

# PC-ACE Quick Reference Guide for Part A Providers

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## Section 1 - Getting Started Using PC-ACE

This guide is to be used to assist in setting up PC-ACE for Medicare A/B claim submission to NGS.

### Minimum System Requirements

- SVGA monitor resolution (800 x 600)
- Windows 8, Windows 7, Vista
- Adobe Acrobat Reader Version 4.0 or later (for overlaid claim printing)

**Note:** When the Windows "Large Fonts" display setting is enabled, the screen resolution must be 1024 x 768 or higher. The Institutional Claim Form and Professional Claim Form will not display properly at lower screen resolutions.

### PC-ACE Part A Full Install Instructions

Steps 1–7 only need completing if you initiate the install from the NGS website home page.

1. Open an Internet browser and go to <https://www.NGS Medicare.com>.
2. Select **Accept** when presented with the Attestation page.
3. Select your line of business and state.
4. Select Resources at the top of the home page.
5. Select **EDI Solutions , EDI Software PC-ACE, Download PC-ACE**.
6. On the **PC-ACE Download** form, complete all required fields marked with an asterisk (\*).
7. Under **Select Your Download Below**, select the radio button option for **PC-ACE Full Installation (Institutional and Professional) PC-ACE users – Version XX**
8. Select the **Submit Request** button.
  - Please note the installation password **NGSMAC1** at the top of the page.
9. Once you have noted the installation password, select the **Download** button to start the download.
10. A message will appear: **'Do you want to open or save this file?'** Select **Save**.
  - **Note:** These instructions are designed for use with Microsoft's Edge and Chrome browsers. The use of other browsers is not supported by the NGS EDI Help Desk.
11. On the left side of the **'Save In'** dialogue box, select the **Desktop** button to save the file to your desktop, then select **Save**.
  - **Note:** If you are using Windows 7 or 8, the buttons on the left may not be present. If this is the case please select **Desktop** from the **Save in:** dropdown box even when using MSIE.
  - **Note:** NGS does **not** support the installation of PC-ACE on a network. The file will begin to download to your desktop.
12. A message will appear: **'Download complete'**—close the download dialogue box and **minimize** your Internet browser in preparation for step 17.

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13. Launch the **setup.zip icon**; your unzip wizard should open.
    - **Note:** Since unzip utilities vary, you are responsible for getting this file unzipped to your desktop. Please follow the instructions for your unzip utility.
  14. Double Click **setup.exe icon** on your desktop, which will open the file.
  15. The **Wise Installation Wizard** will begin.
  16. Installation code is **NGSMAC1**.
  17. At the Welcome window, select **Next**.
  18. At the Drive Selection window, select **Next**.
  19. At the Start Installation window, select **Next**.
  20. Follow the online instructions until **Finish** is selected.
  21. To access PC-ACE, select the **PCACE icon** and enter the default user ID **SYSADMIN** and the password **SYSADMIN**.
  22. We recommend downloading additional material to assist you with PC-ACE. After the software successfully downloads, revisit the EDI Solutions webpage for available documentation.

### PC-ACE Part A Upgrade Instructions

**Please Note:** Prior to performing this upgrade it is recommended that a backup of your current version of PC-ACE is performed. If the version of PC-ACE currently installed is more than two versions behind the available version with NGS, please upgrade as soon as possible.

Steps 1–7 only need completing if you initiate your upgrade from the NGS website home page.

1. Make sure the PC-ACE program is closed prior to doing this upgrade.
2. Open an Internet browser and go to <https://www.NGSMedicare.com>.
3. Select **Accept** when presented with the Attestation page.
4. On the NGS home page, select your line of business and state.
5. Select Resources dropdown at the top of the home page.
6. Select **EDI Solutions**.
7. Select the **EDI Software Dropdown** to download the software.
8. Select Download PC-ACE.
9. On the **PC-ACE Download** form, complete all required fields marked with an asterisk (\*).
10. Under **Select Your Download Below**, select the radio button option for **PC-ACE Upgrade (Institutional and Professional) PC-ACE users Version XXXX**.
11. Select the **Submit Request** button.
12. Please note the installation password **NGSMAC1** at the top of the web page.
13. Once you have noted the installation password, select the **Download** button to start the download.
14. A message will appear: **'Do you want to open or save this file?'** Select **Save**.  
**Note:** These instructions are designed for use with Microsoft's EDGE and CHROME browser. The use of other browsers is not supported by the NGS EDI Help Desk.
15. On the left side of the **Save In** dialogue box, select the **Desktop** button to save the file to your desktop, then select **Save**.
  - o These instructions are designed for use with Microsoft's EDGE and CHROME browser. The use of other browsers is not supported by the NGS EDI Help Desk.

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- o On the left side of the **Save In** dialogue box, select the **Desktop** button to save the file to your desktop, then select **Save**.
  - o If you are using Windows 7 or 8, the buttons on the left may not be present. If this is the case please select **Desktop** from the **Save in:** dropdown box even when using MSIE.
  - o We **do not** support the installation of PC-ACE on a network.
16. A message will appear: '**Download complete**'—close the download dialogue box and minimize your Internet browser in preparation for step 17.
  17. Launch the **pcaceup.zip**; your unzip wizard should open. **Note:** Since unzip utilities vary, you are responsible for getting this file unzipped to your desktop. Please follow the instructions for your unzip utility.
  18. Double click on the **pcaceup.exe** icon on your desktop.
  19. The **Wise Installation Wizard** will begin.
  20. Installation code is **NGSMAC1** (not case sensitive) and select **OK**.
  21. A message will appear asking if a system backup has been performed.
    - a. If the answer is yes, select **Yes** to proceed with the update.
    - b. If the answer is **No**, make a backup as follows:
      - i. Select the **No** button, and then click the **OK** button in the **Update Cancellation Notice** window; the installation wizard will close.
      - ii. Launch PC-ACE and, on the main toolbar, select the **System Utilities** button. (last button on the right)
      - iii. On the **Backup/Restore** tab, select the **Backup** sub tab.
      - iv. If there is a path to your normal backup folder in the Destination Drive or Folder field, select the **Start Backup** button and proceed as you normally do for a backup, close PC- ACE and return to step 20.
      - v. If the Destination Drive or Folder field is empty, select the small button to the right of that field (had 3 dots on it), browse to the folder you wish to save your back up to and select the **Open** button, then select the **Start Backup** button.
      - vi. In the **Confirm** window, select the **OK** button; wait while the backup completes.
      - vii. After the backup completes, an **Information** window will appear stating that your backup has completed successfully; select the **OK** button.
      - viii. Close PC-ACE and return to step 20.
  22. Follow the online instructions until **Finish** is selected.
  23. The **PC-ACE Backup Reminder** dialogue box will appear advising that the update was completed successfully. It will also recommend that you make a new backup now that it has been upgraded to version X.XX (you should perform this backup **after** you have confirmed that you can open a claim and/or a patient file without receiving an error message); select **OK**.
  24. To access PC-ACE, select the **PCACE** icon and the **enter the default user ID SYSADMIN** and the password **SYSADMIN**.
  25. We recommend downloading additional material to assist you with PC-ACE. After the software successfully downloads, revisit the EDI Software web page for available documentation.
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## Logging Into PC-ACE for the First Time

1. Upon installation of the PC-ACE software, from the Desktop click on the **PC-ACE** icon to open the software (Figure 1).

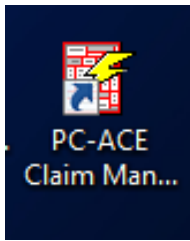


Figure 1

2. Upon selecting an ICON (for example INST) the Sign On box appears. Enter "SYSADMIN" in the **User ID** and **Password** fields and select **OK** (Figure 2).

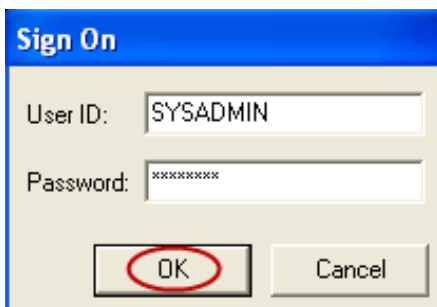


Figure 2

**Note:** NGS is unable to change, modify or reset any individual passwords once they have been setup in your PC-ACE software.

## Online Help Feature

The PC-ACE program has an online help feature that can be accessed from the **PC-ACE Claims Processing System** main menu.

1. Select **Help**, and then select **Help Topics** (Figure 3).

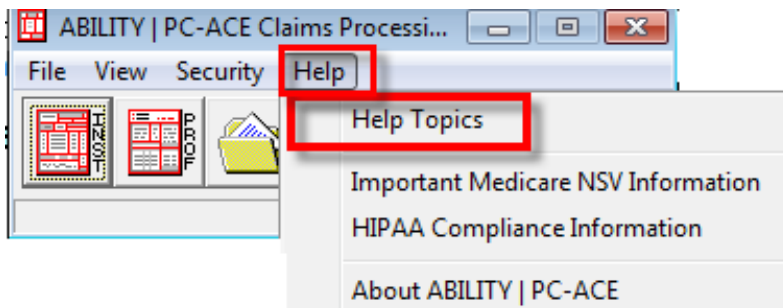


Figure 3

2. Select the **Index** tab (Figure 4).
  - a. To search for a particular subject, type a few letters of the word.
  - b. Select the index entry to be reviewed, and select **Display**. That portion of the topic will appear. Review or Print the information.

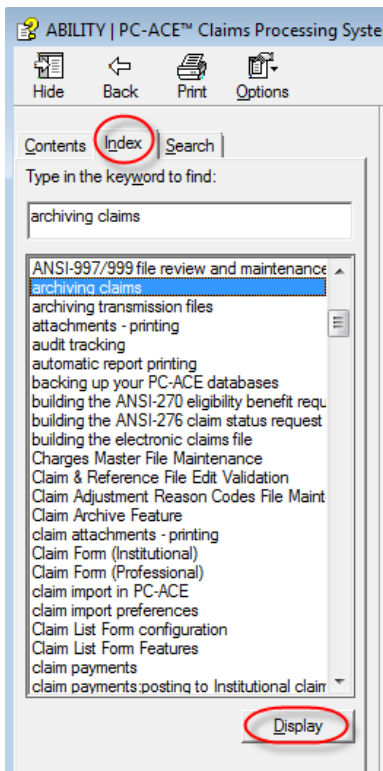


Figure 4

## Section 2 - Reference File Maintenance

**Reference File Maintenance** records must be completed in order to begin utilizing the PC-ACE Software.

1. Select the **Reference File Maintenance** folder (yellow folder) (Figure 5).

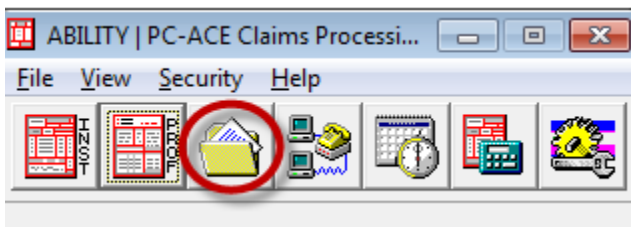


Figure 5

### Patient Setup

The **Patient** tab allows the addition and maintenance of patient information, including the patient's primary and secondary insured details.

- The setup of the Patient's information is **optional**. The patient information will not be accessible during claim entry or claim import if the patient database is not set up.
- The **complete patient list** will be accessible during **claim entry** using the variable-list lookup feature if the patient record is set up. When a patient is selected from the lookup list during claim entry, all applicable patient information will **auto populate** to the **appropriate claim form fields**.
- Once the patients are added, the Patient tab provides a convenient **Sort By** selection that quickly sorts the patient list by **Patient PCN** or **Patient Name** under the List Filter Options (Figure 6). (Use the F1 function key for more information).

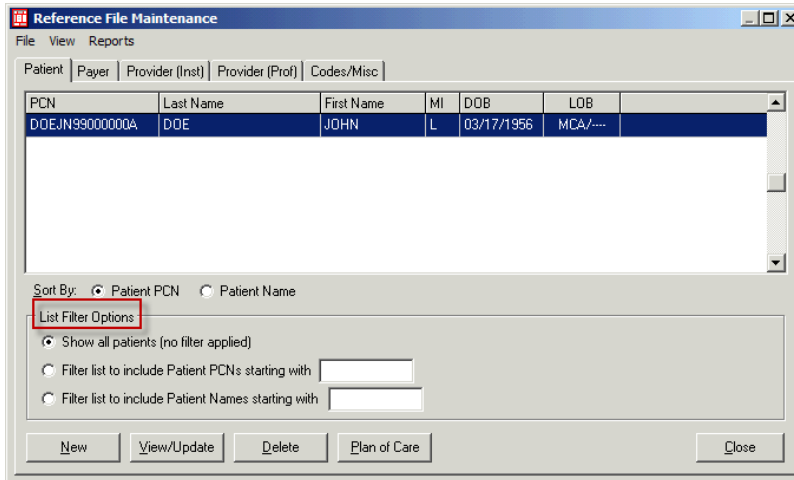


Figure 6

- A number of fields on the Patient/Insured Information tabs support data entry via **fixed-list** or **variable-list lookups**. These **lookup lists** are accessed by **right-clicking** the mouse in the field or pressing the **F2** key in the field.
- Helpful **fly-over** hints are also available for many fields by **left-clicking** in a field or **hover the mouse** over the field.

1. To add a new patient record, click the **New** button (Figure 7).

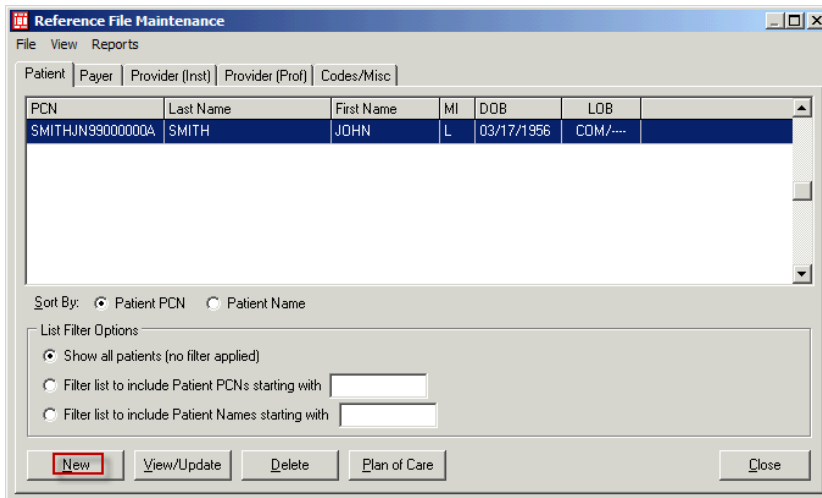


Figure 7

2. Enter the Patient Information on the following tabs (Figure 8):

- **General Information** - general patient information such as the patient's name, address, birthdate, and various status flags.
- **Extended Info** - extended patient information such as information on the patient's primary Provider ID.
- **Primary Insured** - payer, insured, and employer information for the primary Institutional payer(s).
- **Secondary Insured** - insured information for the secondary institutional payer(s).
- **Tertiary Insured** - insured information for the tertiary institutional payer(s).



Figure 8

3. After completing data entry on the Patient Information form, click the **Save** button to save and exit the form (Figure 9).

Figure 9

4. During the patient save operation, an edit validation process is performed on all patient record fields. If no edit validation errors occur, no further correction is needed and the patient record will be saved.

When edit validation errors occur, double-click the first error message to jump to the corresponding field. Several **Save** attempts may be required when there are multiple errors to correct and save a "clean" patient record (Figure 10).

Figure 10

## Payer Setup

The payer information for Medicare is already present in the PC-ACE software by default. Add **additional** Payer records for **other** lines of business to include these payers on newly entered claims.

1. To set up additional Payers, select the **Payer** tab. (Figure 11).
2. Select **New** to open the payer information screen.

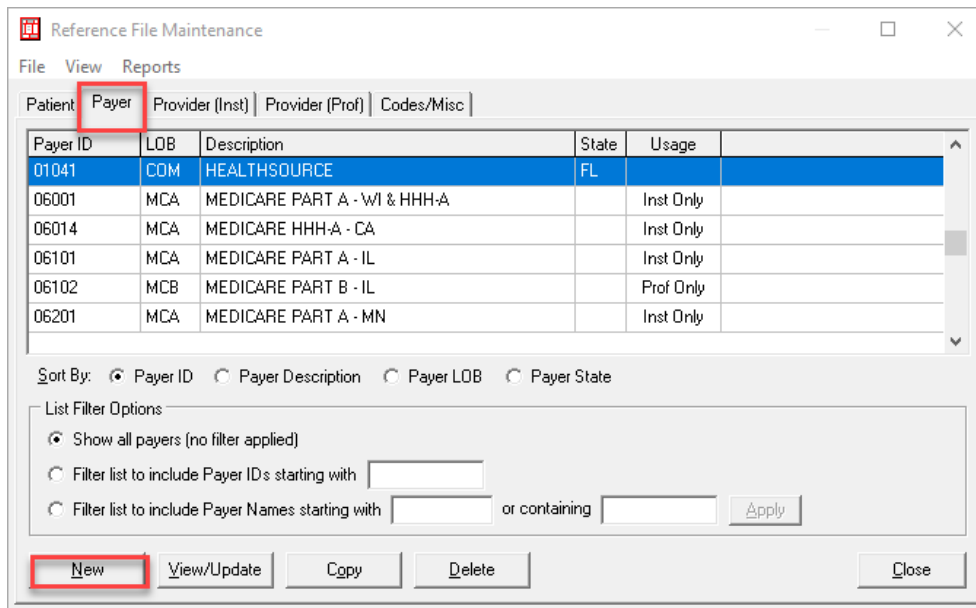


Figure 11

3. Enter the new payer's information taking advantage of the built-in lookups where possible by pressing the **F2** key or right-clicking the mouse in the fields highlighted below (Figure 12).

The screenshot shows the 'Payer Information' dialog box. The 'LOB' field is highlighted with a red box. The 'Source' and 'Usage' flags are also highlighted with red boxes.

Fields include: Payer ID, LOB, Receiver ID, ISA08 Override, Full Description, Address & Contact Information (Address, City, State, Zip, Contact Name, Phone, Ext, Fax), and Flags (Source, Media, Usage).

Figure 12

- The **Payer Information** window will be displayed. Enter all the appropriate information in the highlighted in the following fields.

Use the mouse to click into a field or press the <Tab> button to progress through the form. Complete the following information (Figure 13):

The screenshot shows a 'Payer Information' dialog box. The 'Payer ID' field contains '06111' and the 'LOB' field contains 'COM'. The 'Full Description' field contains 'OXFORD'. The 'Flags' section has 'Source' set to 'C', 'Media' set to 'E', and 'Usage' set to 'B'. The 'Save' button is highlighted with a red box.

Figure 13

- Payer ID** Enter the Other Payers National Identification number. If unknown, enter a value of choice as this is a required field  
Examples:  
9999BSCB for Blue Cross and Blue Shield  
8888AETNA for Aetna 7777MC for Medicaid
- LOB** **F2** or right click in this field and **select** the **LOB** for the desired Payer
- Full Description** Enter the **Company name**
- Source** **F2** or right click in this field and select the corresponding **Payer source**

- All other fields should remain blank and select **Save**.
- Repeat the relevant steps to create additional Payer records as needed.
- Click **Close** when finished (Figure 14).

The screenshot shows the 'Reference File Maintenance' window with a table of payer records. The 'Close' button at the bottom right is highlighted with a red box.

Payer ID	LOB	Description	State	Usage
19003	MCB	DME MAC JURISDICTION D		Prof Only
5555GAP	GAP	MEDIGAP		Prof Only
6666AARP	COM	AARP		
7777MC	MCD	COBCOMMERCIAL		Inst Only
8888AETNA	COM	COMMERCIAL		
9999BCBS	BC	BLUE CROSS AND BLUE SHIELD		Inst Only

Figure 14

## Provider Record Setup for Medicare

1. Select the **Provider (Inst)** tab (Figure 15).

The screenshot shows the 'Reference File Maintenance' window with the 'Provider (Inst)' tab selected. The window has a menu bar with 'File', 'View', and 'Reports'. Below the menu bar are tabs for 'Patient', 'Payer', 'Provider (Inst)', 'Provider (Prof)', and 'Codes/Misc'. The 'Provider (Inst)' tab is active. The main area contains a table with columns: LOB, Provider Name, Provider ID, Payer ID, Provider NPI, Tag, and Taxonom. Below the table are 'Sort By' options: LOB, Provider Name, Provider ID (selected), and Tag. There are also 'List Filter Options' with radio buttons for 'Show all providers (no filter applied)', 'Show only providers associated with selected provider', and two filters for starting with. At the bottom are buttons for 'New', 'View/Update', 'Delete', and 'Close'.

Figure 15

2. Select New (Figure 16).

This screenshot is identical to Figure 15, but the 'New' button at the bottom left is highlighted with a red box.

Figure 16

3. Enter the following information on the **General Info** tab: (Figure 17)

The screenshot shows the 'Institutional Provider Information' window with the 'General Info' tab selected. The window has a menu bar with 'File', 'View', and 'Reports'. Below the menu bar are tabs for 'General Info' and 'Extended Info'. The 'General Info' tab is active. The form contains the following fields:

- Name: HOSPITAL
- Address: 1 MAIN STREET
- City/St/Zip: NEW YORK, NY, 10010-1001
- Phone: (212) 111-1111, Fax: ( ) - -
- Contact: MARY
- Provider ID/No.: 1234567893, LOB: MCA
- Payer ID: SEE NOTES, Tag: |
- NPI: 1234567893
- Tax ID/Type: 571234567, E
- Tax Sub ID: |
- Taxonomy/Type: |
- Country: |, Site: |
- Include In Lookups?: Y

At the bottom are buttons for 'Save' (highlighted with a red box) and 'Cancel'. There is also a 'Remarks' text area and a 'Provider Associations' section with a table and 'Select'/'None' buttons.

Figure 17

Field Name	Action
Provider Name	Enter Provider/Facility name.
Address	Enter Provider/Facility address.
City/St/Zip	Enter Provider/Facility city, state, and ZIP code.
Phone	Enter the billing provider contact phone number. <b>Fax</b> Optional field
Contact	Enter office contact name (preferably the name of the person using PC-ACE).
Provider ID/No.	Enter the Provider/Facility six-digit Medicare Part A provider number.
LOB	Press the <F2> key or right click to show list, then and select <b>MCA</b> .
Payer ID	Press the <F2> key or right click to show the list, and then select the appropriate payer ID.
NPI	Enter the Provider/Facility NPI number.
Tax ID/Type	Enter tax identification number and <b>E</b> for tax ID.
Specialty	Press <F2> key to show list, then select appropriate specialty.
Taxonomy/Type	Select the appropriate taxonomy code for the facility (<F2> will display a list of valid taxonomy codes).
Include in Lookups	Type in Y

- Click on the Extended Info Tab. Press <F2> or right click in the Provider Accepts Assign field and select A – Assigned (Provider Accepts Medicare Assignment) (Figure 18).

The screenshot shows a dialog box titled "Institutional Provider Information" with two tabs: "General Info" and "Extended Info". The "Extended Info" tab is active. The "Provider Accepts Assign" field is highlighted with a red box and contains the letter "A". Other fields include "Provider ID/No Type", "E-Mail Address", "Provider SDF", "Provider Name Match", "Force Legacy ID", "Requires POA Reporting", "Secondary Provider IDs (ANSI use only)", and "Pay-To Provider Information (specify only if different)". The "Save" button at the bottom right is also highlighted with a red box.

Figure 18

- Select **Save**.

## Submitter Setup

1. Select the tab marked **Codes/Misc.** (Figure 19).
2. Select **SUBMITTER**.

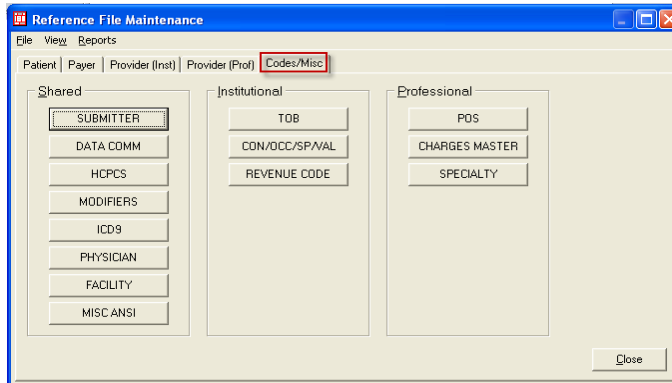


Figure 19

3. The radio button defaults to Institutional. Select **View/Update** with the submitter record highlighted (Figure 20).

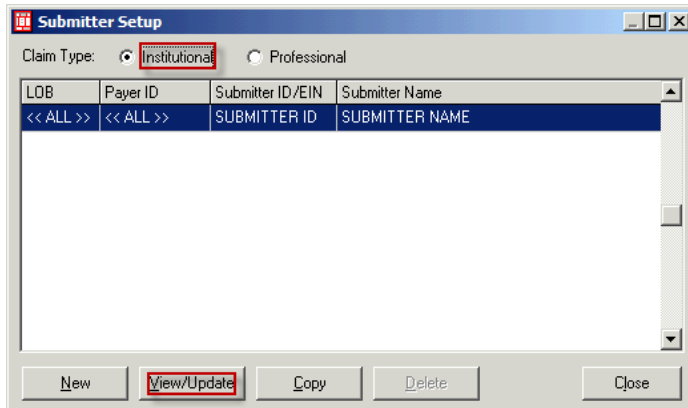


Figure 20

## General Tab

1. Enter submitter number (e.g., NYAXXXX, HMXXXXXX, OXXX) in the **ID** field (Figure 21).
2. Enter name and address of submitter.
3. Enter phone number, fax, contact and e-mail address.
4. Select **Save**.

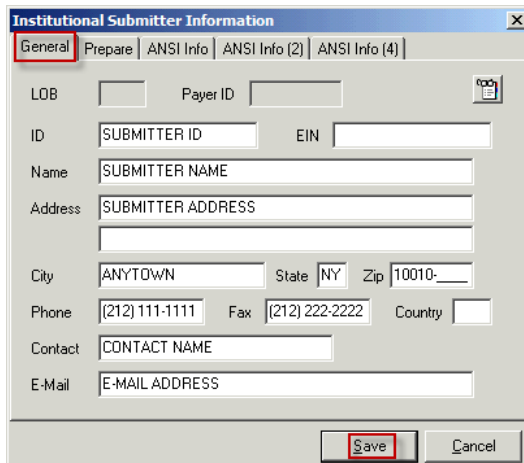
The screenshot shows a window titled "Institutional Submitter Information" with tabs: "General" (highlighted with a red box), "Prepare", "ANSI Info", "ANSI Info (2)", and "ANSI Info (4)". The "General" tab contains the following fields: "LOB" (dropdown), "Payer ID" (text), "ID" (text, containing "SUBMITTER ID"), "EIN" (text), "Name" (text, containing "SUBMITTER NAME"), "Address" (text, containing "SUBMITTER ADDRESS"), "City" (text, containing "ANYTOWN"), "State" (text, containing "NY"), "Zip" (text, containing "10010-"), "Phone" (text, containing "(212) 111-1111"), "Fax" (text, containing "(212) 222-2222"), "Country" (text), "Contact" (text, containing "CONTACT NAME"), and "E-Mail" (text, containing "E-MAIL ADDRESS"). At the bottom, there are "Save" (highlighted with a red box) and "Cancel" buttons.

Figure 21

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## Referring Physician Setup (Optional)

Referring physician National Provider Identifier (NPI) record should be created for all doctors ordering diagnostic tests and consultations.

1. Select Physician on the Codes/Misc. tab (Figure 22).

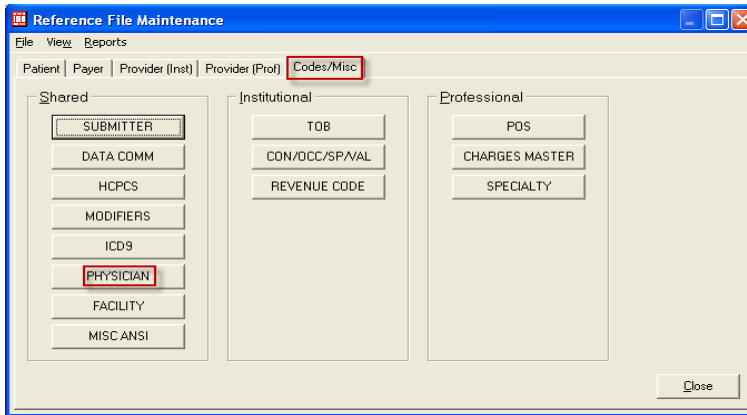


Figure 22

2. Select **New** (found on bottom left of screen) (Figure 23).

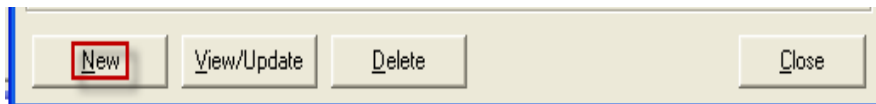


Figure 23

3. Enter physician's last name, first name, and middle initial (Figure 24).
4. Enter physician's NPI number.
5. Select **Save**.

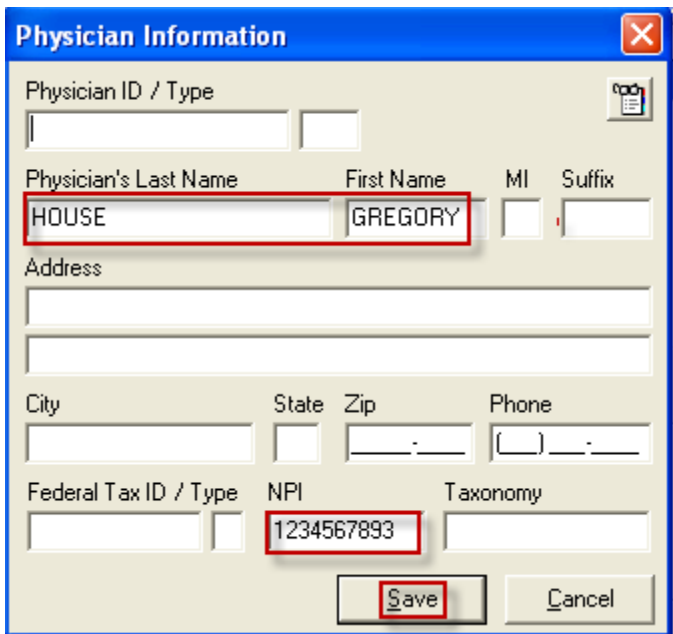
The 'Physician Information' dialog box is shown. It contains several input fields. The 'Physician's Last Name' field contains 'HOUSE' and the 'First Name' field contains 'GREGORY', both highlighted with red boxes. The 'NPI' field contains '1234567893', also highlighted with a red box. The 'Save' button at the bottom is also highlighted with a red box. Other fields include 'Physician ID / Type', 'Address', 'City', 'State', 'Zip', 'Phone', 'Federal Tax ID / Type', and 'Taxonomy'.

Figure 24

6. Select **Close** to exit Physician Information box (Figure 25).

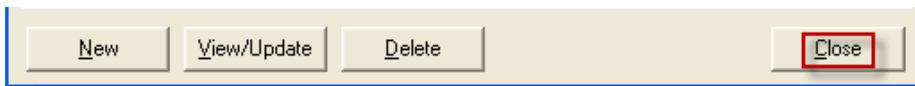


Figure 25

### Section 3 - Claims Entry

Upon completion of the Reference File Maintenance, claims are now ready to be manually entered. When importing claims from another software, the manual entry of claims may be bypassed. Please follow the section on Importing Claims.

1. Select the **INST** icon from the PC-ACE Claims Processing System main menu (Figure 26).

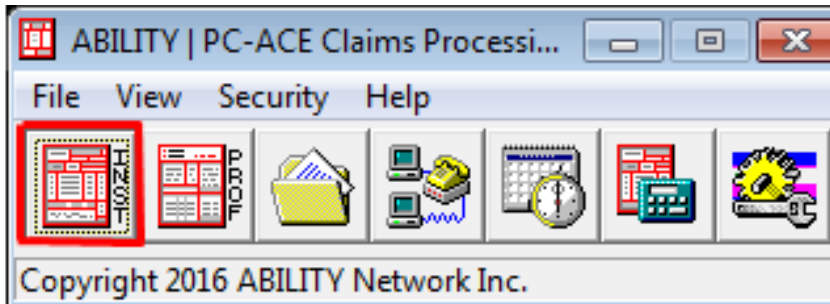


Figure 26

2. Enter **SYSADMIN** as both the User ID and Password in the **Sign On** box if it appears (Figure 27).
3. Select **OK**.

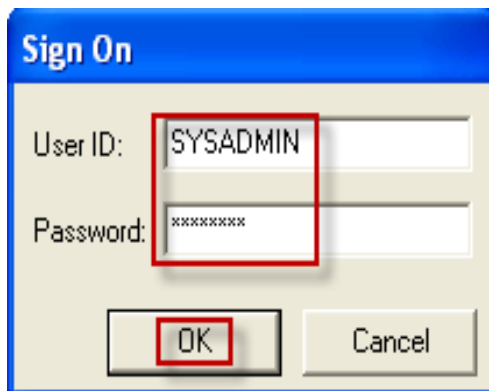


Figure 27

4. Select **Enter Claims** to open the Institutional Claim Form (Figure 28).



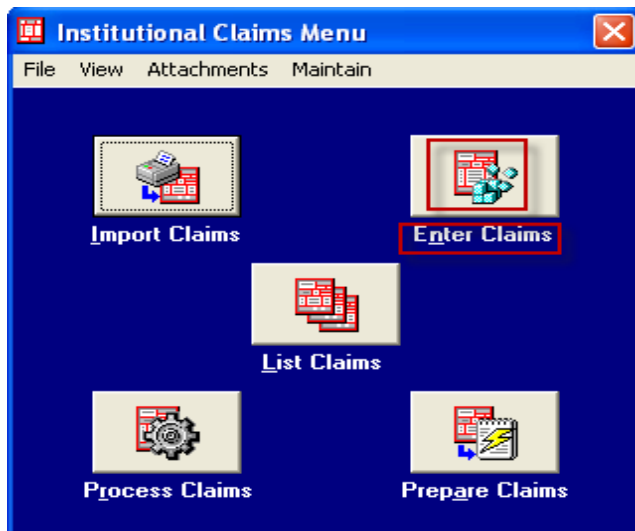


Figure 28

## Entering Claim Data

Click on any field to enter data or press the **TAB** key to move from field to field left to right. Use the **UP ARROW** and **DOWN ARROW** keys to move up and down through the claim form fields, respectively.

A number of productivity enhancing features are available during claim entry:

- **Claim Form Topic Help** - Press the <F1> key while entering an Institutional claim and the software will display the **Institutional Claim Form** topic in PC-ACE.
- **Fixed-List Lookups** – Press the <F2> key or **right click** in fields containing lookup capability to take advantage of the built in fixed-list lookup lists to select from.

Access the lookup list for a field by positioning the cursor on the field and pressing the **F2** function key (or right-clicking the mouse). When an item from the list is selected, its value is automatically entered in the claim form field. For example, **Patient Sex** typically has 3 possible values: "M" (male), "F" (female), and "U" (unknown).

Type "<ALT>F2" (press the <F2> key while holding the <ALT> key down) to identify all fields that support a lookup list. Press the <ESC> key to disable the flashing notification (Figure 29).

Figure 29

- **Variable-List Lookups** – Applies primarily to fields whose values are selected from the reference files completed in **Reference File Maintenance** in the 'Getting Started Using PC-ACE' section above.

If any information in the variable-list lookups selected from the reference files is incorrect and cannot be changed within the claim form, exit the Claim Form and make the necessary change(s) directly to the proper reference file.

For example, selection of a patient from the variable-list lookup completes numerous patient-related fields on the claim. Access variable list lookups using the same method described above for fixed-list lookups.

- Right click in the Patient Control No. field (Figure 30).

Figure 30

- Then select the patient that will be entered on the claim form (Figure 31) from the reference file Patient Selection to auto-populate the values from the Patient Selection record into the claim form (Figure 32).

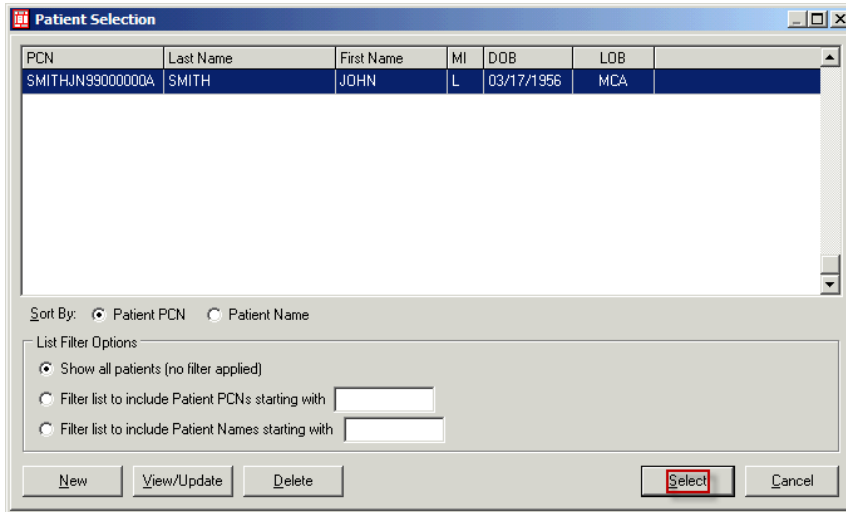


Figure 31

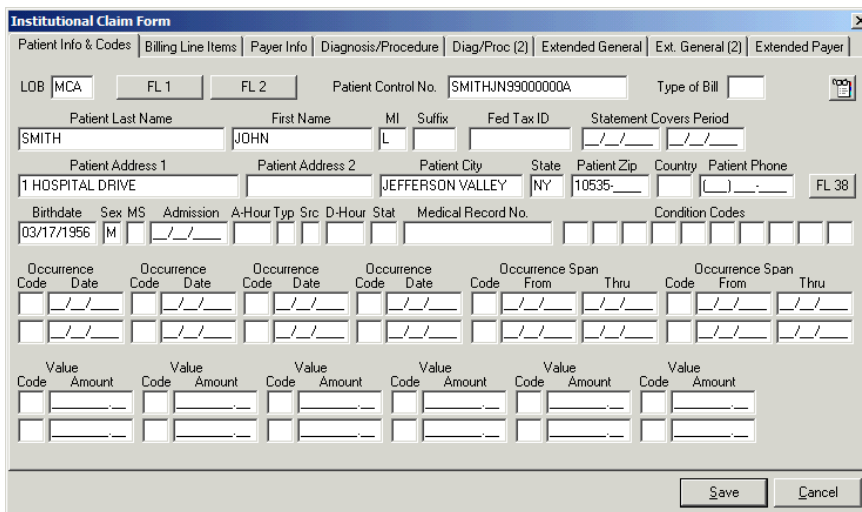


Figure 32

- **Cancel Field Changes** - When a change is inadvertently made to the contents of a field, press the **ESC** key to cancel this change and restore the field's original content. This feature is available for most claim form fields.

Enter the appropriate information required for the Institutional claim form utilizing the mouse to click into a field or press the **<TAB>** button to progress through the form.

**The sections/tabs display fields in the same order as a hardcopy Institutional claim form (Figure 33).**

The Institutional claim form contains eight sections (tabs):

- Patient Info & Codes
- Billing Line Items
- Payer Information
- Diagnosis/Procedure
- Diag/Proc (2)
- Extended General
- Extended General (2)
- Extended Payer

Figure 33

- **Patient Info & Codes Tab**

This tab includes fields for general claim and patient information as well as the Condition, Occurrence, Span, and Value code fields.

Enter the patient information manually during claim entry *or* while the cursor is displayed in **Patient Control Number**, press <F2> or **right click** to access a list of patients from which to select in reference file maintenance record (Figure 34).

Figure 34

- Once the patient is highlighted, click on the **SELECT** button (Figure 35). The **Patient Info & Codes** tab will be displayed with data elements populated from the **Patient Selection** record. Press Tab or point and click to make any modifications to a form locator on the **Patient Info & Codes** tab.

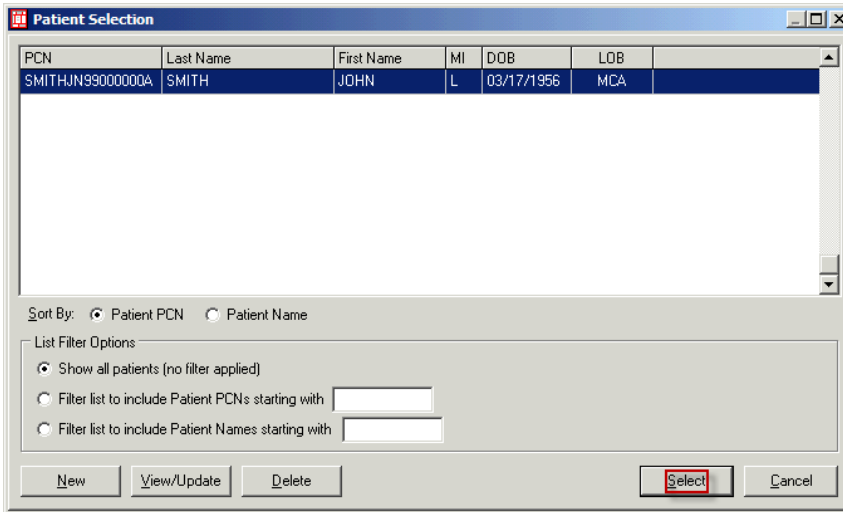


Figure 35

- If the patient is not in the **Patient Selection** select **New** (Figure 36).

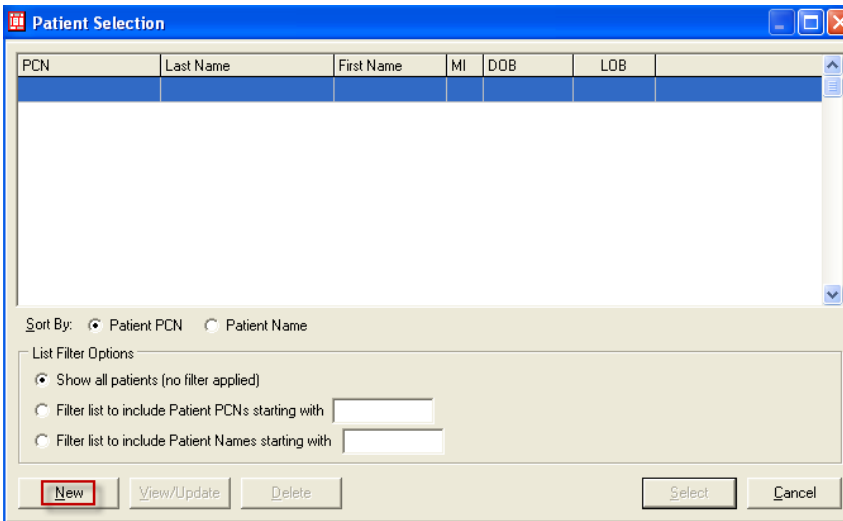


Figure 36

- Enter in the following fields (Figure 37)

General Information | Extended Info | Primary Insured | Secondary Insured | Tertiary Insured

Last Name: DOE | First Name: JOHN | MI: M | Gen: | Patient Control No (PCN): 123456789

Patient Address: Address: 1 STATE DRIVE | City: INDIANAPOLIS | State: IN | Zip: 45245 | Country: | Phone: |

Patient Status: Active Patient:  Y | Discharge Status:  | Sex: F | Death Ind:  | DOB: 11/11/1919 | DOD: | Marital Status:  | Signature On File:  | Employment Status:  | Release of Info:  | Student Status:  | ROI Date: | CBSA Code: |

Notes: | Save | Cancel

Figure 37

Field Name	Action
Last Name/First Name/MI	Enter patient's name.
Patient Control No (PCN)	Enter patient control number selected by the facility.
Address	Enter patient's address.
City/State/Zip	Enter city, state, and ZIP code.
Phone	Optional
Sex	Enter "M" for male or "F" for female or "U" for unknown.
DOB (date of birth)	Enter the date in the MM/DD/CCYY format.

- Select the Extended Info tab. Press <F2> or **right click** in the **Primary Provider ID (Institutional use only)** field and select the **Provider** record (Figure 38).

The screenshot shows the 'Patient Information' dialog box with the 'Extended Info' tab selected. The 'Primary Provider ID (Institutional use only)' section is highlighted with a red box. It contains a text field with '000000' and the instruction '(press F2 to select)'. Other sections include 'Patient Legal Representative Information' and 'Billing/Rendering Provider IDs'.

Figure 38

- **Primary Insured** tab if not populated (Figure 39).

The screenshot shows the 'Patient Information' dialog box with the 'Primary Insured (Inst)' tab selected. The 'Save' button at the bottom is highlighted with a red box. The form contains fields for Payer ID (13201), Payer Name (MEDICARE PART A - NY), and Insured ID (990000000A). It also includes sections for Insured Information (F7) and Employer Information (F8).

Figure 39

- Enter the following information:

Field Name	Action
Payer ID	Press the <F2> key or right click to show the list, and then select the appropriate payer for the state

- Rel (relationship to insured) contracted with.  
Press the F2 key and enter the appropriate relationship to insured code Enter:  
"18" for self  
"01" for spouse  
"19" for child
- Last Name/First Name/MI Enter insured's name.
- Insured ID Enter Medicare Health Insurance Number.
- Address Enter the primary insured's address.
- City/State/Zip Enter city, state, and ZIP code.
- Phone Optional
- Sex Enter "M" for male or "F" for female or "U" for unknown.
- DOB (date of birth) Enter the date in the MM/DD/CCYY format.

- Select **Save**.
- The **Institutional Claim Form** box will appear again (Figure 40).

Figure 40

- **Billing Line Items Tab**  
Enter the services/supplies rendered to the patient. Eight claim lines are displayed at a time on the window. The user can use the <Scroll Up> and <Scroll Down> buttons to move up and down within the claim (Figure 41).  
This tab also includes extended line item fields, and line-level MSP/COB fields. For detailed information on entering Medicare Secondary Payer claims, download the PC-ACE Quick Reference Guide: Medicare Secondary Payer.

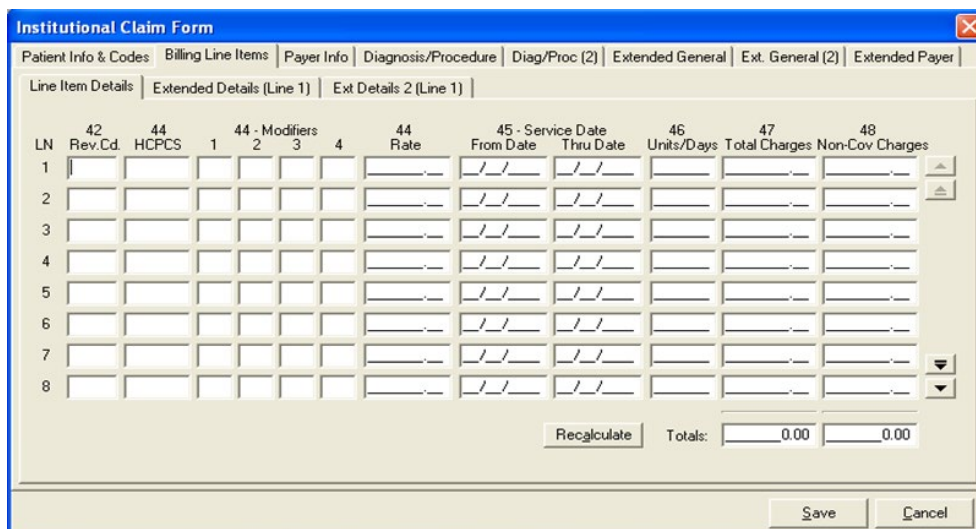


Figure 41

- **Line Item Scrolling** - The Billing Line Items tab displays 8 claim lines at a time. For claims that contain more than 8 line items, the user may scroll through the claim line items one line at a time or one page (i.e., 8 lines) at a time using the buttons provided along the right edge of this tab.

The **up/down arrow keys can be utilized** to move from line to line, scrolling when appropriate.

Type **<ALT><PAGE UP>** (press the **Page Up** key while holding the **ALT** key down) or **<ALT><PAGE DOWN>** to scroll up/down through all claim line items one page at a time.

- **Line Item Features** - The following productivity features are available on the Billing Line Items tab:
  - **Field Duplication** -- Press the **F4** key while positioned on a specific field on a line to copy the value of that single field from the previous line into the current line
  - **Line Duplication** - Press the **F5** key while positioned on any field on a line to copy the values in **all** fields of the previous line into the current line.
  - **Line Deletion** - Press the **F7** key while positioned on any field on a line to delete the line. A prompt to confirm the deletion. Alternatively, enter the value **DEL** (that's an asterisk plus "DEL" plus another asterisk, without the double-quotes) into the HCPCS field on a claim line to delete the line. Make sure the field is highlighted to enter **\*DEL\***. Claim lines are automatically re-sequenced by Revenue Code when a claim is saved. As such, there is no need to provide line rearrangement capabilities.
  - **Advance To Next Line** - Press the **F8** key while positioned on any field on a line to automatically advance the cursor to the first field of the next line, skipping over any remaining fields on the current line.
  - **Jump To Narrative** - Press the **<ALT>N** key combination while positioned on any field on a line to automatically position on the "84 - Remarks" field. Enter the desired narrative text and press the **<TAB>** key to return to the original line field.
  - **Line Item Totals Recalculation** - The Billing Line Items tab provides a **Recalculate** button located near the bottom of the tab adjacent to the totals fields. Click this button to recalculate and update the **Total Charges** and **Total Non-Covered Charges** fields from the current claim line item charges values. **Note:** This button may



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not be available on some installations.

- **Payer Info Tab**  
Enter payer, provider, insured, and employer fields for the primary, secondary, and tertiary payers that need populating.
- **Diagnosis/Procedure**  
Enter diagnosis codes, procedure codes and dates and physician information.
- **Diag/Proc (2)**  
Enter additional diagnosis codes, procedure codes and dates, and claim-level provider information.
- **Extended General**  
Enter any additional patient and general claim-level fields.
- **Extended General (2)**  
Enter additional condition/occurrence/span/value codes.
- **Extended Payer**  
Less frequently used payer, insured, and authorization fields for the primary, secondary, and tertiary payers. Also includes fields for MSP and other secondary claims where Coordination of Benefits (COB) information is required. This major tab consists of a number of second-level tabs that provide access to this extended information in a logical and efficient manner.
- Click **Save** when finished entering the claim.
- During the claims **save** operation, an edit validation process is performed on all fields. If no edit validation errors occur, the claim patient record is saved without further correction and a new Institutional claim form will appear allowing entry of another claim.
- When edit validation errors occur, double-click the error message to jump to the corresponding field in error. Several **Save** attempts may be required to correct and save a "clean" claim. Refer to the **Claim & Reference File Edit Validation** topic for a more complete discussion of the claim edit validation process.
- Once finished entering claims, the claims are now ready to be prepared for transmission (Figure 42). See **Prepare Claims Function**.  
**Note:** Use the Help Feature in PC-ACE for more information on "Listing, modifying and maintaining claims."

## Section 4 - Additional Claim Features

### Copying Claims

Claims for the *same* patient can be copied and then modified instead of creating a new claim each time. Simply copy the previous claim, modify the dates of service and/or any other pertinent information, and then save it.

1. In the **Institutional Claims Menu** window, select **List Claims**.
2. In the **Institutional Claim List** window, in the bottom left section of the screen, choose the Location of **TR** – transmitted only.
3. Put a check mark in the box in front of the claim(s) to be copied.
4. On the **Actions Menu**, select **Copy All Checked Claims**. Select **OK** in the confirmation window. **Note:** If only one claim was checked to be copied, the **Institutional Claim Form** will be displayed instead of the **Institutional Claim List** window.

5. Change the dates of service and **Save** the claim.
6. In the bottom section of the window, select the **Location** of CL – to be transmitted. The claims will be listed and have a status of **UNP**.
7. Double-click each claim in turn, enter new dates of service, and **Save**.

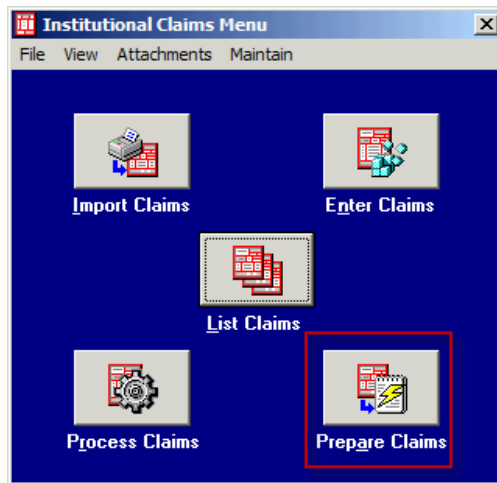


Figure 42

## Reactivating Previously Transmitted Claims and Reactivation of Individual Claims

To resubmit a transmitted claim, these claims must first be reactivated. Only claims in the **transmitted (TR)** location may be reactivated.

1. Select the **Institutional** icon from the **PC-ACE Claims Processing System** main menu (Figure 43).

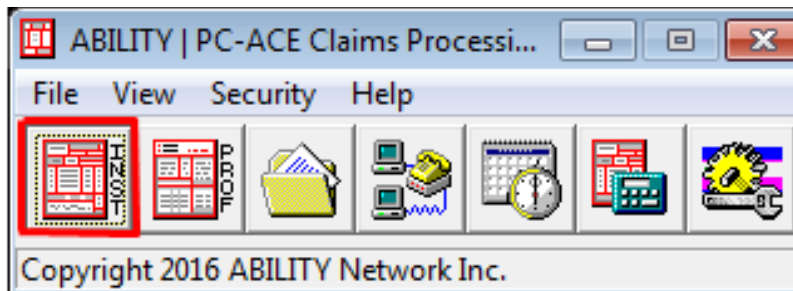


Figure 43

2. Select **List Claims** (Figure 44).



Figure 44

3. Select **Location** (Figure 45).
4. Select **CL** (to be transmitted) or **TR** (transmitted only).

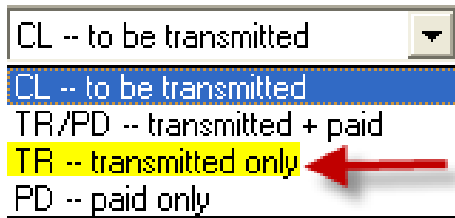


Figure 45

5. Check one claim or several claims to be reactivated.
6. Select **Actions** (Figure 46).
7. Select either **Reactivate Selected Claim** (if only one claim) or **Reactivate All Checked Claims** (for more than one claim).

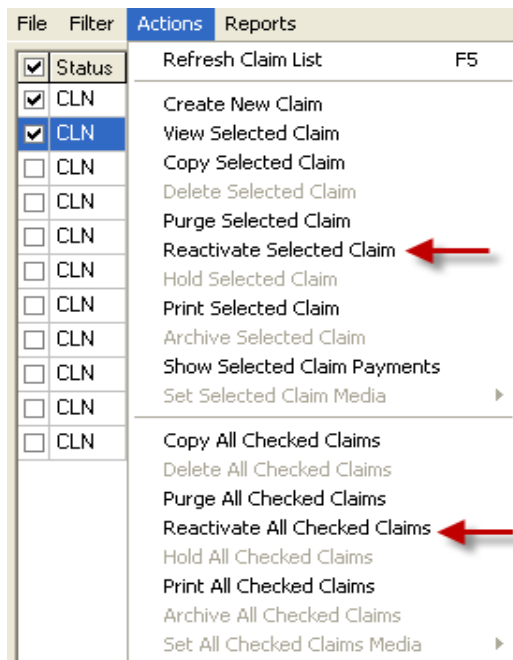


Figure 46

8. The **Confirm** box appears (Figure 47).
9. Select **OK** to reactivate claim/claims.

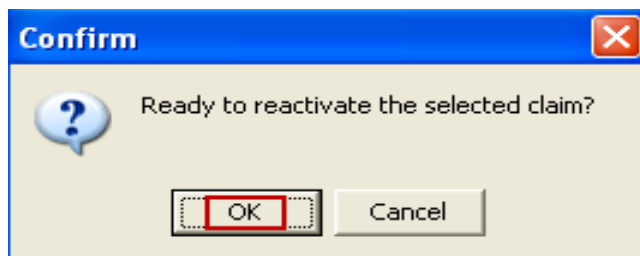


Figure 47

10. Change **Location** field to **CL-to be transmitted** (Figure 48).

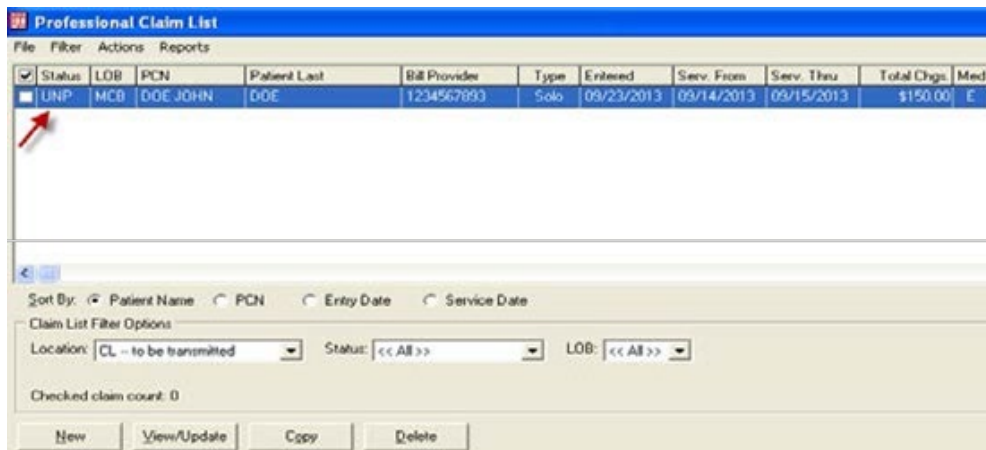


Figure 48

11. Reactivated claims will be listed with a status of **UNP**. These must be corrected before sending.
12. Either double click the claim to open and make the necessary corrections and select **Save** (Figure 49), or see the **Processing Reactivated or Imported Claims** section to Process a multitude of claims.

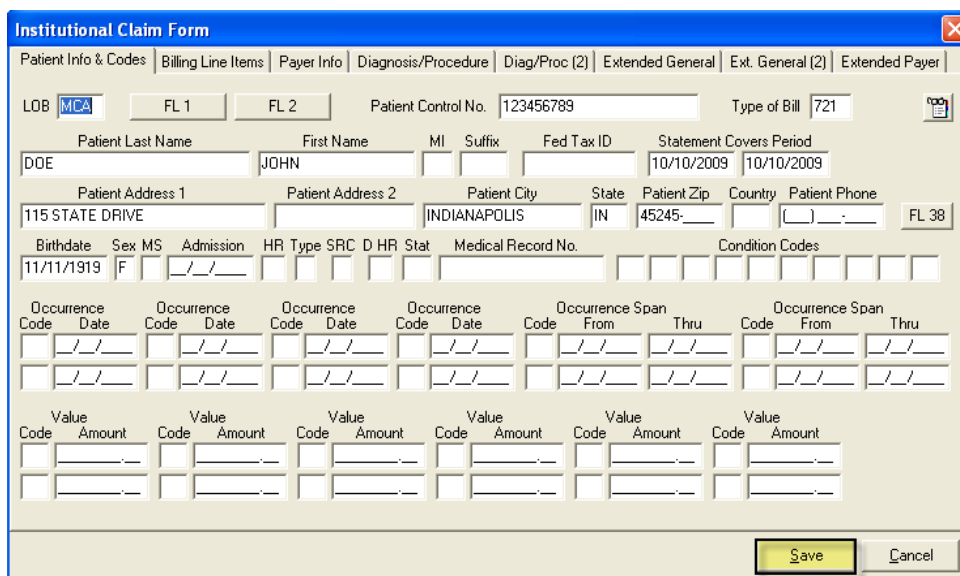


Figure 49

13. The claim status will change to **CLN**. These claims are now ready to be prepared and transmitted. See **Prepare Claims** instructions.

## Claim Import Function

When entering claims manually in the PC-ACE software and not importing a claims file in an Electronic Media Claims (EMC) format, skip this section entirely.

For more information on the importing of UB92 Version 6.0 formats and Print Image, please review the HELP and enter "claim import" in search field.

## PC-ACE ANSI 837I Claim Import Capability (Importing ANSI 837I Claim Files)

Providers can translate and import claims files in the ANSI 837I version format, for subsequent editing, ANSI 837 formatting and transmission. The ANSI 837I import capability by default is **not** activated in PC-ACE.

The Claim Import function can be utilized for MSP claims that need to be updated or corrected and your claims software is not capable of doing so.

This feature should only be activated if the ANSI 837I files have already been validated as structurally sound and complete. It **should not** be used as an ANSI 837I testing validation tool.

**Note:** Only those data elements supported in PC-ACE will be imported from the ANSI 837I file. Any unsupported segments and data elements present in the imported ANSI 837I file will be ignored.

To **activate** this feature for importing ANSI 837 4010A1X12 files, perform the following:

1. From the PC-ACE main toolbar select **File**, then **Preferences** menu items and login when prompted (Figure 50).

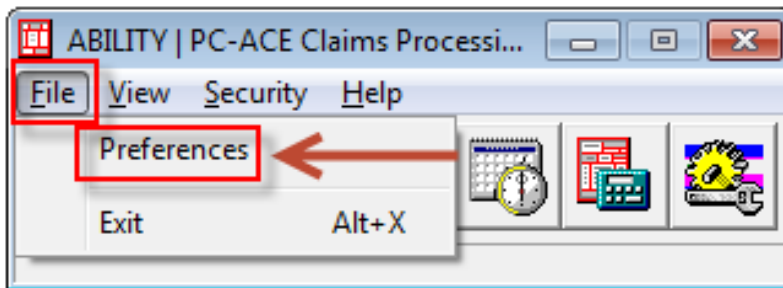


Figure 50

2. While viewing the Preferences screen, type the ampersand (&) character (i.e., <SHIFT>7). An additional tab labeled **System** will appear.
3. Select the **System** tab and check the **Enable Institutional ANSI-837 claim import function** option.
4. Select **OK** to save the changes. These new settings will take effect immediately. (Figure 51)

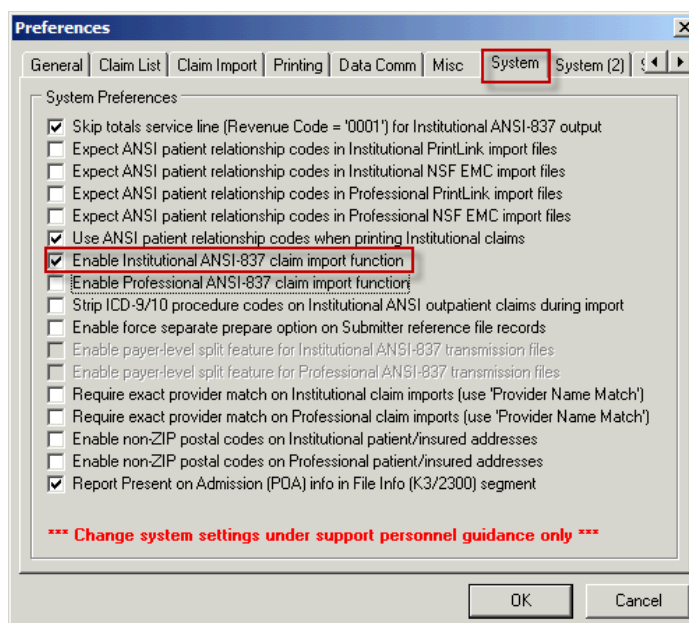


Figure 51

5. Ensure all Provider records are set up prior to importing files (See instructions on adding/checking a provider record).

6. Name the claim import files with a **.DAT (dot DAT)** file extension and copy them into the **C:\WINPACACE\IMPUB92** directory (Figure 52).

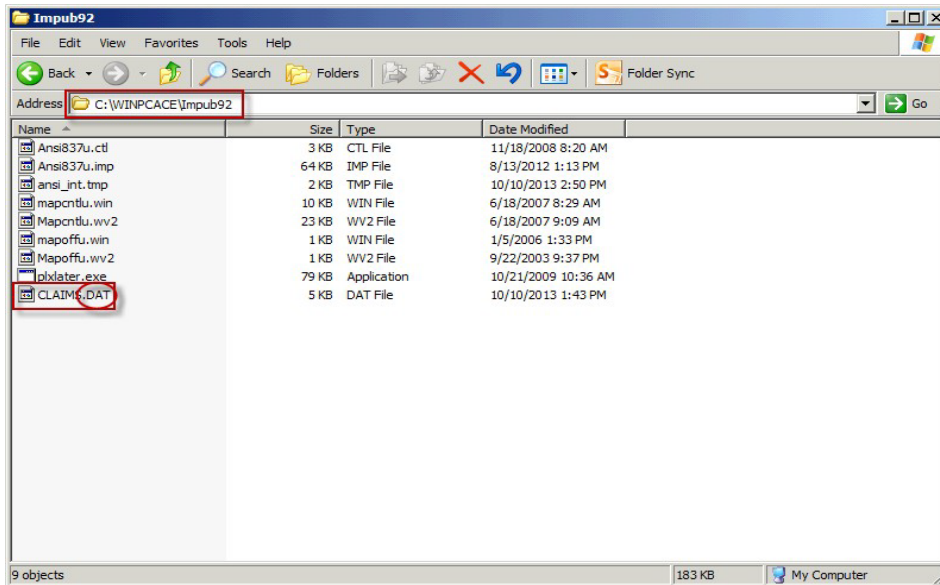


Figure 52

7. On the main toolbar select the **Institutional Claims Processing Menu** icon (Figure 53).

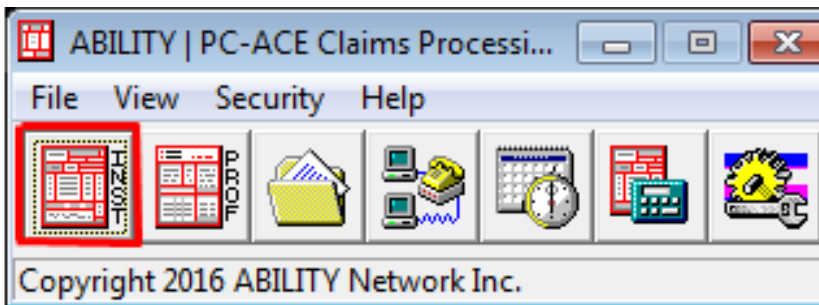


Figure 53

8. Select the **Import Claims** button (Figure 54).

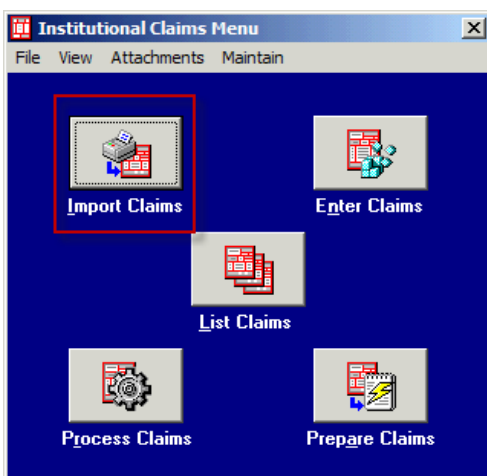


Figure 54

9. The **Institutional Claim Import** window will appear. Select **Import** (Figure 55).

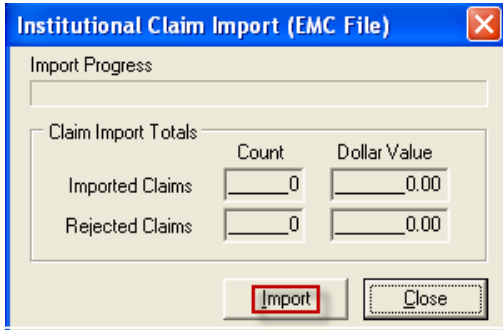


Figure 55

10. A **Confirm** window will be displayed. Select **OK** to continue (Figure 56).

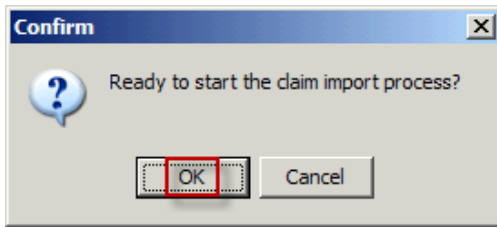


Figure 56

11. When the import process is complete an **Information** window will be displayed to indicate that the operation was completed successfully. Select **OK** (Figure 57).

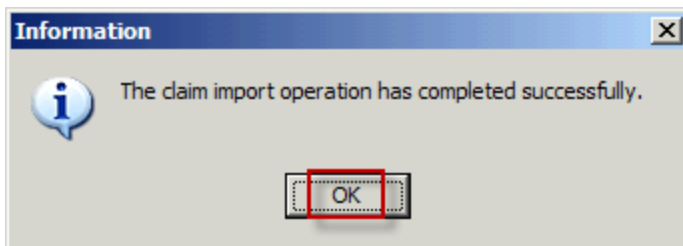


Figure 57

12. The **Institutional Claim Import (EMC File)** window will be displayed. The status bar indicates the operation is complete. The window should contain a count of imported and rejected claims as well as dollar amounts for each area.
13. It is possible to print a report of imported claim information. Click on the **View Results** button to view the report (Figure 58).

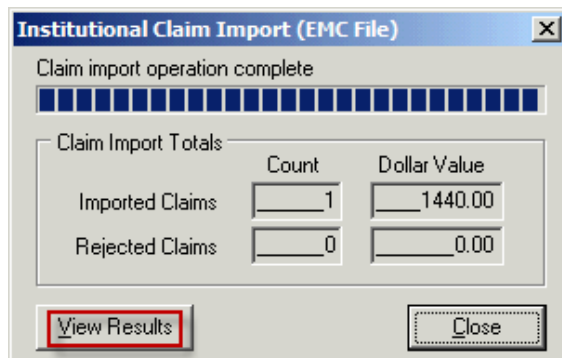


Figure 58

14. The **PC-ACE Claim Import Detail Report** will appear in display mode (Figure 59).



Figure 59

15. Select the printer icon to print the report or select the **Close** button at the top of the report page to exit from the report view (Figure 60).

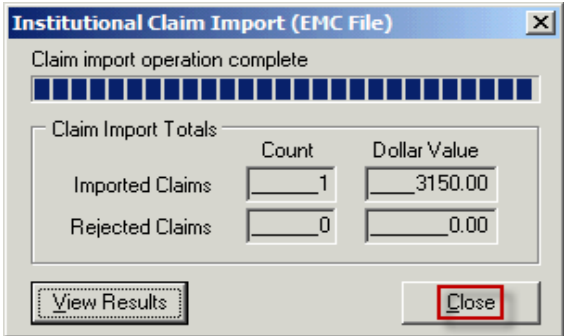


Figure 60

16. Select **C**lose to return to the Institutional Claims Menu (EMC File).
17. Once a file of claims has been imported the user can then run the Process Claims option and "scrub" all the claims for editing. Claims that are imported must be processed.

**Processing Reactivated or Imported Claims**

Claims that have been reactivated or imported need to be processed before preparing the claims file. Newly entered claims do not need to be processed before being prepared.

1. On the main toolbar select the **Institutional Claims Processing Menu** icon (Figure 61).

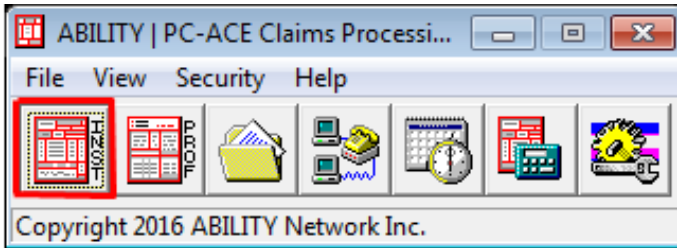


Figure 61



2. Select the **Process Claims** button (Figure 62).

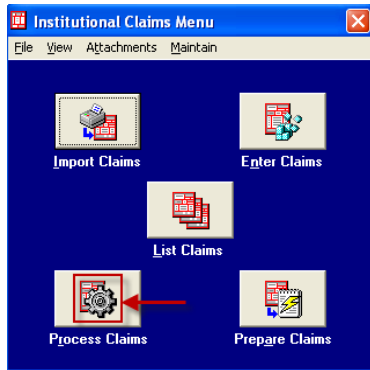


Figure 62

3. The **Automated Claim Processing** window will be displayed. Fill out any fields desired or leave all fields blank and select the **Process** button (Figure 63).

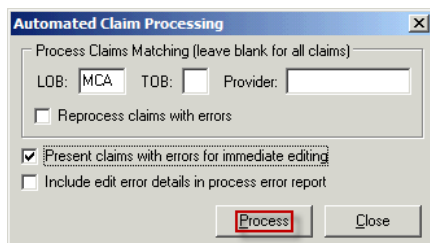


Figure 63

<b>LOB:</b>	The line of business of claims to be processed
<b>TOB:</b>	Constrain the data to process only a certain type of bill
<b>Provider:</b>	Constrain the data to process only the selected provider's claims
<b>Present claim with errors:</b>	Check to present claims with errors for immediate editing if the claims were not cleaned up while in claims list

4. A **Confirm** window will be displayed. Select **OK** (Figure 64).

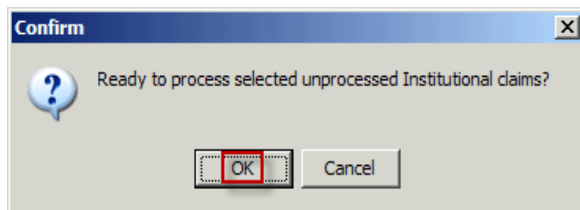


Figure 64

5. When the process claims is complete an **Information** window will be displayed to indicate that the operation was completed successfully. Select the **OK** button (Figure 65).

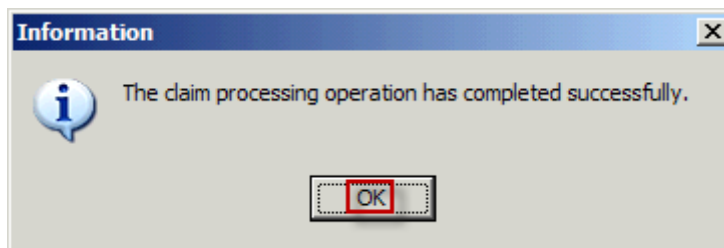


Figure 65

6. The **Automated Claim Processing** window will be displayed which gives the user a visual of the total number of claims that were processed clean (no errors), processed

with errors and/or unprocessed claims (like duplicates) (Figure 66).

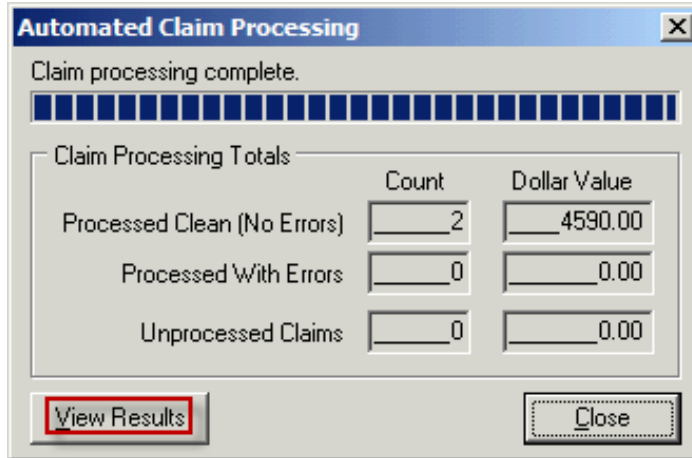


Figure 66

7. Select the **C**lose button or select the **V**iew Errors button.
8. When the **V**iew Errors button is selected, the Adobe Acrobat will display the report, select the printer icon to send the report to the printer or select **C**lose to return to the institutional claims list window (Figure 67).

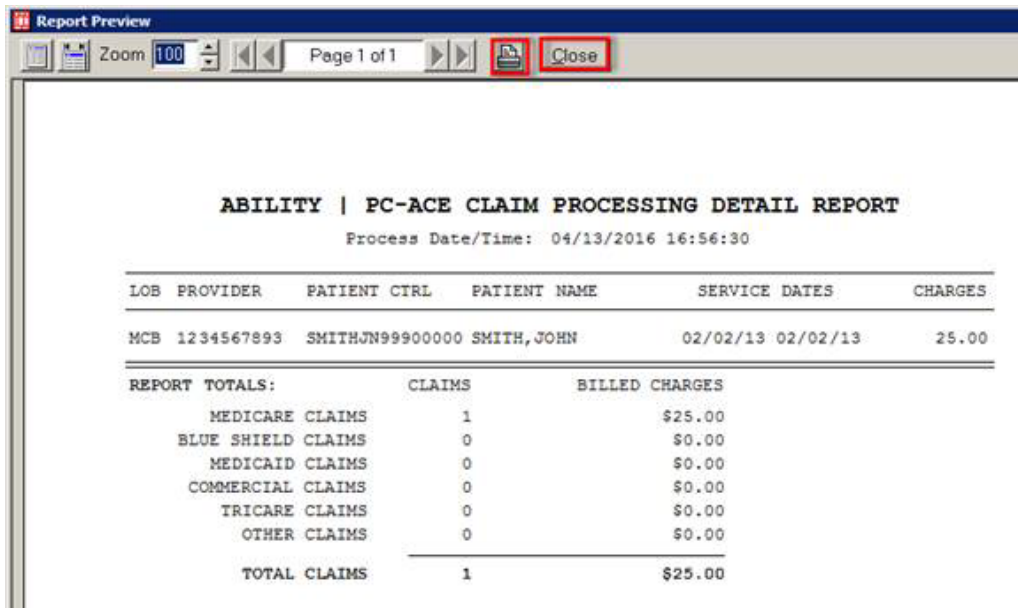


Figure 67

### Reactivating an Entire Batch of Claims

Changes cannot be made to a batch of claims that has been reactivated. This operation will restore the batch of claims so that it can be retransmitted. When changes need to be made to claims that have already been transmitted, see the section titled **Reactivating Claims**.

1. In the **Institutional Claims Menu** window, select the **Maintain Menu** and select **Transmission Log**. The **Institutional Claims Transmission Log** window will be displayed.
2. **Select** the batch of claims to reactivate. When uncertain which batch should be selected, highlight the line, then **select** the **View Details** button to see Transmission Detail report for the batch.
3. Once it has been determined which batch of claims to reactivate, **highlight** the line and select the

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**Reactivate** button. Read each window that pops up, then select **OK** in each.

4. Do **not** prepare the claims file when reactivating an entire batch of claims. Simply transmit the claims file as normal.

## Section 5 - Prepare Claims Function

Medicare claims must be prepared and transmitted using communication software before another batch can be prepared. Failure to follow these instructions will overwrite the previous claim file. When ready to prepare claims for transmission, do the following:

1. Select **INST** from the **PC-ACE Claims Processing System** main menu (Figure 68).

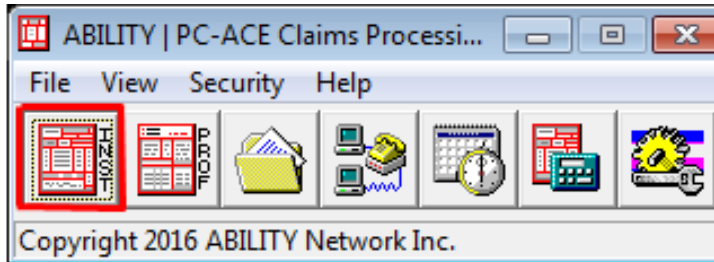


Figure 68

2. Select **Prepare Claims** (Figure 69).



Figure 69

3. The Institutional Claims Prepare for Transmission box appears (Figure 70).
4. Select **Prepare Claims**.

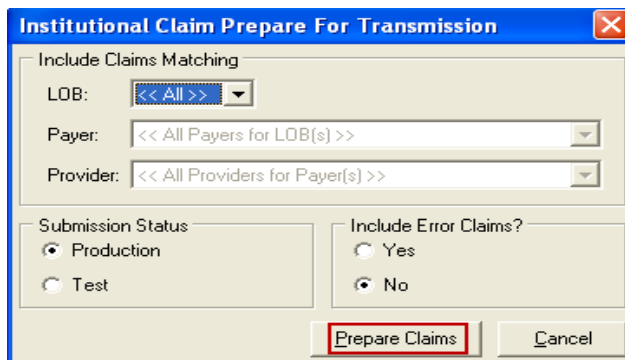


Figure 70

5. The **Confirm** box appears and states, "Ready to prepare selected Institutional claims

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for transmission?" (Figure 71).

6. Select **OK**

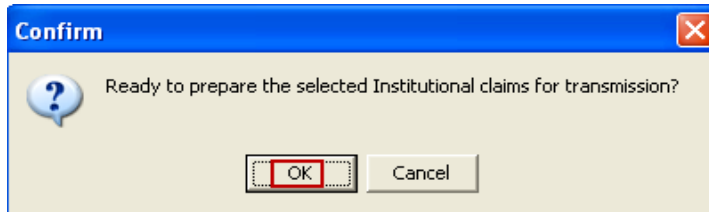


Figure 71

7. The **Information** box appears and states, "The claim operation has completed successfully." (Figure 72).

8. Select **OK**.

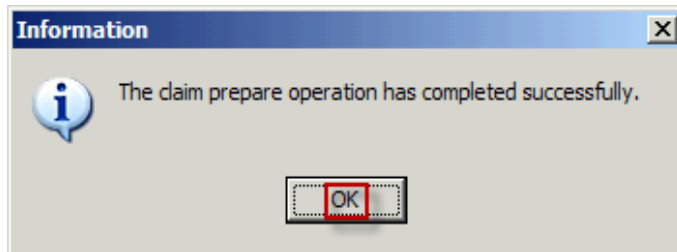


Figure 72

9. The **Claim Prepare for Transmission** box appears (Figure 73).

10. Select **View Results**.

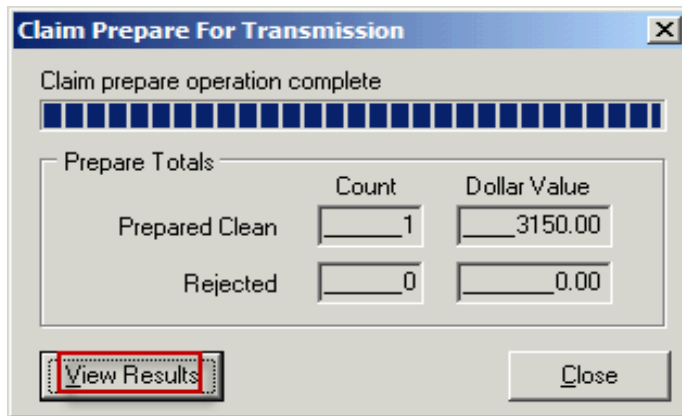


Figure 73

11. **PC-ACE Transmission Detail Report** will appear. To print this report, select the Print icon (top of tool bar, to the left of the **C**lose button). This report does not confirm the transmission of claims. (Figure 74)

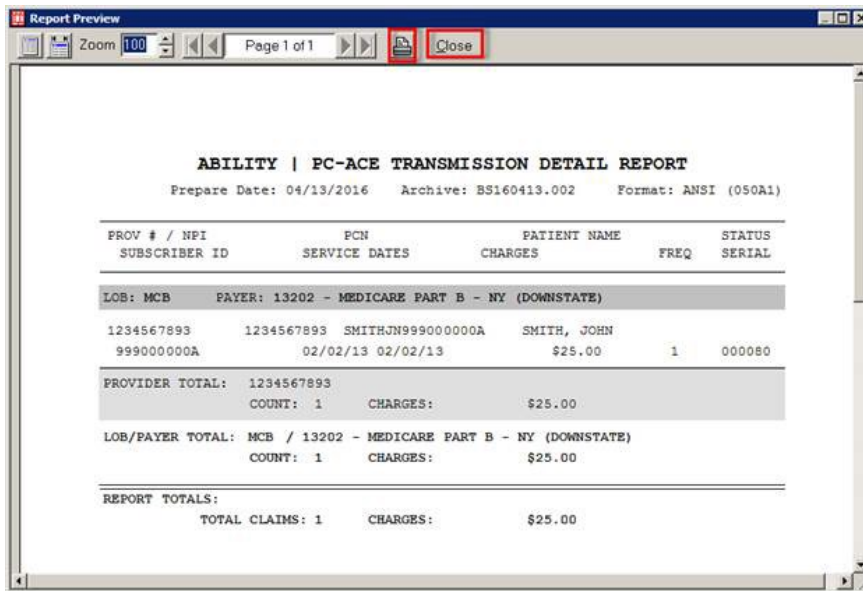


Figure 74

- The preparation of claims has now been completed. Prepared claims must be transmitted. Continue to the transmission process using the NSV's software.

## Section 6 - Transmission Process

### Network Service Vendor

All submitters should connect through a NSV and follow their connection/transmission instructions provided by the NSV to send and receive files.

**Note:** For Part A, the claims file to be transmitted created by PC-ACE will be named **TRANS.DAT** by default and will be located in the **C:\WINPCACE** directory.

Please see the list of **NSVs** listed on our website under the **Claims & Appeals tab > Electronic Data Interchange Software** if one has not already been selected.

### Transmission Reports

Once the claim file has been sent, three reports (TRN, 999 and 277CA) will be available for download.

**TRN**—Transaction Acknowledgement (available within a few minutes after transmission. Please note some network software vendors do not update or refresh right away. The file may take 15 minutes or so to become available for download).

- Look for **"No input validation problems subsequent reports to follow"** (Figure 75). Contact the **NGS EDI Help Desk** if any errors appear:
  - J6:** 877-273-4334
  - JK:** 888-379-9132

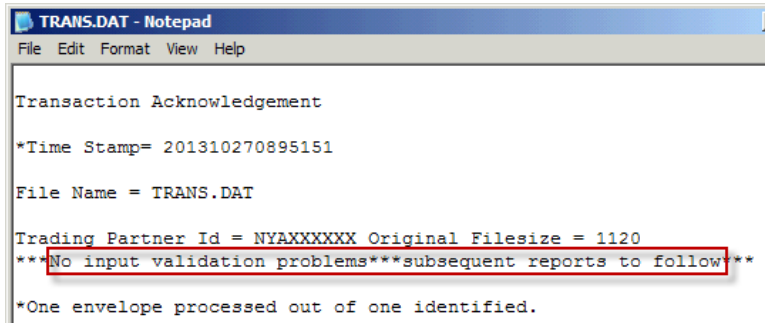


Figure 75

### 999 and 277CA Reports:

999 and 277CA files must first be imported into PC-ACE in order to view them in a readable format (available up to two hours following transmission).

### Importing and Reading the 999 and 277CA Reports

1. Open PC-ACE and click on **File** then **Preferences** (Figure 76).

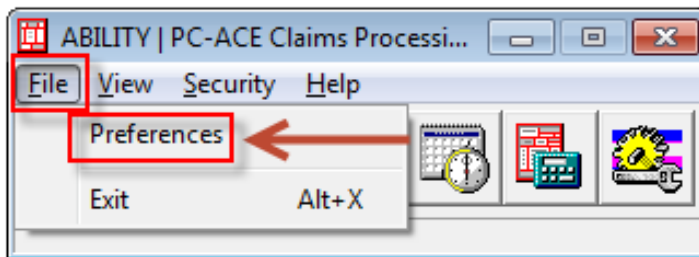


Figure 76

2. Check the first box highlighted. To view only rejected claims in the 277CA report, check the second highlighted box also. To view both accepted and rejected claims in the 277CA report, leave the second box unchecked (Figure 77).

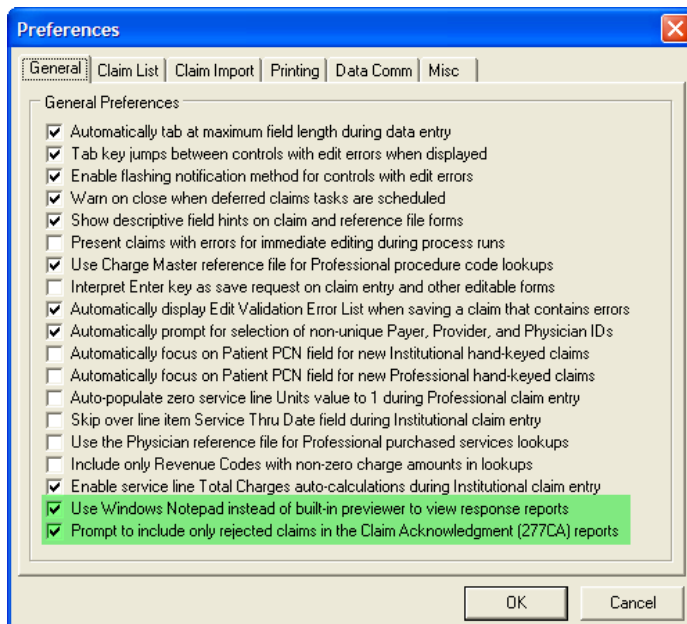


Figure 77

3. In order for PC-ACE to read 999 or 277CA files, they must be saved into the proper sub-folder within the WINPCACE folder (Figure 78):

277CA files need to be saved in the Statub92 (part A) sub-folder, of the Ansi277 folder. 999 files need to be saved in the Ackub92 (part A) sub-folder of the Ansi997 Folder.

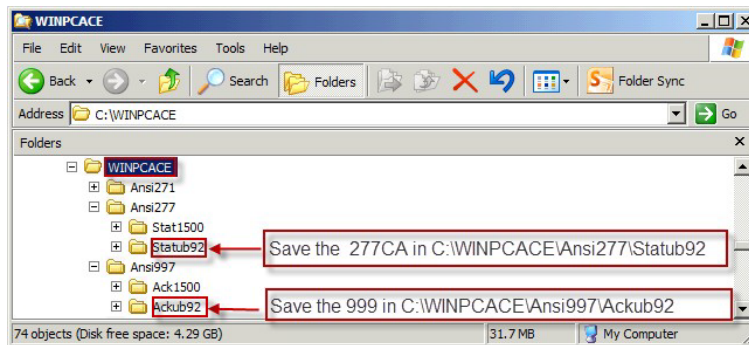


Figure 78

**Note:** This process can be set to run from a batch command file. See Appendix A at the end of this document for instructions.

- Once the report files have been moved to the proper folder location, go to the Institutional Claims Menu. Select the **Maintain** menu item, then **Acknowledgement File Log** to read the 999 (Figure 79).

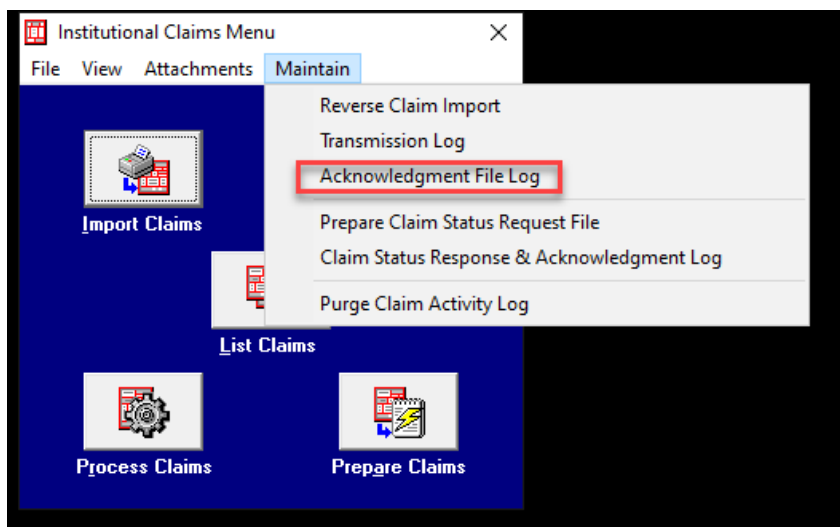


Figure 79

- The following screen will be displayed to read the 999. From the Acknowledgement File Log screen, select the 999 to be displayed and select **View Ack Report** (Figure 80). See Appendix A for instructions on how to adjust the length of time archived copies are maintained in the system.

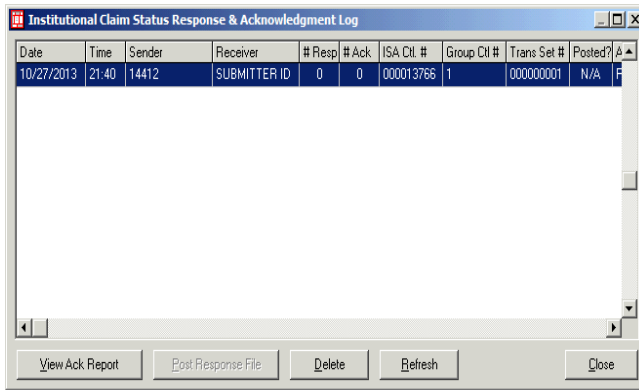


Figure 80

- Look for (Figure 81):  
Transaction Set Status (IK501): A - Accepted  
Functional Group Status (AK901): A - Accepted
- If the 999 is **rejected**, no further editing is done and no further reports are created.
- If the 999 is **accepted** or **accepted with errors**, a third report will be received (the 277CA report)
- To print the report, select the **Print** icon.

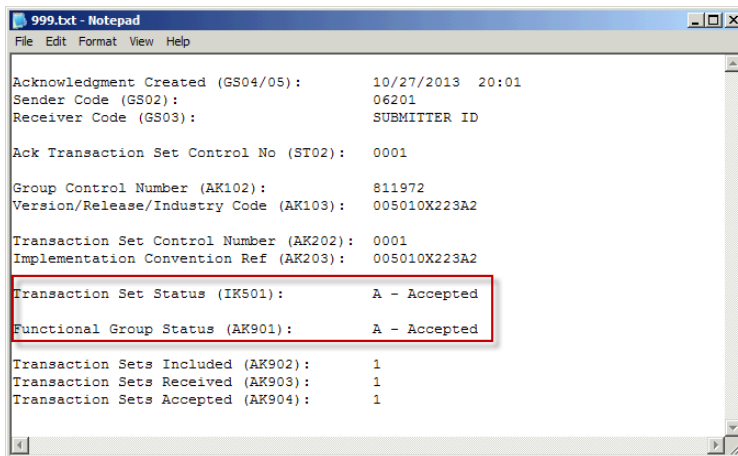


Figure 81

6. To read the 277CA, from the Professional Claim Menu, select **Maintain** and **Claim Acknowledgement Log** (Figure 82).

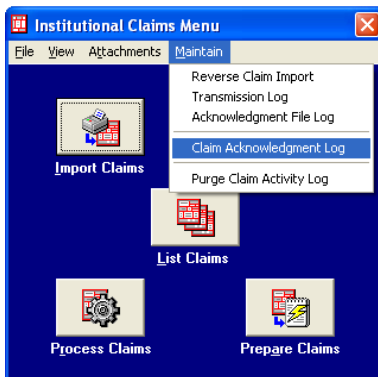


Figure 82

The following screen will be displayed to read the 277CA. From the Acknowledgement File Log screen, select the 277CA to be displayed and select **View Ack Report** (Figure 83).



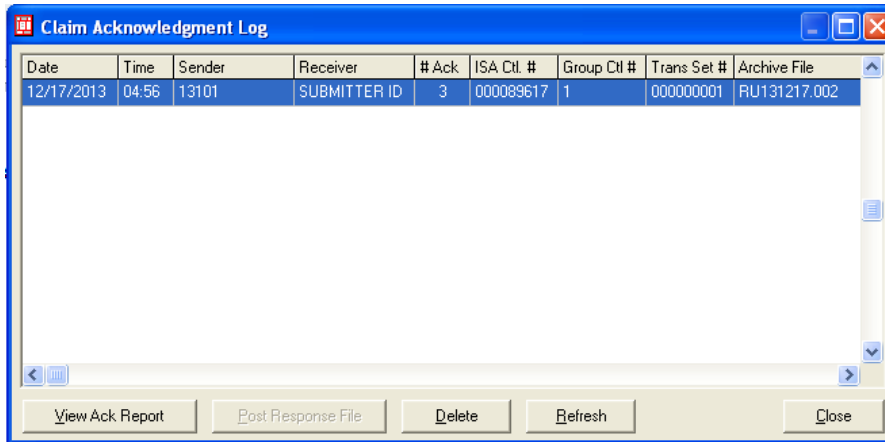


Figure 83

Look for **Total Quantity Accepted**. Any claims that **reject** will need to be **corrected** and **resubmitted** (Figure 84):

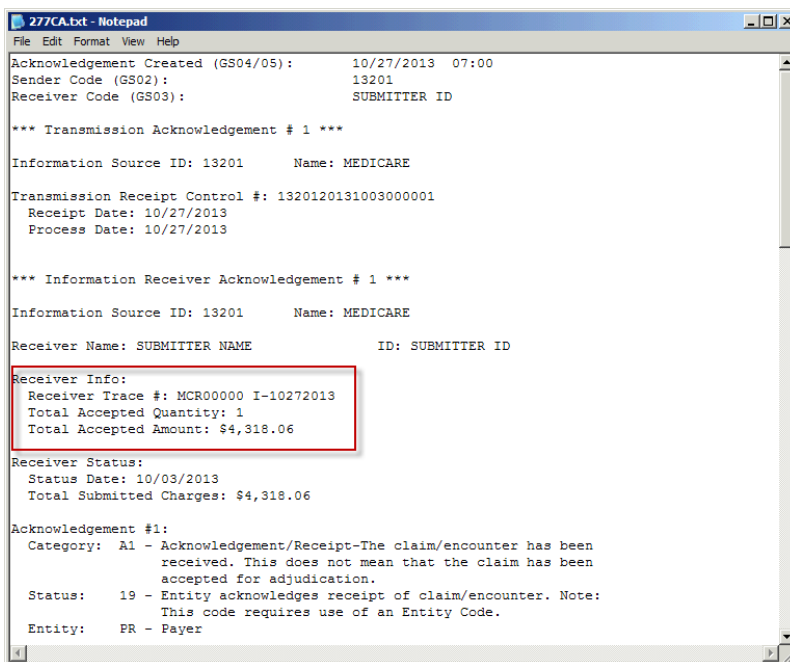


Figure 84

Scroll down to the **Claim Acknowledgement** for the patient information on each claim and it will show all the details for each claim submitted (Figure 85).

- Claim number
- Patient name/number
- Provider NPI
- HIC Number
- ICN/DCN
- Total charges

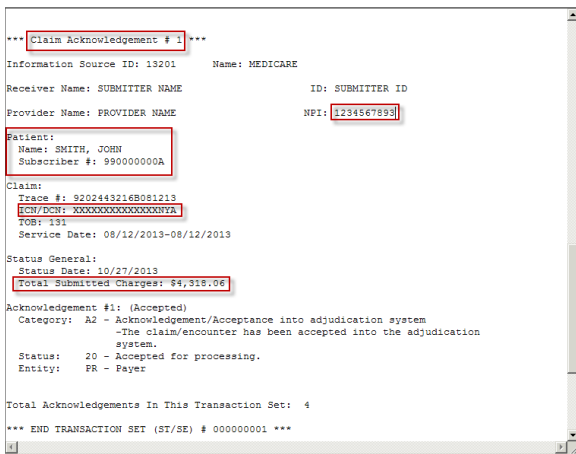


Figure 85

## Appendix A: Adjusting Archived Reports Settings

The length of time that archived copies of 999 and 277CA files are kept can be adjusted. From the main menu of PC-ACE, go to **File, Preferences**, and click the **Misc** tab (Figure 86).

If desired, adjust the first two fields to indicate how long to keep the archived reports. The duration has been set to 1000 days in the example below.

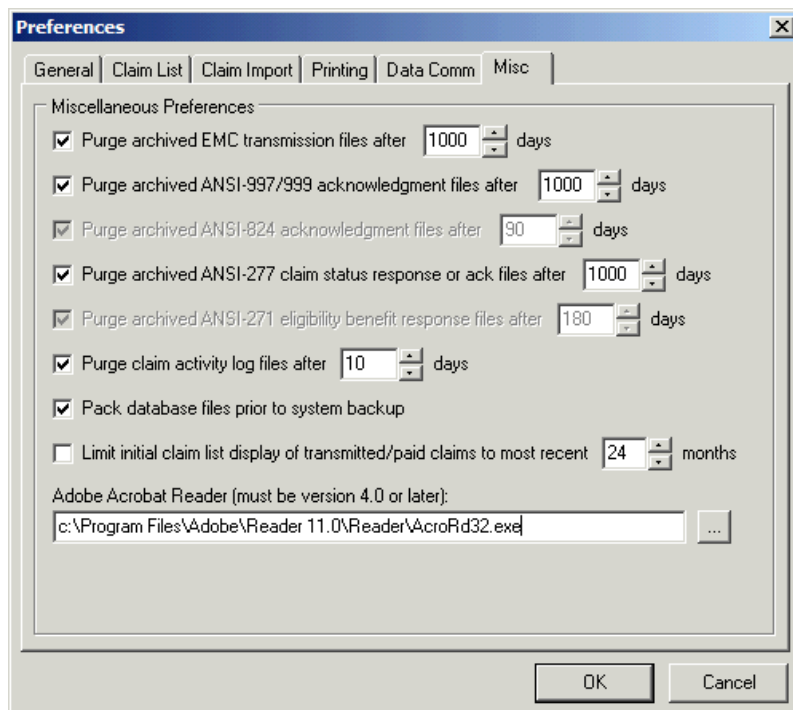


Figure 86

## Appendix B: Setting up Shortcuts for File Locations

To assist in the placement of new reports shortcuts can be created (Figure 87).



Figure 87

Right click on **Start** and then select File **Explore** (Figure 88).

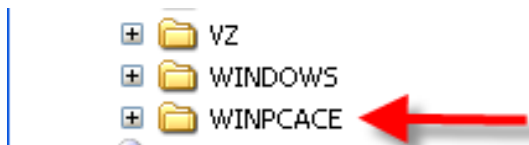


Figure 88

Double click on the **WINPCACE** folder (Figure 89).

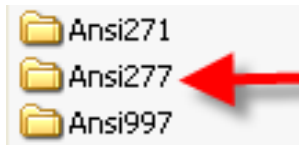


Figure 89

Double click on the **Ansi277** folder for a 277 shortcut. If desired, repeat this process for A 999 shortcut in which the 997 folder should be selected (Figure 90).

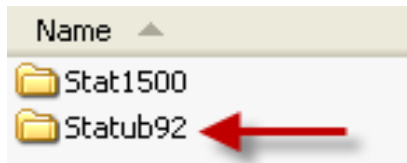


Figure 90

Right click **Statub92** folder for Part A (Figure 91).

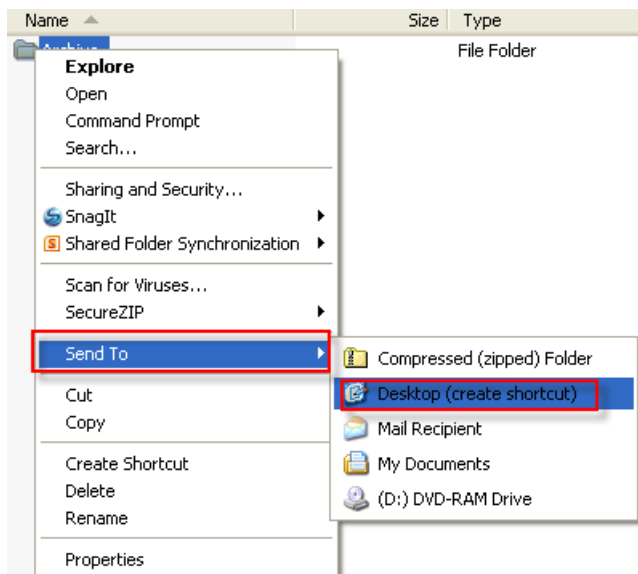


Figure 91

Select **Send To** and then Select **Desktop (create shortcut)**

Right click on the new folder and rename the folder (i.e., 277CA Reports) with the new folder on the desktop, place all 277CA reports into this folder.

To create a shortcut for 999 reports, repeat this process however, instead of selecting the ANIS277 folder select the ANS1997 folder and continue follow this process by renaming the folder (i.e., 999 Reports).

For further assistance please send an e-mail to EDI at [ngs\\_edi\\_parta@anthem.com](mailto:ngs_edi_parta@anthem.com) or contact the EDI Help Desk:

- **J6:** 877-273-4334
- **JK:** 888-379-9132

## Appendix C: Troubleshooting

When experiencing problems viewing 999 or 277CA reports, once saved in the correct subdirectory in PC-ACE, it is suggested that a system change be made.

Select **Start** from the desktop, then go to the **Control Panel** select **Folder Options**  
Select the **View** tab

Under **Hidden Files and Folders** click on the **Hide extensions for known file and folders** check box, in order to remove the selection of that option, then click on the **Show hidden files and folders** radio button to change settings (Figure 92).

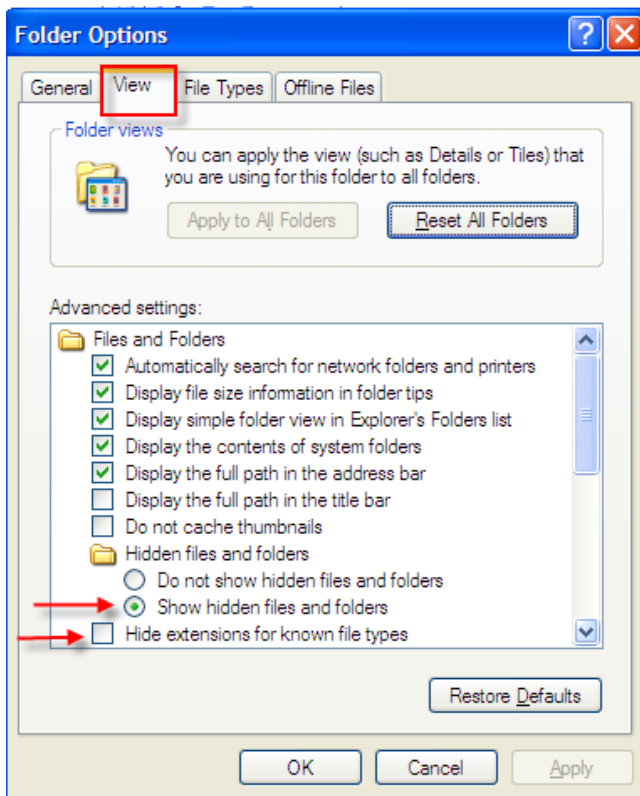


Figure 92

This will show any hidden file(s) in the WINPCACE directory.

## Section 7 - How to Backup PC-ACE Claims Processing System

Each time the program is exited the following message will appear: "Perform System Backup?" An external backup file of the program must be maintained in the event a fatal system crash occurs.

1. To do this, the backup may be placed on the desktop by selecting the **Browse** button and choosing the hard drive (system C) and desktop (Figure 93 and 94).

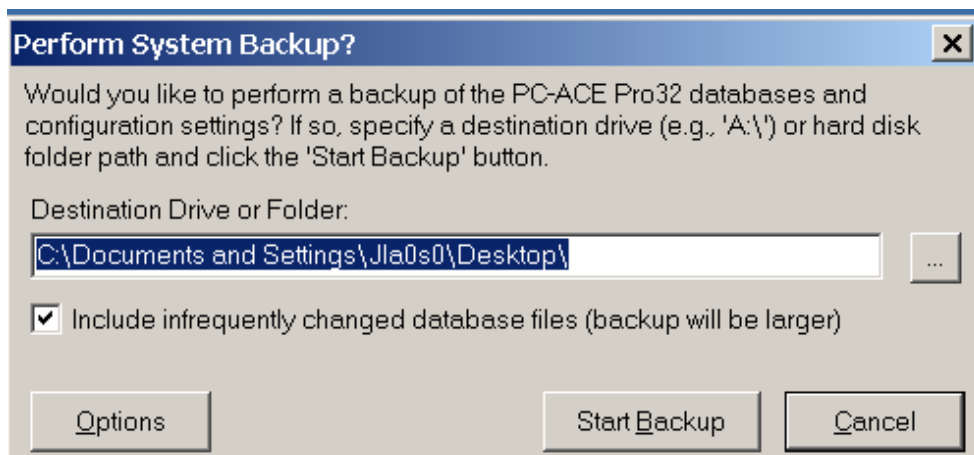


Figure 93

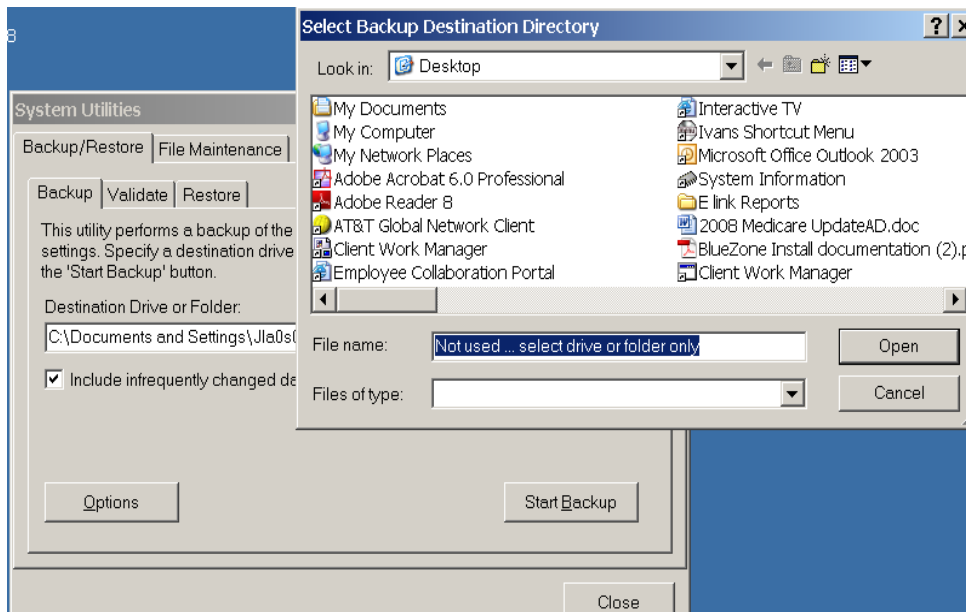


Figure 94

2. This will put the backup file named **PCACEPBK.ZIP** on to the desktop (Figure 95).

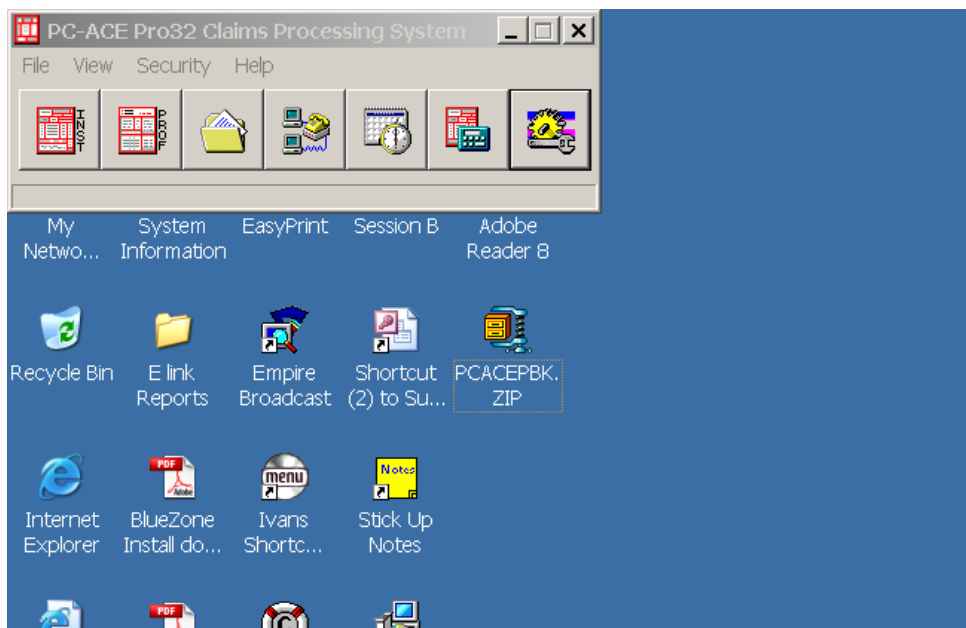


Figure 95

3. From the desktop, save to a CD-ROM or flash drive. This external device must be maintained to ensure the restore capabilities in the event of a fatal system crash.
4. Select **My Computer** on the desktop and drag the **PCACEPBK.ZIP** file from the desktop to the CD-ROM and then burn it, or drag to the flash drive (Figure 96).

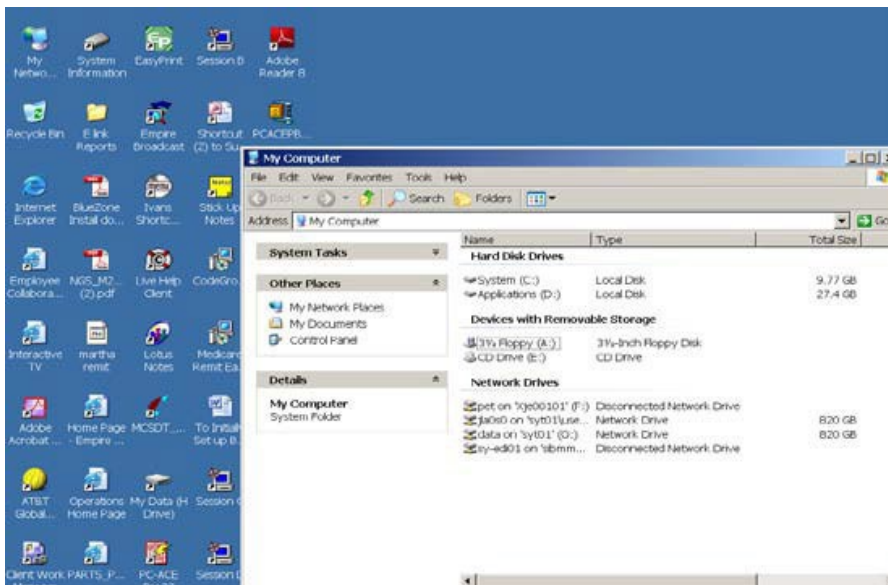


Figure 96

## Section 8 - Additional Features

### Archiving Claims

Archiving claims in PC-ACE improves performance and helps prevent database corruption.

1. Select the **Inst** button on the main toolbar.
2. Select the **List Claims** button.
3. Select the **File Menu** and select **Maintain Claim Archives**
4. Select the **New** button and **enter** a name for the archive, then **select** the **OK** button.
5. Select the **Close** button. The **Institutional Claim List** window will be displayed.
6. In the **Claims List Filter Options** section at the bottom of the **Institutional Claim List** window, select the drop down arrow and select **TR-transmitted only**.
7. Select the **Advanced Filter Options** button near the bottom of the **Institutional Claim List** window, and **enter** the filter criteria.

**Example:** If today's date is 11/11/13, to archive everything except the past three months:

- Check the box in front of "Invert filter logic..." at the bottom of the **Advanced Claim List Filter Criteria** window.
  - In the **Transmit Date:** field, **enter** 08/01/2013 in the first box, and then **enter** 11/11/2013 in the second box.
  - Select the **OK** button. The **Institutional Claim List** window will appear and the only claims displayed are those that were transmitted more than three months ago. These are the claims that will be archived.
1. Select the **Filter Menu** and select **check all claims**. Each claim now has a checkmark in the box at the left of the line it's on.
    - i. Select the **File Menu** and select **Open Claim Archive**, then, double-click the archive created in the steps above. An information window will pop up. Read the contents, then, select the **OK** button.

---

Select the **Actions Menu** and select **Archive All Checked Claims** (near the bottom of the Actions menu.

- ii. Be careful **not** to select Archive Selected Claim, as that will only archive the claim that is highlighted. An information window will pop up. Read the contents, and then select the **OK** button.
2. The claims are no longer shown in the list. The claims are not gone but they have been stored in the archive. To see these claims, select the **File** menu, and then select **View Archived Claims**.
3. Once PC-ACE has been exited, to view these claims again:
  - a. **Open** the claims list
  - b. Select the **File Menu** and select **Open Claim Archive**.
  - c. Double-click the archive to view, read the information in the pop up Information window, and then select the **OK** button.
  - d. Select the **File Menu** and select **View Archived Claims**.
  - e. To see current claims, select the **File Menu** and select **View Current Claims**.

## Transferring PC-ACE to Another Computer

1. On the old computer, upgrade PC-ACE to the current version.
2. On the new computer, **install** the full installation of the current version from our Web site.
3. On the old computer, **open** PC-ACE.
4. On the main toolbar, select the **last** button, which has a gear and a wrench on a French flag.
5. Sign in. The **System Utilities** window is displayed, the **Backup/Restore** tab should be selected and the **Backup** sub tab displays the text "This utility performs a backup..."
6. Select the small button with three dots on it at the right end of the **Destination Drive** or **Folder** field.
7. In the Select **Backup Destination Directory** window, select the drop down arrow at the right end of the "Look in" field, select **Desktop** which should be at the very top of the list, then select the **Open** button. The **System Utilities** window will be displayed.
8. Select the **Start Backup** button and select the **OK** button in the **Confirm** window.
9. After the backup operation completes, the **Information** window will display. If the text states "The backup operation has completed successfully" then select the **OK** button.  
**Note:** If the text indicates that the backup failed, please contact the NGS EDI Help Desk:  
**J6:** 877-273-4334  
**JK:** 888-379-9132.
10. In the **System Utilities** window, select the **Validate** sub tab, browse to the **Desktop** as in the earlier steps, then select the **Start Validate** button, select the **OK** button in the **Confirm** window. When the validation is complete, the **Information** window will be displayed with the text "The validation operation has completed successfully:"  
**Note:** If the text indicates that the validation failed, please contact the NGS EDI Help Desk.
11. Select the **OK** button in the **Information** window and select the **Close** button in the **System Utilities** window.



- 
12. The backup file on the desktop is named PCACEPBK.ZIP. **Copy** this file to the **Desktop** of the new computer.
  13. On the new computer, open PC-ACE and on the main toolbar, select the last button, which has a gear and a wrench on a French flag (as directed above).
  14. Sign in. The **System Utilities** window is displayed, the **Backup/Restore** tab should be selected and the **Backup** sub tab displays the text "This utility performs a backup..."
  15. Select the **Restore** sub tab, browse to the Desktop, and select the **Open** button. It is not necessary to select the file because the program knows the file name already.
  16. Continue with the restore, following the prompts. Once it's complete, PC-ACE on the new computer is identical to what was on the old computer.