



How to Status a claim using the AHCCCS Online portal.

- Claim Type Professional (1500 Form)
- Claim Type Institutional (UB Form)
- Claim Type Dental (ADA Form)



Arizona Health Care Cost Containment System
Our first care is your health care

New Account

Register for an AHCCCS Online account.
To learn more about AHCCCS Online,
[Click Here](#)

Hospital Assessment

[View Hospital Assessment Invoice](#)
[Make a Hospital Assessment Payment](#)

Health Plan Links

[View Health Plan Links](#)

Thank you for visiting AHCCCS Online. In order to use the site, you must have an active account. Please login or register a new account. For questions, please contact our Customer Support Center at **(602) 417-4451**.

**** ATTENTION - SHARING ACCOUNTS IS PROHIBITED! ****

Please remember that sharing account logins is prohibited and violates the AHCCCS User Acceptance Agreement. You should NOT share your user name and password with any other individuals. Each user must have their own web account. Access to the web site can be terminated if the User Acceptance Agreement is violated.

AHCCCS Online User Manuals

Sign In

Username

Password

- 1 Click on this link to to reach the AHCCCS OnLine web portal:
<https://azweb.statemedicaid.us/Account/Login.aspx?ReturnUrl=%2f>
- 2 Enter your Username
- 3 Enter your Password and click on the "Sign In" tab



Menu

- Claim Status
- Claims Submission
- EFT Enrollment
- Member Verification
- Newborn Notification
- Prior Authorization Inquiry
- Prior Authorization Submission
- Provider Verification
- Provider Re-Enrollment/Revalidation

Support and Manuals

- AHCCCS Online User Manuals
- AHCCCS Online Learn More
- Frequently Asked Questions

Account Information

Username: Training01
User: Albert Escobedo
Type: Master
IP: 170.68.81.110
Provider ID: 231725

Main Page

▲ For security purposes, your session will be logged out after 15 minutes of inactivity. ▲

**AHCCCS Online is an AHCCCS website designed for registered providers.
It offers the convenience and efficiency of several online services.**

CLAIM STATUS

Claim Status allows providers to check the status of **Fee-For-Service** claims submitted to AHCCCS. If a recipient is enrolled in a capitated Health Plan, the Health Plan contact information, please click on [Health Plan Listing](#).

For a listing of the Health Plan contact information, please click on [Health Plan Listing](#).

CLAIM SUBMISSION

Claim Submission allows providers to submit Professional, Dental and Institutional claims to AHCCCS for nightly processing. Claims submitted prior to 4:00 PM night. Claims submitted after 4:00 PM Friday will be processed the following Monday. The status of the claims can be viewed online by searching for the claim ID. Processing time may take 24-72 hours, depending on the number of claims processed and the time of the submission.

MEMBER VERIFICATION

Eligibility and Enrollment Status allows providers to verify an AHCCCS recipient's eligibility and their enrollment in a Health Plan. Providers can also obtain Med party coverage information for a recipient.

NEWBORN NOTIFICATION

Newborn Notification allows providers to submit newborn information to AHCCCS during the hours when the COM Center is not available. Status of these submissions can be viewed on the web site within 48 business hours.

PROVIDER VERIFICATION

Provider Information allows providers to update their correspondence addresses. Providers may also view (but not update) their Service and Pay-To Addresses and Signatures.

For further information, please click on [AHCCCS Provider Registration](#).

PROVIDER RE-ENROLLMENT/REVALIDATION

Provider Re-Enrollment/Revalidation allows providers to submit their re-enrollment information electronically. Providers who were registered with AHCCCS prior to 12/31/2011 must wait to receive a re-enrollment notice. If documents are received prior to the re-enrollment notices being mailed out, the documents will be processed. Providers must wait to receive a re-enrollment notice. All data must be submitted by the indicated timeframe on the letter or the AHCCCS identification number will be terminated. Providers must wait to receive a re-enrollment notice. If documents are received prior to the re-enrollment notices being mailed out, the documents will be processed. Data may be submitted by authorized signers on file with AHCCCS. For further information, please click on [AHCCCS Provider Re-Enrollment/Revalidation](#).

PRIOR AUTHORIZATION INQUIRY

1 Select Claims Status under the Menu on the left hand side

Claim Submission

Claims submitted to AHCCCS prior to 4:00 PM, Monday through Friday, will be processed within 24 to 48 hours. Once the claim has been sent for processing, it can no longer be modified via the web. After the processing deadline, corrections will need to be submitted as a **Replacement** or **Void**. The claim will not be accepted if any required data elements are missing. The claim will also be rejected if the recipient is not eligible for coverage at the time the service is rendered. Claims will be processed under the following Identification Number (Non-Person Entity):

Payer/Receiver Electronic Transmitter Identification Number: 866004791

NOTE: You cannot view the processing status of claims submitted by other users.

Enter New Claim

Type of Claim:

View Claim Processing Status

Submission Date(s): -

- 1 Type of Claim - Choose the type of claim you want to view status on by clicking on the drop down arrow
- 2 View Claim Processing Status – If you enter data here by either entering the day of service or by entering a span and click the “go” in this area, you can view the processing status for this claim

Claim Submission Status

Claim Type	Creation Date/Time	Submission Date/Time	Patient Account #	Service Prov. NPI	Billing Prov. NPI	Date From	Date Thru	Status	Processing Date/Time	CRN Adjudication
Institutional	06/01/16 01:50 PM	06/01/16 01:50 PM	99999999			06/01/16	06/01/16	Processed	06/01/16 02:59 PM	
Institutional	12/30/16 03:12 PM	12/30/16 03:12 PM	A98155234			12/30/16	12/30/16	Processed	12/31/16 09:00 AM	
Professional	04/29/16 09:54 AM	04/29/16 09:54 AM	A95983554			04/29/16	04/29/16	Processed	04/29/16 12:00 PM	
Professional	05/26/16 09:25 AM	05/26/16 09:25 AM	A99999999			05/26/16	05/26/16	Processed	05/26/16 12:00 PM	
Professional	06/06/16 10:52 AM	06/06/16 10:52 AM	A99999999			06/01/16	06/04/16	Processed	06/06/16 12:00 PM	
Professional	06/13/16 02:15 PM	06/13/16 02:15 PM	A99999999			06/01/16	06/01/16	Processed	06/13/16 02:59 PM	
Professional	06/16/16 01:15 PM	06/16/16 01:15 PM	99999999			06/01/16	06/01/16	Processed	06/16/16 02:59 PM	
Professional	06/27/16 01:26 PM	06/27/16 01:26 PM	A99999999			06/01/16	06/01/16	Processed	06/27/16 02:59 PM	
Professional	06/29/16 01:52 PM	06/29/16 01:52 PM	A9999999	1366765190	1366765190	06/01/16	06/01/16	Processed	06/29/16 03:00 PM	
Professional	06/30/16 11:17 AM	06/30/16 11:17 AM	A9999999	1265880090	1265880090	06/20/16	06/27/16	Processed	06/30/16 12:00 PM	
Professional	07/08/16 10:33 AM	07/08/16 10:33 AM	A99999999			06/01/16	06/05/16	Processed	07/08/16 12:00 PM	
Professional	07/11/16 01:40 PM	07/11/16 01:40 PM	A999999999			06/01/16	06/01/16	Processed	07/11/16 03:00 PM	
Professional	11/16/16 10:34 AM	11/16/16 10:34 AM	A98155234			11/16/16	11/16/16	Processed	11/16/16 12:00 PM	
Professional	11/21/16 02:36 PM	11/21/16 02:36 PM	A98155234			11/21/16	11/21/16	Processed	11/21/16 03:00 PM	
Professional	11/22/16 09:59 AM	11/22/16 09:59 AM	A98155234			11/22/16	11/22/16	Processed	11/22/16 12:00 PM	
Professional	11/25/16 02:08 PM	11/25/16 02:08 PM	A98155234			11/22/16	11/22/16	Processed	11/25/16 03:00 PM	

Record Count: 16

< Previous

- 1 Entering a span of months allows you to see previous claims submitted. These are only SNAPSHOTS of the claims.
- 2 You have the option to view the Claim Processing Status by entering the day of service or enter a span

Contact Information

[Email ProviderTrainingFFS@azahcccs.gov](mailto:ProviderTrainingFFS@azahcccs.gov) for training needs and policy clarification requests.

Call Claim Customer Service 602-417-7670

Option 4 – Claims

Option 5 – Provider registration

Option 6 – Fee For Service

Call Fee-For-Service Prior Authorization Line at 602-417-4400

Thank You.

