

# LEGACY CLAIMS WITHIN TEXAS CHILDREN'S LINK

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## LEGACY CLAIMS

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Texas Children's Health Plan (TCHP) migrated completely from our old provider portal, Health Trio, to our new provider portal, Texas Children's Link on January 1<sup>st</sup>, 2023. In addition, TCHP created a legacy claim look up tool so users still have the ability to review claims submitted prior to August 1<sup>st</sup>, 2023.

This document will go over how to look up legacy claims within Texas Children's Link and how to appeal legacy claims.

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### REVIEWING LEGACY CLAIMS

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#### How to log in:

1. Open web browser and access the following URL
  - a. [Texas Children's Link](#)
2. Enter the user ID and password provided and press **Enter**.

#### How to navigate to the Legacy Claims Look Up Tool:

1. Select "External Sites" located on the top icon bar



2. Click on "TCHP Provider Tools"
3. Select "Legacy Claims"
4. Fill out required information and the claim searched will show up with information regarding the claim.

### Legacy Claims Search

- "Billing Provider NPI" or "Tax ID" search parameter is required for the search.
- Please provide either of the following search parameters :
  - "Claim ID" and "Date of Service"
  - "Claim ID" and "Billed Amount"
  - "Date of Service" and "Billed Amount"
- "Member ID" search parameter is required.

Billing Provider NPI	<input type="text"/>
Tax ID	<input type="text"/>
Claim ID	<input type="text"/>
Date Of Service	<input type="text" value="mm/dd/yyyy"/>
Billed Amount	<input type="text"/>
Member ID	<input type="text"/>

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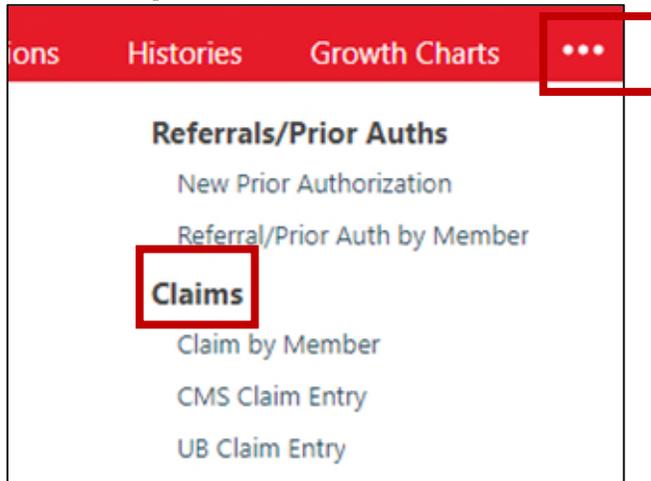
## APPEALING LEGACY CLAIMS

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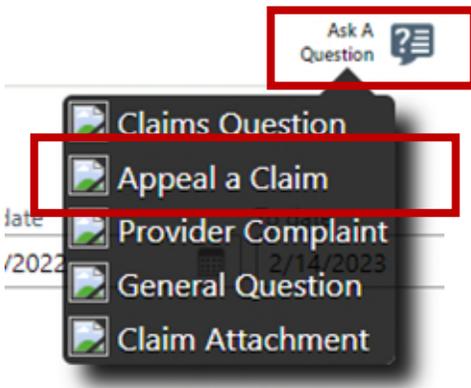
1. Select "Patient List" located on the top icon bar



2. Select the appropriate patient OR search the patient utilizing "Search all Patients"
3. Once in the patient record, click on the "..." button and select "Claims"



4. Click on the "Ask a Question" bubble at the top right of the screen and select "Appeal a Claim"



5. Fill out form and ADD legacy Claim number and appeal details to the "Details" box. (See photo on next page)
6. Click Submit and your appeal has been submitted.

## Appeal a Claim

Priority:  High  Routine  Low

Patient: Test, Hairy [2000334478]

Attachments:

Respond by:

Response Details:

### Tell us about your issue or concern

Add

### 

Please provide reason for appeal below:

Add Legacy Claim number and reason for appeal within this box.

### Additional Documents

Documents:

100.0 MB Total Allowed

0 Files

