultant/consultation reports
- Operative reports, procedural notes, brief operative notes
- Physician/nursing/office notes (if patient was admitted directly from the clinic)
- Emergency department notes (if patient was admitted directly from the ED)
- Ambulance report/transfer records
- Ancillary/diagnostic reports, e.g., laboratory, radiology, physical therapy, respiratory, pathology, nursing notes
- Medication reconciliation

Date Created	User	Document	Accepted/Disputed
12-06-2023	system	DocumentRequestLetter.pdf	N/A
12-06-2023	system	DocumentRequestLetter.pdf	N/A

Select files... Drop files here to upload

Test Doc MR.pdf 21.61 KB

Clear Upload

The max allowed file size is 2 GB.

Close

Date Created	User	Document	Accepted/Disputed
		Test Doc MR.pdf	N/A
	system	DocumentRequestLetter.pdf	N/A
	system	DocumentRequestLetter.pdf	N/A

Findings Request

- A Findings notification will be sent to the provider point of contacts via email once a claim review is complete. No letter will be provided if a review results in no Findings.
- Users will be able to review the Findings letter with information relating to the claim review within the Provider Portal.

Date: [REDACTED]
FINDINGS NOTIFICATION

To whom it may concern,

Apixio was engaged by [REDACTED] to perform a DRG Validation. The outcome of the review can be downloaded below.

Please log into our [Provider Portal](#) by following the hyperlink or simply clicking on the "Provider Portal" button below to be directed to the site where you will be able to download the findings letter. (If you have not previously used the portal you will be required to create and validate your user access.)

[PROVIDER PORTAL](#)

If you have any questions, please feel free to contact [Apixio](#) at 555-555-5555 between 9:00 AM and 5:00 PM (EST), Monday - Friday.

Sincerely,
Apixio

Apixio

Date: [REDACTED]

DRG Claim Review Findings

To whom it may concern,

Apixio was engaged by [REDACTED] to perform a DRG Validation Review. The outcome of the review recommends the following:

Patient Name: [REDACTED] Payer: [REDACTED]
Patient Acct #: [REDACTED] Payer Claim ID: [REDACTED]
Date(s) of Service: [REDACTED] Apixio Claim ID: [REDACTED]
Facility: [REDACTED]

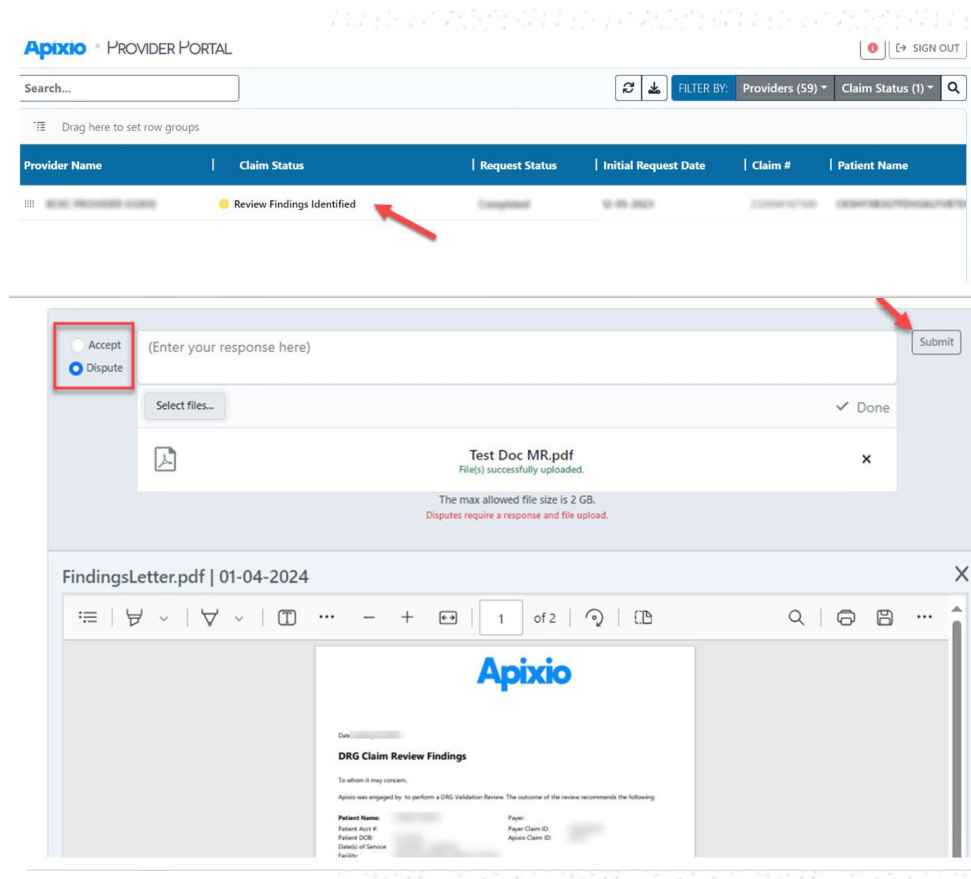
Original Billed DRG: 897 - ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC
Revised DRG: 897 - Alcohol, drug abuse or dependence w/o rehabilitation thrpy w/o MCC
Original Allowed Amount: \$6,000.00

Summary of Charges			
	Original Billed	Revised	Action
Principal Diagnosis	F10.20	F10.20	Retained
Other Diagnosis	F15.20	F15.20	Retained
	F31.4	F31.4	Retained
	F43.10	F43.12	Modified
Procedure Codes			
Discharge Status	30	30	

Rationale:
After review of this claim, it was identified that the original billed DRG 897 - ALCOHOL, DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT MCC was not supported.

Findings Request

- Users can either Accept or Dispute a claim with Findings. These will display as “Review Findings Identified” under Claim Status.
 - Accept: Provider agrees with claims review Findings. No further action is needed.
 - Dispute: Provider disagrees with the claim review Findings. Provider may request a reconsideration by submitting additional supporting documentation and provide a response for review within the document upload page.
- Users must select “Submit” for entry to be successfully sent to Apixio.
- Non-Acceptance Threshold: If there is no response to the Finding Determination notice, the claim will be considered an acceptance based on a set turnaround time.



The screenshot displays the Apixio Provider Portal interface. At the top, there's a search bar and a filter section showing 'Providers (59)' and 'Claim Status (1)'. A table lists claims, with one entry highlighted: 'Review Findings Identified' (indicated by a red arrow). Below the table, a form allows users to 'Accept' or 'Dispute' (selected) a claim. A red box highlights the 'Dispute' option. The form includes a text area for a response, a 'Select files...' button, and a 'Submit' button (indicated by a red arrow). A file upload confirmation shows 'Test Doc MR.pdf' successfully uploaded. Below this, a preview of a 'FindingsLetter.pdf' dated 01-04-2024 is shown, containing the Apixio logo and 'DRG Claim Review Findings' section.

Completed Requests

- Completed requests have all documentation uploaded and there are no further user actions at this time.
- These will appear as “Completed” under the Requesting Status column on the home page.

Apixio PROVIDER PORTAL

Search...

Drag here to set row groups

Provider Name	Claim Status	Request Status	Initial Request Date	Claim #	Patient Name	DOB	Pat Acct/HAR	Me
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Closed - Per Client	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...
...	Review In Progress	Completed	...	...	...	...	...	...

FILTER BY: Providers (59) Claim Status (3)

Apixio Provider Portal Support

- If you are experiencing issues with logging in or accessing the Provider Portal, please send an email to support@apixio.com and the support team will assist with resolution.
- For general questions, please contact BCBSKS Customer Support at csc@bcbsks.com or 1-800-432-3990.
- For general feedback or disputing the repriced value of a claim, please contact your BCBSKS Institutional Relations Representative.
- For any additional needs, please contact the Apixio help line at 1-877-245-9167.





Apixio

Frequently Asked Questions

Frequently Asked Questions

Q. How do I receive the Apixio Provider Portal verification code when I am attempting to login for the first time?

A. When you are logging in for the first time only, the initial verification code will be sent to the provider administrator email set by the facilities. All subsequent verification codes will get sent directly to the user email address.

Q. How do I grant new user on my team Apixio Provider Portal access?

A. New users can access the Apixio Provider Portal URL located within any findings or record notification received. Upon first login, the user will be asked to verify and create their account.

Q. I need to add/remove an end user. How can I get this resolved?

A. Please submit a support ticket to the Apixio Support Desk via email (support@apixio.com) for changes to the Provider Portal notification distribution list.

Q. When I log in to the Apixio Provider Portal, how do I know what I need to review and what is outstanding?

A. You will receive an email notification for medical record/documentation request or advising of a review determination (finding or reconsideration). A reference number or System ID is embedded in the email to help locate the claim within the Apixio Provider Portal. Filtering Claim Status to Info Outstanding or Review Findings Identified will also identify all claims requiring action in those statuses. Providers can also look for cases marked with the colored ! Indicating provider action needed.



Frequently Asked Questions

Q. There is a case that is not in an expected status and/or I am unable to upload records, how can I get this resolved?

A. Please submit a support ticket to the Apixio Support Desk via email (support@apixio.com) for any case-related issues within the Provider Portal or contact Apixio Support Desk at 1-877-245-9167.

Q. Who do I contact if I am experiencing Apixio Provider Portal technical issues?

A. Please submit a support ticket to the Apixio Support Desk via email (support@apixio.com) giving detail of issue and System ID.

Q. Is there a size limit when uploading documents to the Apixio Provider Portal, and is there a format preference?

A. Yes. Single uploads are maxed at 2 GBs, however multiple records can be loaded to the claim before submitting. Medical records and documentation need to be in PDF format.



bcbsks.com

Institutional Relations

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Communication and Education Coordinator

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