

Third Party Billing

Purpose	Set up and use CAREWare Third Party Billing.
Who should do this	Billing administrators, billing operators, and staff who enter billable services.
Use this guide when you need to	You need to configure insurers and billable services, create a claims data set, review it, or export a billing file.
Main warning	Review insurance and service records before exporting a claim. Missing or incorrect fields can cause billing errors.

Quick path
Provider > Administrative Options > Third Party Billing

Important A service does not appear in a claim unless Third Party Billing is active, the insurer is active for the provider and client, and the service is set up as billable.

Before You Begin

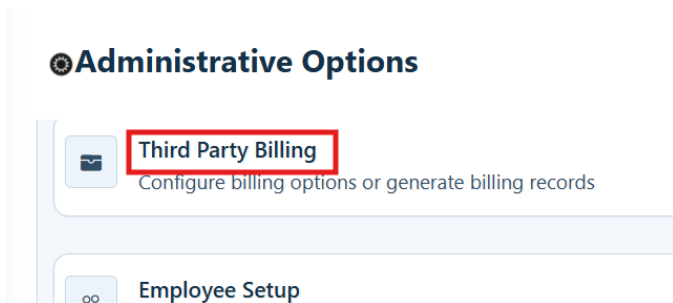
- The Third Party Billing module tracks billable services, insurance providers, and the staff who provide services. It creates claims data sets and can export HCFA 1500 reports and 837p files for health insurance billing. It also adds service fields used to track the time spent providing a service.
- The module supports the full billing workflow: set up insurers and services, record billable services, create a claim, check the claim for missing information, and export the billing file.

Enable Third Party Billing

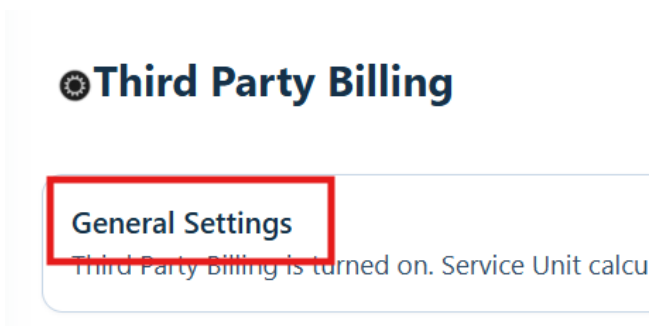
Step 1. Log in to the provider.

Step 2. Select Administrative Options.

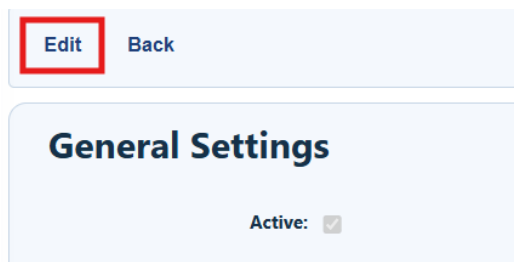
Step 3. Select Third Party Billing.



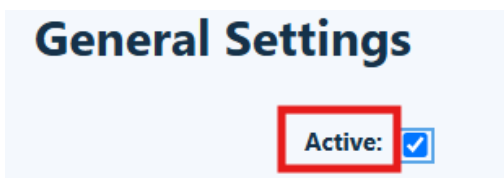
Step 4. Select General Settings.



Step 5. Select Edit.



Step 6. Check Active.



Step 7. Select Save.

Save

Cancel

General Settings

Active: ☒

TIP

When Third Party Billing is set to Active, CAREWare adds the fields needed for billing claims.

Fields Added by Third Party Billing

Service Tab

CAREWare adds Provided By, Start Time, and End Time to service records. Start Time and End Time are used to calculate billing units when Calculate Units is checked in General Settings. Staff listed in Provided By come from Employee Setup.

Services

Provider:

AZ HIV Community Services

Client:

abcdefghijkl, gfedcba

Date:

09/01/2026

Contract *:

Main Contract

Tag:

Service Name *:

Care Plan/Care Plan Update

Units:

1

Prices:

100.00

\$

Total:

100.00

\$

Service Provided By:

Start Time:

12:00 AM

End Time:

12:00 AM

Insurance Assessment Tab

Billing uses the Insurer, Billing Provider ID, Billing Secondary ID, Billing Notes, Primary Diagnosis Code, and Primary Diagnosis Date fields. The insurer is the company billed for the service. The billing IDs identify the provider that performed or billed the service.

Full LIS: ☐

Other Insurance Specify:

Insurer:

Billing Primary ID:

Billing Secondary ID:

Billing Notes:

Primary Diagnosis Code:

Primary Diagnosis Date:

Employee Setup Tab

Employee Setup controls which staff appear in the Provided By list. A staff member must be entered as an employee, marked active, and checked for Third Party Billing. The NPI field stores the provider plan network identification number.

Active: ☒

Is Physician: ☐

Is Dispenser: ☐

Can Schedule: ☒

Case Note Author: ☐

Can Be Sent To: ☒

Billing Setup

Billable Service Provider:

Effective Date:

N5:

NPI:

Set Up Insurance Providers

Add the insurance companies that your provider bills. You can also turn insurers on or off and enter the billing information used in claim files.

Step 1. Select Insurance Provider Setup.

Third Party Billing

General Settings

Third Party Billing is turned on. Service Unit ca

Insurance Provider Setup

Manage insurance providers for billing

Step 2. Select Add.

Step 3. Complete the form.

Save Cancel

Billing Insurer Setup

Active: ☒

Insurer Name:

CAREWare Insurance Category *: 

Suite #:

Street:

City:

State *: 

ZIP:

N5 (Provider Code):

NPI (National Provider Identifier):

Payer ID:

Insurer Initials:

Use Secondary ID: ☐

Use Agency ID: ☐

Use NPIs: ☒

Step 4. Select Save.

Save

Cancel

Billing Insurer Setup

Active: ☒

Insurer Name:

CAREWare Insurance Category *: 

Suite #:

Street:

City:

State *: 

ZIP:

N5 (Provider Code):

NPI (National Provider Identifier):

Payer ID:

Insurer Initials:

Use Secondary ID: ☐

Use Agency ID: ☐

Use NPIs: ☒

Important: An insurer must be active before it can be added to a client Insurance Assessment. CAREWare builds the Insurance Category list from the options set under Insurance Setup in Central Administration.

Important: Enter the insurer address and billing identifiers carefully. Use Billing Secondary ID when a second provider ID is required. Use Primary and Billing Secondary ID Are Identical only when both values are the same. Primary Diagnosis Date is the date the diagnosis was confirmed; if the exact date is not known, January 1 of the year may be used.

Important: After the insurer is active, add it to the client record through an Insurance Assessment. A client must have the insurer on an assessment before a billable service can be added to a claim.

Set Up Billable Services

Important: Choose which subservices can be billed. You can connect each billable subservice to a CPT code, diagnosis code, modifier, and maximum number of units.

Step 1. Select Billable Service Setup.

Third Party Billing

Insurance Provider Setup

Manage insurance providers for billing

Billable Service Setup

Manage billable services

Claims Data Sets

Step 2. Select a subservice to highlight it.

Activate Deactivate Activate All Deactivate All

Billable Service Setup

Search:

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Active	Name	Diagnosis Code
Yes	301 PA/NP Visit	B20
Yes	A/O Medical Care	B20

NOTE

This list comes from Subservice Manager under Service/Contract Setup.

Step 3. Select Edit Service.

Activate Deactivate Activate All Deactivate All Edit Service Back Print or Export Column visibility

Billable Service Setup

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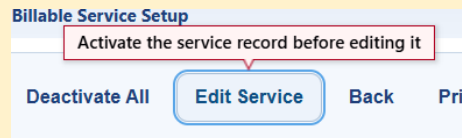
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Active	Name	Diagnosis Code	CPT Code	Modifier
Yes	301 PA/NP Visit	B20	T1016	U9

Important: The service must be active before you can edit it.



Billable Service Setup Menu Options

Button	What it does
Activate	Activate the selected service.
Deactivate	Deactivate the selected service.
Activate All	Activate all services.
Deactivate All	Deactivate all services.
Edit Service	Edit the selected service.
Back	Return to the Third Party Billing menu.
Print or Export	Print or export the list of services.
Column Visibility	Show or hide columns in the list of services.

Step 4. Complete the form.

[Save](#) [Cancel](#)

Billable Service Setup

Subservice: 301 PA/NP Visit

Diagnosis Code: B20

CPT Code: T1016

Modifier: U9

Max. Units *: 32

Important Use the client primary diagnosis ICD-10 code in Diagnosis Code. Enter the billing code in CPT Code. A modifier gives more detail about the service. For example, XS means the service was provided at a separate location. Maximum Units sets the most units allowed in one service record.

Step 5. Select Save.

Save

Cancel

Billable Service Setup

Subservice:

301 PA/NP Visit

Diagnosis Code:

B20

CPT Code:

T1016

Modifier:

U9

Max. Units *:

32

Important When the setup is complete, adding the service to an eligible client creates claim data. CAREWare can use that data to create HCFA 1500 reports and 837p files.

Create a Claims Data Set

Important: A claims data set collects billable services for a selected date range. You can also limit it to selected insurers or case managers.

Step 1. Select Claims Data Sets.

Third Party Billing

General Settings

Third Party Billing is turned on. Service Unit

Insurance Provider Setup

Manage insurance providers for billing

Billable Service Setup

Manage billable services

Claims Data Sets

Create or work with existing billing claim da

Step 2. Select Create New Claim.

Manage Claim

Create New Claim

Delete

Back

Print or Export

Column visibility ▾

Billing Claims

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 entries

Agency	Name	Date Created	Begin Date
Kevin's Clinic	Example Claim	10/07/2024	09/01/2024
Kevin's Clinic	Test	12/04/2023	12/01/2023

Billing Claims Menu Options

Button	What it does
Manage Claim	Manage an existing claim.
Create New Claim	Create a new claim.
Delete	Delete an existing claim.
Back	Return to the Third Party Billing menu.
Print or Export	Print or export the list of claims.
Column Visibility	Show or hide columns in the list of claims.

Step 3. Complete the form.

[Create Claim](#) [Change Insurers](#) [Change Case Managers](#) [Back](#)

Billing Claims

Claim Period Start Date: 08/01/2026 

Claim Period End Date: 08/31/2026 

Name:

Insurer Filter: No Insurer Filter Applied.

Case Manager Filter: No Case Manager Filter Applied.

Step 4. Select Create Claim.

[Create Claim](#) [Change Insurers](#) [Change Case Managers](#) [Back](#)

Billing Claims

Claim Period Start Date: 08/01/2026 

Claim Period End Date: 08/31/2026 

Name:

Insurer Filter: No Insurer Filter Applied.

Case Manager Filter: No Case Manager Filter Applied.

Billing Claims Menu Options

Button	What it does
Create Claim	Create a new claim.
Change Insurers	Limit the claim to one or more insurers. The list includes active insurers from Insurance Provider Setup.
Change Case Managers	Limit the claim to one or more staff. The list includes staff who appear in the Provided By field. These staff members are set up for billing under Employee Setup .
Back	Return to the Billing Claims list.

Review a Claims Data Set

Important: After CAREWare creates the data set, review the insurance and service information before exporting it. You can then create an HCFA 1500 report or an 837p file.

Step 1. Select the claim to highlight it.

Manage Claim

Create New Claim

Delete

Back

Print or Export

Billing Claims

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Go to Page

Agency	Name	Date Created
Kevin's Clinic	Example Claim	10/07/2024
Kevin's Clinic	Test	12/04/2023

Step 2. Select Manage Claim.

Manage Claim

Create New Claim

Delete

Back

Print or Export

Billing Claims

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Agency	Name	Date Created
Kevin's Clinic	Example Claim	10/07/2024
Kevin's Clinic	Test	12/04/2023

Important: Use Insurance Status Review, Service Data Review, and Remittance Report to check the claim before downloading it.

Example Claim

Insurance Status Review

Create an insurance status review report based on the claims data set

Service Data Review

Review and manage the service data included in the claims data set

Remittance Report

View the remittance report for the claims data set

Create and download 837p files

Create and download a zip file containing electronic billing records

Create and download test 837p files

Create and download a zip file containing electronic billing records for testing

HCFA 1500 Report

View the HCFA 1500 report for the claims data set

Insurance Status Review

This page lists each Insurance Assessment for clients in the claim. Check that all required insurance fields are complete and correct.

Insurance Status Review

Search: << < 1 > >> Go to page entries per page Showing 1 to 1 of 1 entry

Last Name	First Name	Case Manager	Insurer	Effective Date	Recipient ID	Date of Birth	Units	HIV Diaq. Date
Testbeginning	William	Gredlewist, Folsbogen	Billing Insurer	10/07/2024	1	04/02/1990 12:00 PM	8	01/01/2013

Service Data Review

This page lists each service in the claim. Check that all required service fields are complete and correct.

Service Data Review

Search: << < 1 > >> Go to page entries per page Showing 1 to 1 of 1 entry

Selected	First Name	Last Name	Service Name	CPT Code	Service Date	Case Manager	Units	Insurer
Yes	William	Testbeginning	Dental	T1016	10/07/2024	Gredlewist, Folsbogen	8	Billing Insurer

NOTE

Records marked Yes in the Selected column are included in the export. To remove a service from the billing file, select the service and then select Change Selection.

Remittance Report

This report lists the clients in the claim, their insurers, service dates, and the total cost of each billed service.

Remittance Report

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Client	Insurer	Qty	Service Date	CPTCode/Modifier	Amount
Testbeginning, William	Billing Insurer	8	10/07/2024	T1016/U9	97.84

Export the Claim

After you review the records, choose the export that matches your billing process.

Example Claim

Insurance Status Review

Create an insurance status review report based on the claims data

Service Data Review

Review and manage the service data included in the claims data set

Remittance Report

View the remittance report for the claims data set

Create and download 837p files

Create and download a zip file containing electronic billing record

Create and download test 837p files

Create and download a zip file containing electronic billing record

HCFA 1500 Report

View the HCFA 1500 report for the claims data set

Button	What it does
Create and Download 837p Files	Creates the 837p file used for billing submission.
Create and Download Test 837p Files	Creates a test 837p file so you can test the process without submitting a claim.
HCFA 1500 Report	Creates the HCFA 1500 report used for billing submission.
CMS.gov	Provides more information about the 837p file and HCFA 1500 report.

How to Confirm It Worked

- Third Party Billing shows as active under General Settings.
- The insurer appears in the client Insurance Assessment.
- The billable service appears in the claims data set.
- Insurance Status Review and Service Data Review show complete and correct information.
- CAREWare creates the selected 837p file or HCFA 1500 report.

Troubleshooting and Common Questions

Why does a staff member not appear in Provided By?

Open Employee Setup. Make sure the staff member is entered as an employee, is active, and is checked for Third Party Billing.

Why can I not edit a billable service?

The service may be inactive. Highlight it, select Activate, and then select Edit Service.

Why is a service missing from a claim?

Check that Third Party Billing is active, the insurer is active for the provider and client, the service is set up as billable, and the service date is inside the claim date range.

Related References

Document	Use it for
Employee Setup	Setup employees for billing.
CMS.gov	Use for current information about HCFA 1500 reports and 837p claim files.