ESDS BILLING GUIDE FOR EXTERNAL PROVIDERS

UPDATED 05/07/2026 - NORTH BEACHES EARLY STEPS (NBES)

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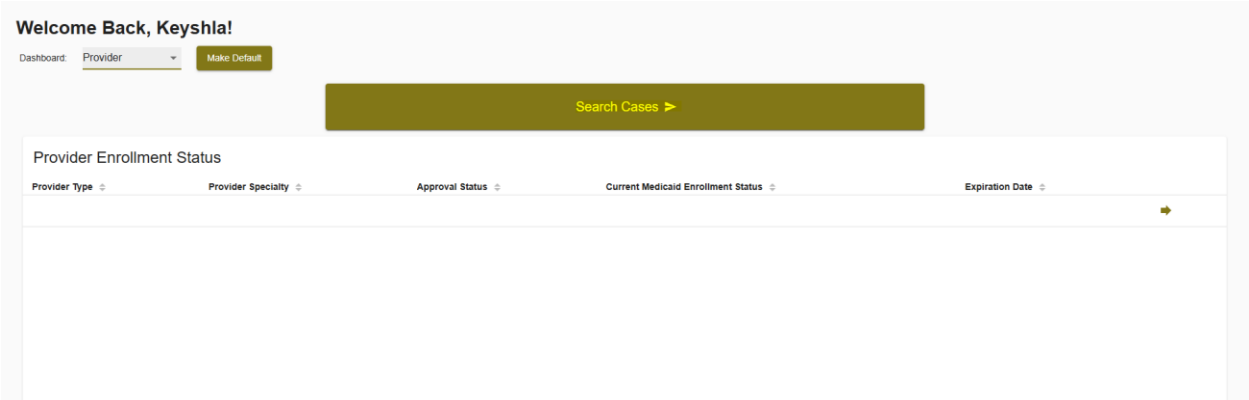
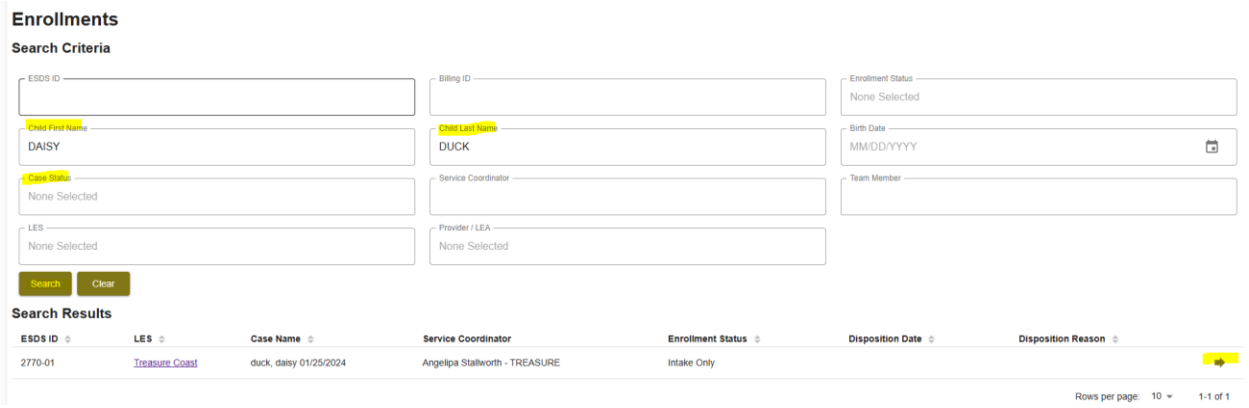
NOTE: Treasure Coast Early Steps (TCES) used in all examples.
Process is the same for all LES programs!

BILLING GUIDE STEP BY STEP

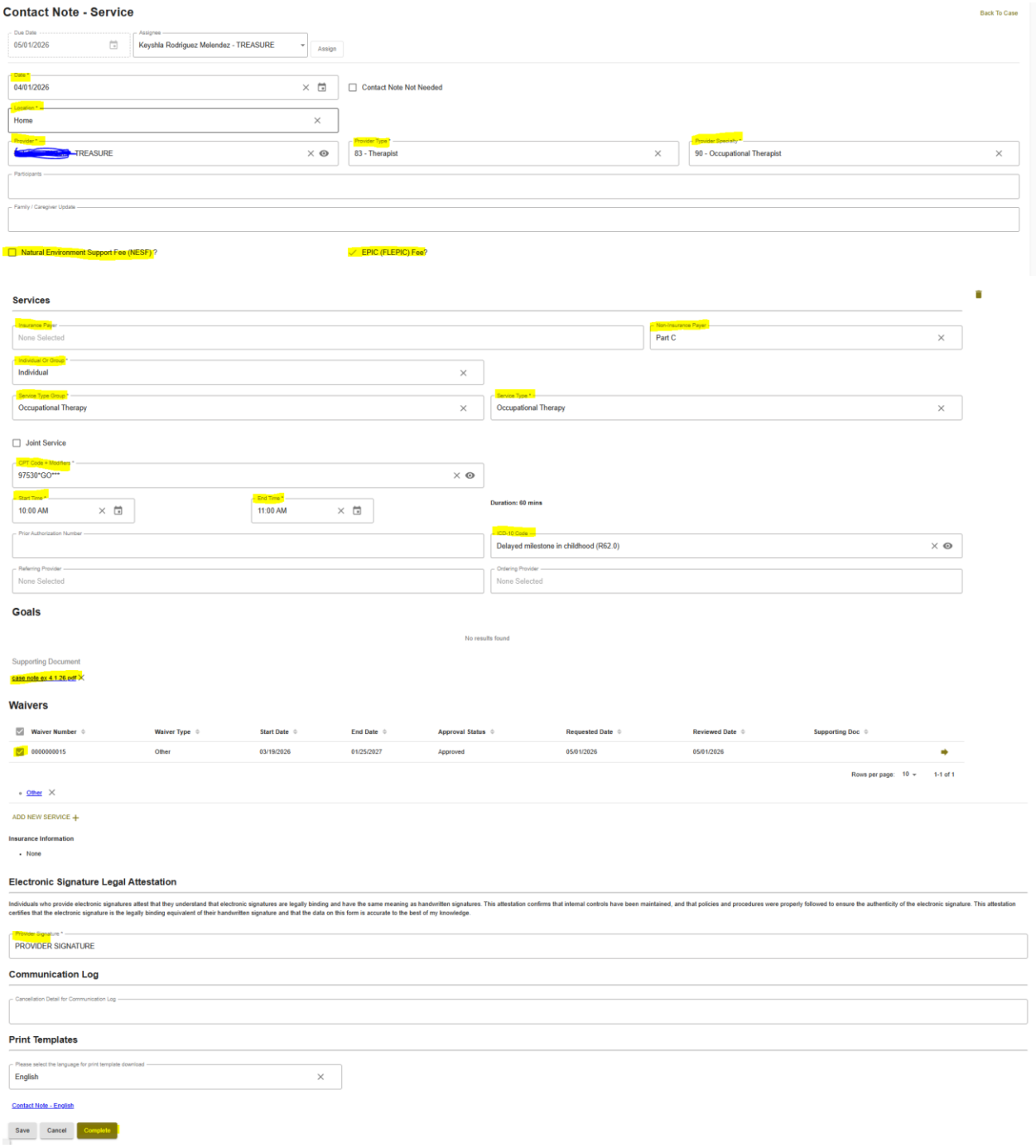
1. On your dashboard locate “SEARCH CASES”



2. Search for child by name or date of birth. Make sure to have the Case Status empty and not “Active” to see all of your kids not just those that haven’t aged out—if you cannot locate the child after removing this then email Laura Restrepo with a list of those kids that are not showing up for you, she can make sure they have been assigned to you.

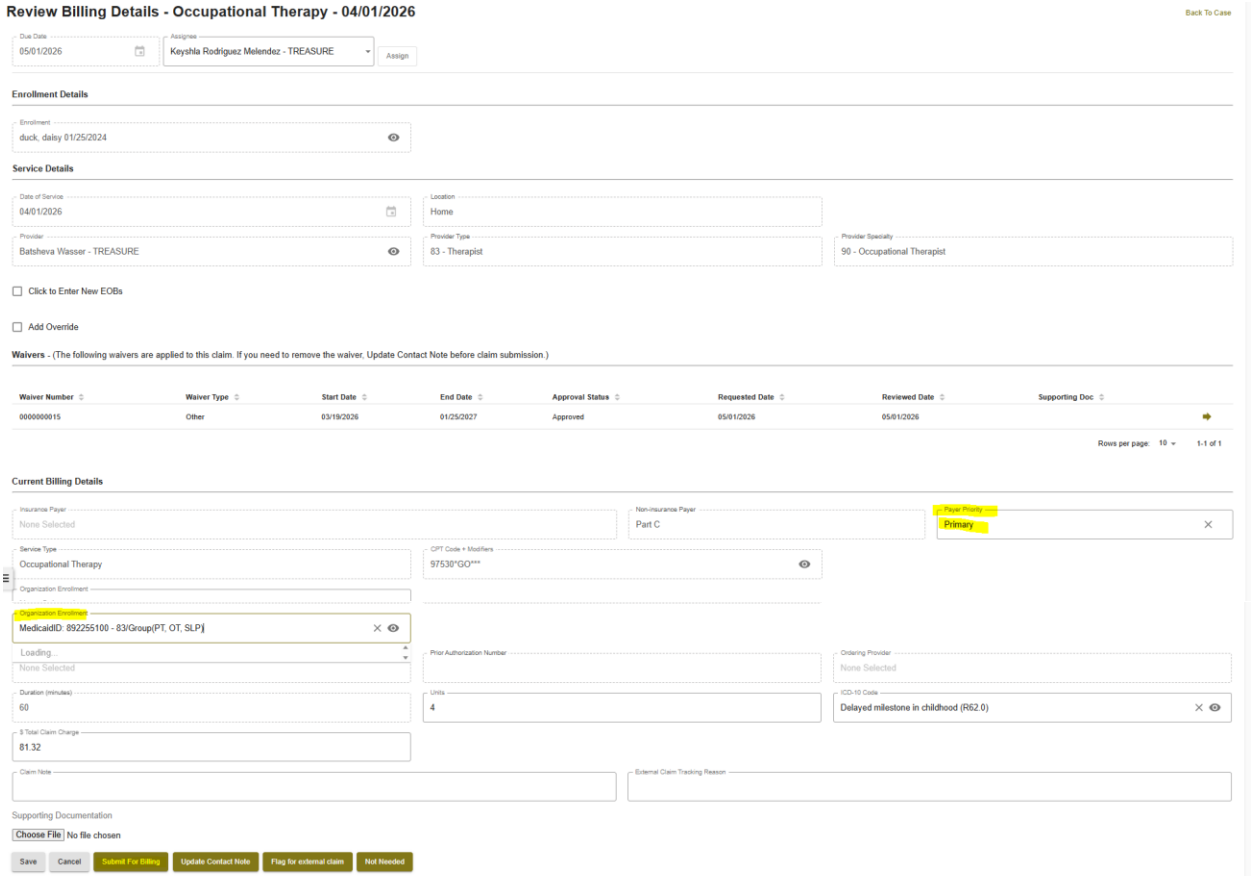


3. Fill out contact note with the highlighted below. Make sure to check mark NESF or EPIC, whichever is applicable to you. Make sure to upload your contact note to the claim. If you have part c approval for some reason (not on panel, insurance not accepted, etc.) you will see there is a waiver check box you can mark. These will normally say the provider's name with the date range in question. This waiver lets us know you have auth for part c billing and not the insurance the child has on file.



4. Once all the highlighted fields have been filled out you will hit complete

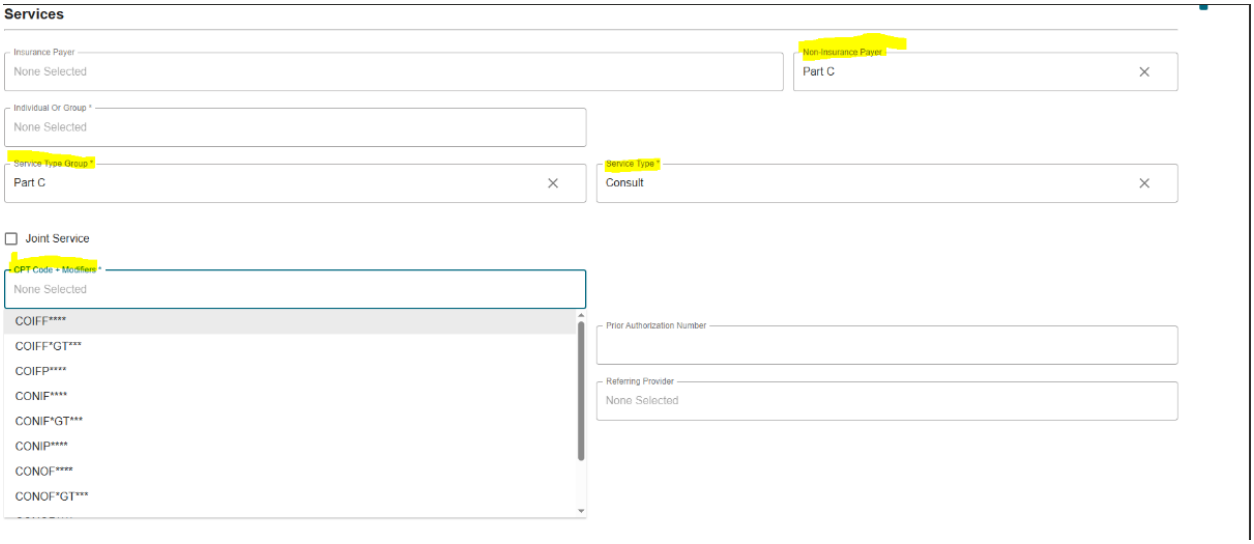
5. Once you hit complete the page will refresh and, on this screen, you will need to select the payer priority to primary, your Medicaid ID and then hit submit for billing



6. Once this is submitted the status will reflect “Pending Biller Review”—this means it has moved to your Claims Biller dashboard and needs to have a final review and submitted by you to part c for processing. Please see Claims Biller Dashboard Guide for those next steps.

COIFFS/CONSULTS/EXITS

1. You would follow the same steps as above to locate the child and create a contact note. You would fill out all the info required and select the options below to see the options for these types of services.



2. Once filled out you will follow the same steps to submit for billing and to pending biller review.

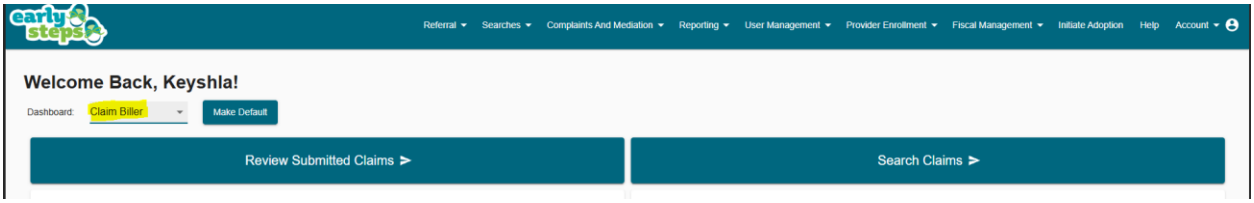
CLAIMS BILLER DASHBOARD

Providers will be assigned the claims biller role so that you may review you claims submit them to part c for payment.

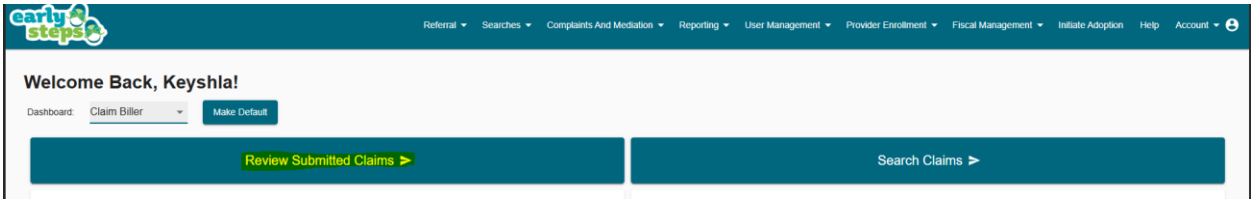
Once you have completed the steps of creating a claim and hit submit to billing the claims will appear on this dashboard for a final review from the provider. In this section you as a provider will be able to double check that a claim was submitted twice and that the payer is correct. This section will show you the therapies, coifs, consults, exits, nesf and epic fees for review.

Steps:

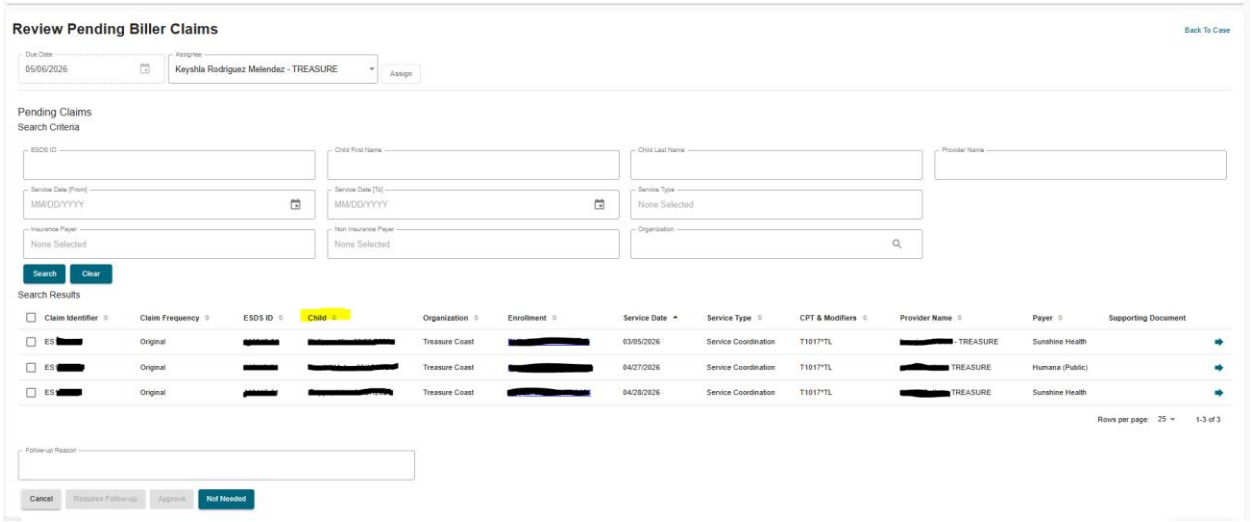
1. Locate Claim Biller dashboard



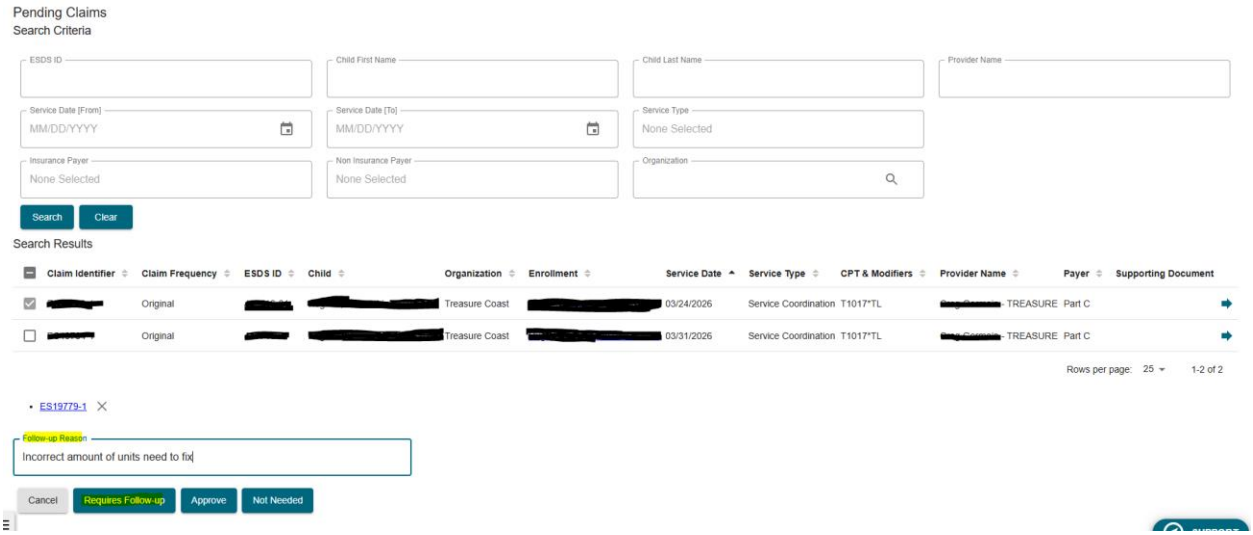
2. Select the blue tile “Review Submitted Claims”



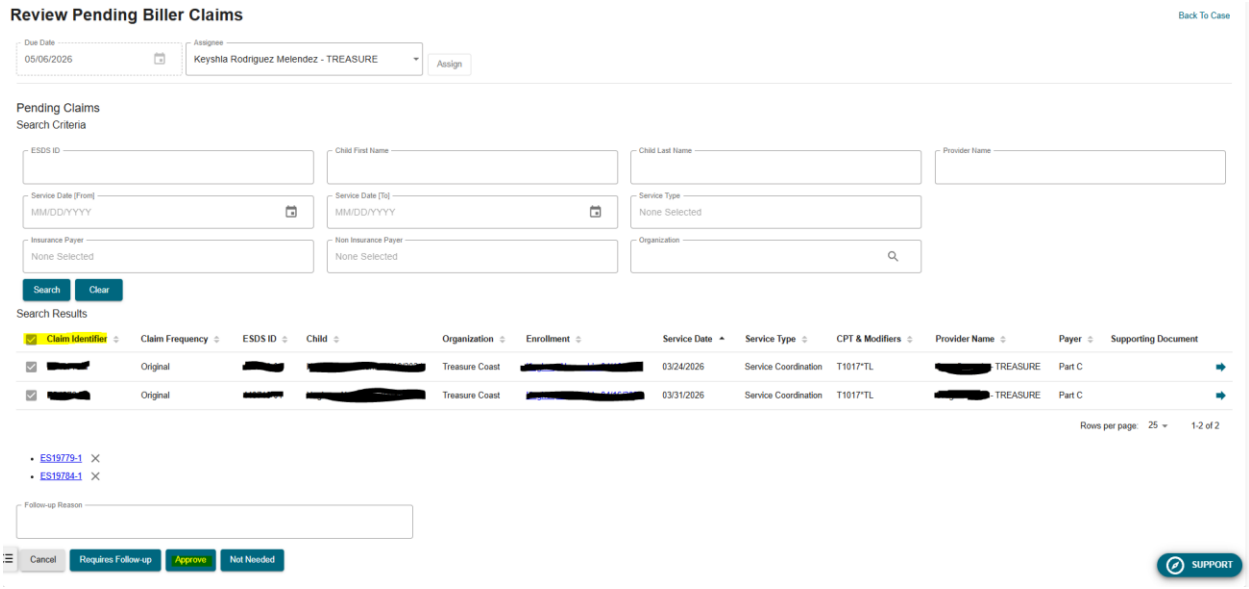
3. Once you have the claims window open it will populate all the claims you have submitted to billing. If a claim is not on here you may have not hit sumbit to billing and need to locate it in the tasks summary for the child in question. On this screen you can sort the claims by name so that you can review all services rendered are listed here. All claims will populate regardless of payer is being billed through ESDS with the exception of travel vouchers as that comes to billing once you finish creating it.



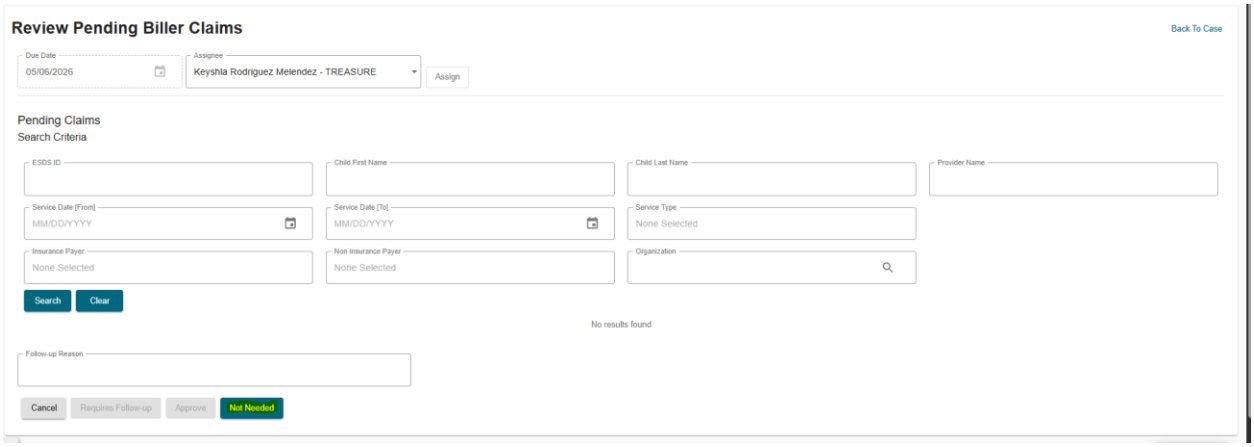
4. If you realize you have a claim that needs correcting you can select the box on that claim and select the tile that says requires follow up. Ex: a duplicate claim you need to void or a claim you selected the wrong payer or information needs to be updated. This action will send the claim to your claims dashbioard for you to follow up on it. Leave a note that will help you remember why you sent it back to yoursef for review.



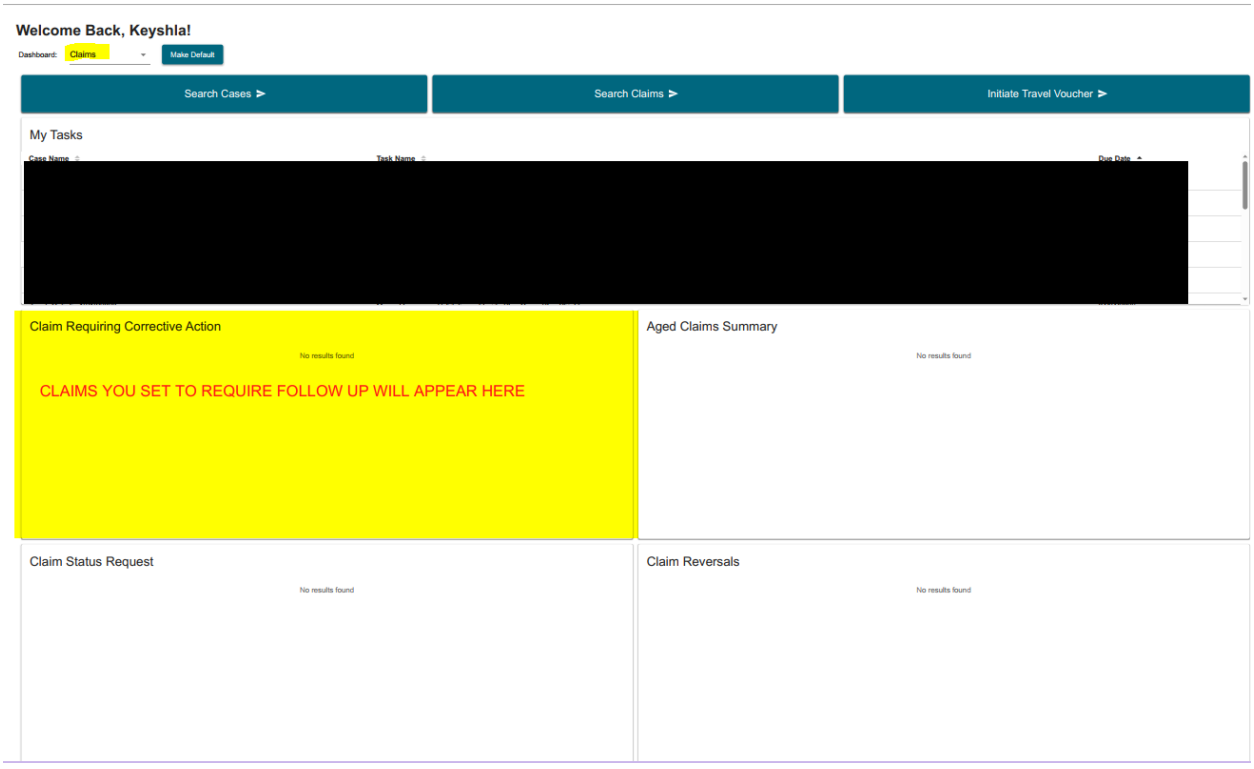
5. Once you have reviewed all your claims you can select the check box at the top next to claim identifier to select all the claims. To submit to part c you will hit the blue tile that says “approve” after this is complete the claims will be push to the billing department to issue payment.



6. Once all claims have been approved hit the blue tile “Not needed” to close out the Review Pending Biller Claims tasks until you need to repeat the process for new claims. This action will take you back to your dashboard.

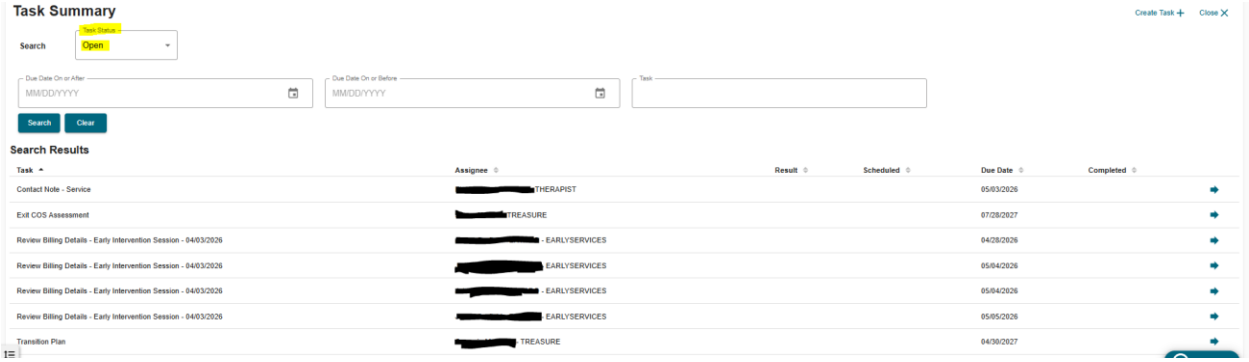


7. To locate your claims you set for follow up you will need to locate the Claims dashboard. They will be the highlighted area below. If you have a duplicate claim that you need to delete you would select the claim in that area and select create void claim this will delete the claim.

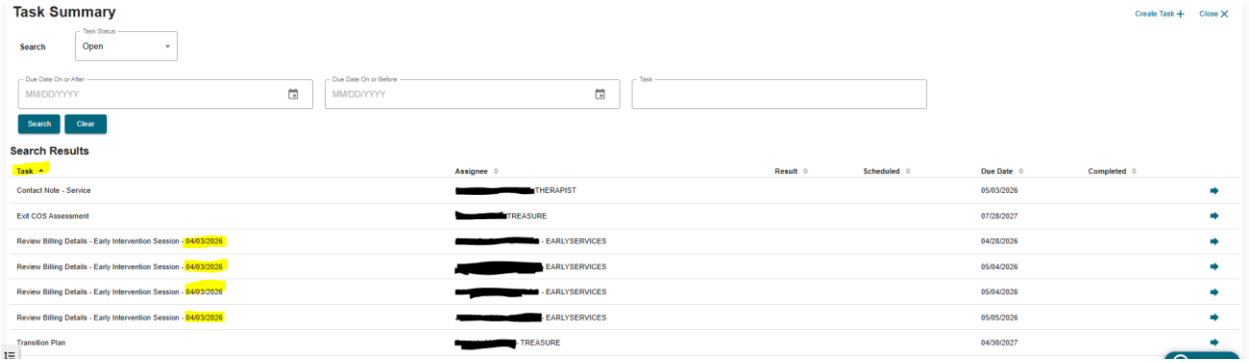


UNIT LIMIT EXCEEDED ERROR GUIDE

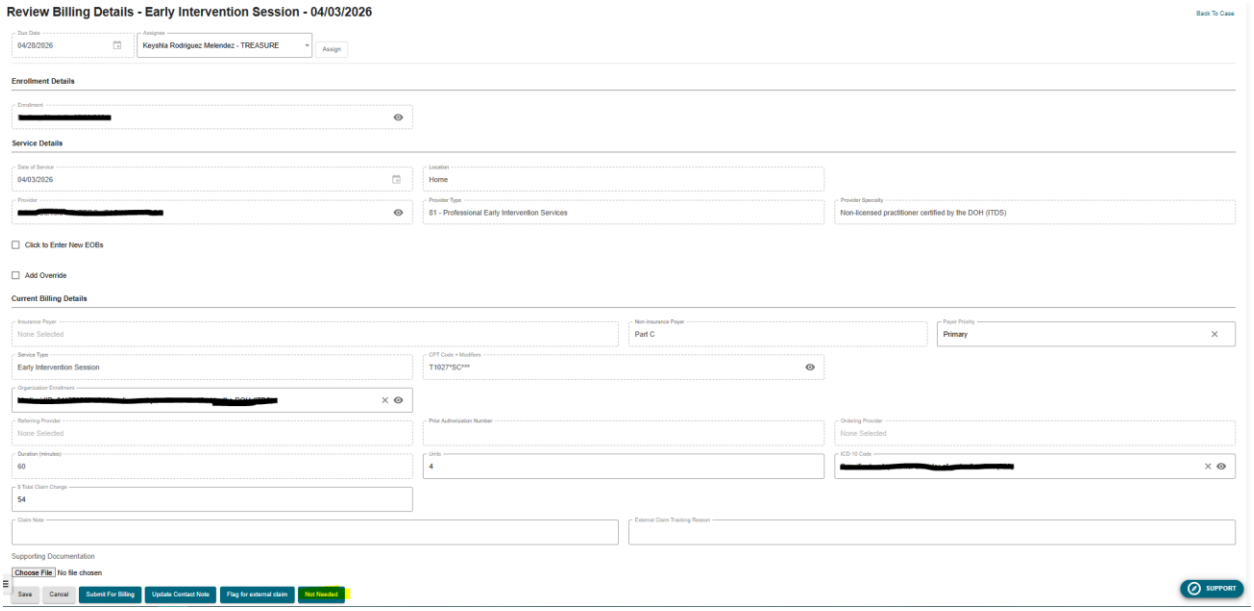
1. Locate Enrollment Search->Click search to bring up your caseload->Locate child with unit error message
2. On case screen you will see Task Summary. Please make sure the highlighted below is set to "OPEN" so that it just shows you opened claims for the child



3. If you sort the Tasks by hitting the little error, it will put the tasks in alphabetical order making it easier to view duplicate entries. In the example below you will see that this child has 4 different contact notes for 1 date of service.



4. You need to close out all of the extra notes leaving only 1 to actually submit to billing. To close out a claim you will click on the blue arrow on the far right to open one of the claims. Once you open the claim you will scroll down to the bottom and you will see the blue tiles. To “delete” a claim you must hit “NOT NEEDED” do not hit the cancel button when you are billing since this will not actually delete the claim and will cause you issues.



5. If you hit cancel instead of “not needed” the system will not allow you to submit the claim. Please email the billing department to have it reviewed.