XIII. FEE SCHEDULE

Following are the eligible services and contraceptive methods to be utilized when charging Family Planning clients. See section XIV below for a full description of these service codes.

Service		Pero	centage of	Fee Charge)	
Code	Service Description	A - 100%	B - 75%	C - 50%	D - 25%	E - 0%
100	Initial, Annual, or Extended Counseling PostpartumVisit – No Method Fee: No charge for method if it includes clients with existing IUDs or Implants, abstinence, natural/rhythm method, spermicides, condoms, no method, or seeking pregnancy.	\$156	\$117	\$78	\$39	\$0
101	Initial, Annual, or Extended Counseling PostpartumVisit - Plus Method Fee: Methods:			es below in ed on the pa		_
П	A. OCs: \$7/monthly pack. Additional	\$163 includes 1 pack	\$122 includes 1 pack	\$82 includes 1 pack	\$41 includes 1 pack	\$0 includes 1 pack
	D. Injection: \$2/injection	\$158	\$119	\$79	\$40	\$0
	E. Patch: \$22/monthly cycle. Additional cycles of patches must be added to the total gross charge. See "Visit Charging Guide" for additional rates.	\$178 includes 1 cycle of patches	\$134 includes 1 cycle of patches	\$89 includes 1 cycle of patches	\$45 includes 1 cycle of patches	s0 includes 1 cycle of patches
	F. Vaginal Ring: \$15/monthly cycle. Additional cycles of rings must be added to the total gross charge. See "Visit Charging Guide" for additional rates.	\$171 includes 1 cycle of rings	cycle of rings	cycle of rings	\$43 includes 1 cycle of rings	\$0 includes 1 cycle of rings
	G. Diaphragm/Jelly: \$28	\$184	\$138	\$92	\$46	\$0
	I. Paragard IUD (when inserted onsite by trained HD staff): \$200	\$356	\$267	\$178	\$89	\$0
	J. Mirena IUD (when inserted onsite by trained HD staff): \$376	\$532	\$399	\$266	\$133	\$0
	K. Implanon (when inserted onsite by trained HD staff): \$285	\$441	\$331	\$221	\$110	\$0

Service			Percent	age of Fee	Charge			
Code	Service Description	A - 100%	B - 75%	C - 50%	D - 25%	E - 0%		
102	Periodic Revisit or Deferred Physical Visit – <u>No</u> Method Fee:	\$67	\$50	\$34	\$17	\$0		
	No charge for method if it includes clients with existing IUDs or Implants, abstinence, natural/rhythm method, spermicides, condoms, no method issued, or seeking							
103	Periodic Revisit or Deferred Physical Visit - Plus Method Fee:	The discounted rates below include the visit <u>plus</u> method based on the pay category.						
	Methods:	Φ.7.4	Φ.7. σ	Φ27	010	Φ0		
	A. OCs: \$7/monthly pack. Additional packs of OCs must be added to the total gross charge.	_	\$56 includes 1 pack	\$37 includes 1 pack	\$19 includes 1	\$0 includes 1 pack		
	See "Visit Charging Guide" for additional rates.	,			pack			
	D. Injection: \$2/injection	\$69	\$52	\$35	\$17	\$0		
ı	E. Patch: \$22/monthly cycle, Additional cycles of patches must be added to the total gross charge. See "Visit Charging Guide" for additional rates.	cycle of	\$67 includes 1 cycle of patches	\$45 includes 1 cycle of patches	\$22 includes 1 cycle of patches	\$0 includes 1 cycle of patches		
L	F. Vaginal Ring: \$15/monthly cycle. Additional cycles of rings must be added to the total gross charge. See "Visit Charging Guide" for additional rates.	\$82 includes 1 cycle of rings	\$62 includes 1 cycle of rings	\$41 includes 1 cycle of rings	\$21 includes 1 cycle of rings	\$0 includes 1 cycle of rings		
	G. Diaphragm/Jelly: \$28	\$95	\$71	\$48	\$24	\$0		
	I. Paragard IUD (when inserted onsite by trained HD staff): \$200	\$267	\$200	\$134	\$67	\$0		
	J. Mirena IUD (when inserted onsite by trained HD staff): \$376	\$443	\$332	\$222	\$111	\$0		
	K. Implanon (when inserted onsite by trained HD staff): \$285	\$352	\$264	\$176	\$88	\$0		
104	GYN Problem/Lab/Counseling Visit	\$33	\$25	\$17	\$8	\$0		
105	 BP recheck/Repeat Pap smear: BP recheck visit(s) to rule out hypertension Repeat Pap smear due to technical problems (i.e., unsatisfactory or No ECC result; specimen lost or broken) 		\$0	\$0	\$0	\$0		
106O	*Implant/IUD Removal Fee	\$75	\$56	\$38	\$19	\$0		
107	Pregnancy Test Only Service (regardless of result)	\$11	\$8	\$6	\$3	\$0		

* Requires a separate receipt when provided with other service codes on the same date of service.

NOTE: For examples of circumstances when fees can be waived, see description of "Good Cause", earlier this section.

If a client has been referred to a <u>contracted provider</u> for one of the following methods, utilizing approved Title X funds, the client is to be charged and billed as appropriate upon completion of the procedure. The clinic is to follow-up to confirm that the procedure was performed and document this in the patient's medical record. In the interim pending the procedure, the client is to be charged for all services/methods provided.

		A - 100%	B - 75%	C - 50%	D - 25%	E - 0%
106I	Paragard IUD (when inserted by contracted provider; includes device and insertion fee)	\$275	\$206	\$138	\$69	\$0
106J	Mirena IUD (when inserted by contracted provider; includes device <u>and</u> insertion fee)	\$451	\$338	\$226	\$113	\$0
_106L	Female Sterilization	\$1000	\$750	\$500	\$250	\$0
106M	Male Sterilization	\$300	\$225	\$150	\$75	\$0

XIV. SERVICE CODE DESCRIPTIONS

Following are descriptions of the Family Planning service codes utilized when charging clients.

In most cases, a single service code will be utilized; however, there are exceptions when two are needed. Examples: 1) Client received an IUD removal, then a Depo-Provera injection on the same day. In this case, Service Codes 103D and 106O are utilized. This would result in the issuance of two receipts on the same day. 2) Client receives Depo injection on the date of service when she signed consent for a sterilization procedure and received referral. She is to be charged for the visit and Depo injection in the usual manner, then subsequently charged/billed for the sterilization procedure upon completion, resulting in two receipts on different dates of service. In this case, Service Codes 103D and 106L are utilized.

A. SERVICE CODE 100 – INITIAL, ANNUAL, EXTENDED COUNSELING POSTPARTUM VISIT: NO METHOD FEE.

An in-depth evaluation of a new or established client requiring the establishment or update of medical records, comprehensive history, complete physical examination, appropriate diagnostic laboratory tests and procedures, family planning counseling using PT+3 teaching methodology and contraceptive method as indicated per protocol.

Fees charged to the client include the visit; there is no separate fee for the method if it includes abstinence, natural/rhythm method, spermicides, condoms, no method issued, or seeking pregnancy. See fee schedule for current visit rate.

B. SERVICE CODE 101 – INITIAL, ANNUAL, EXTENDED COUNSELING POSTPARTUM VISIT: PLUS METHOD FEE.

An in-depth evaluation of a new or established client requiring the establishment or update of medical records, comprehensive history, complete physical examination, appropriate diagnostic laboratory tests and procedures, family planning counseling using PT+3 teaching method and contraceptive method as indicated per protocol.

Fees charged to the client include the visit <u>plus</u> the method if it includes OCs, injection, patch, vaginal ring, Implant, Mirena IUD, Paragard IUD, or Diaphragm with spermicide jelly. See fee schedule for current visit with method rates.

C. SERVICE CODE 102 – PERIODIC REVISIT OR DEFERRED PHYSICAL VISIT: NO METHOD FEE.

A brief evaluation of a new or established client with a new or existing family planning condition; reasons include but are not limited to: contraceptive changes, issuance/ administration of supplies, or contraceptive problems (e.g. breakthrough bleeding or the need for additional guidance); OR

A visit to defer the physical examination and labwork for Initial, Annual or postpartum clients based on program protocol.

Fees charged to the client include the visit; there is no separate fee for the method if it includes abstinence, natural/rhythm method, spermicides, condoms, no method issued, or seeking pregnancy. See fee schedule for current visit rate.

D. SERVICE CODE 103 - PERIODIC REVISIT OR DEFERRED PHYSICAL VISIT: <u>PLUS</u> METHOD FEE.

- 1. A brief evaluation of a new or established client with a new or existing family planning condition; reasons include but are not limited to: contraceptive changes, issuance/ administration of supplies, or contraceptive problems (e.g. breakthrough bleeding or the need for additional guidance); OR
- 2. A visit to defer the physical examination and labwork for Initial, Annual or postpartum clients based on program protocol.

Fees charged to the client include the visit <u>plus</u> the method if it includes OCs, injection, patch, vaginal ring, Implant, Mirena IUD, Paragard IUD, or Diaphragm with spermicide jelly. See fee schedule for current visit <u>plus</u> method rates.

E. SERVICE CODE 104 – GYN PROBLEM/LAB/COUNSELING VISIT

Brief visit for services which may include but are not limited to: Assessment of breast problem, repeat lab visit (repeat Pap smear; Hgb, etc.), counseling only visit, etc.

F. SERVICE CODE 105 – BP RECHECK/REPEAT PAP SMEAR DUE TO TECHNICAL REASONS

Brief visit for the following scenarios:

- 1. Occasional case where a client has a newly identified elevated blood pressure reading and must return no sooner than 6 hours for a repeat reading to rule out hypertension. This may occur a second time if a tie-breaker BP reading is indicated. NOTE: This visit does not involve those clients who are already diagnosed with hypertension, and receive quarterly BP monitoring prior to issuance of contraceptive.
- 2. Repeat Pap smear due to technical problems (i.e., unsatisfactory or No ECC result; specimen lost or broken).

These visits are coded as a "GYN Problem/Lab/Couns" visit in PHALCON.

G. SERVICE CODE 1061 - IUD/PARAGARD BY CONTRACT PROVIDER

Includes charges for clients who have been referred to a Title X contracted provider for the insertion of a Paragard IUD. The fee includes the Paragard device and insertion fee. Once it has been confirmed with the provider that the procedure was performed, the client is to be charged/billed utilizing this service code.

H. SERVICE CODE 106J – IUD/MIRENA BY CONTRACT PROVIDER

Includes charges for clients who have been referred to a Title X contracted provider for the insertion of a Mirena IUD. The fee includes the Mirena device and insertion fee. Once it has been confirmed with the provider that the procedure was performed, the client is to be charged/billed utilizing this service code.

I. SERVICE CODE 106L – FEMALE STERILIZATION BY CONTRACT PROVIDER

Includes charges for clients who have been referred to a Title X contracted provider for a female sterilization procedure. The fee includes all procedures utilized to perform the sterilization. Once it has been confirmed with the provider that the procedure was performed, the female client is to be charged/billed utilizing this service code.

J. SERVICE CODE 106M - MALE STERILIZATIONBY CONTRACT PROVIDER

Includes charges for clients who have been referred to a Title X contracted provider for a male sterilization procedure. The fee includes all procedures utilized to perform the sterilization. Once it has been confirmed with the provider that the procedure was performed, the male client is to be charged/billed utilizing this service code.

K. SERVICE CODE 1060 IMPLANT/IUD REMOVAL FEE

Services include Implant or IUD removal procedures performed by a trained MD or Nurse Practitioner. This code is used in conjunction with other service codes on the same date of service.

L. SERVICE CODE 107 – PREGNANCY TEST ONLY SERVICE

Services include a pregnancy test only (regardless of result) with counseling and referral as appropriate. This visit is coded as a "GYN Problem/Lab/Couns" visit in PHALCON.

Visit Charging Guide Percentage of Fee Charge – Category A 100%

Initial/Annual/Extended PP Couns Visit/With Method:

Monthly cycles

							Monuny	Cycles							
Service Code	Method	1	2	3	4	5	6	7	8	9	10	11	12	13	14
101A	OCs	\$163	\$170	\$177	\$184	\$191	\$198	\$205	\$212	\$219	\$226	\$233	\$240	\$247	\$254
101D	Injection	\$158													
101E	Patch	\$178	\$200	\$222	\$244										
101F	Vaginal Ring	\$171	\$186	\$201	\$216										
101G	Diaphragm/Jelly	\$184													
101I	Paragard IUD	\$356													
101J	Mirena IUD	\$532													
101K	Implanon	\$441													

Periodic Revisit/Deferred Physical Visit/With Method:

Monthly cycles

			Widness Cycles												
Service	Method	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Code															
103A	OCs	\$74	\$81	\$88	\$95	\$102	\$109	\$116	\$123	\$130	\$137	\$144	\$151	\$158	\$165
103D	Injection	\$69													
103E	Patch	\$89	\$111	\$133	\$155										
103F	Vaginal Ring	\$82	\$97	\$112	\$127										
103G	Diaphragm/Jelly	\$95													
103I	Paragard IUD	\$267													
103J	Mirena IUD	\$443													
103K	Implanon	\$352													

CHARGING PROCEDURE FOR FAMILY PLANNING: Assess client for Medicaid eligibility. Clients not eligible for Medicaid are charged based on their annual income assessment for services and methods as outlined in the Fee Schedule.

Family Planning Fee Management e-Day Sheet Update 08/17/2009

e-Day Sheets and Monthly Recaps

- Main Menu:
- Generate Receipt (F1)
- Patient/Client Records
- Lookup Receipt
- Void Receipt
- Return Check
- Defaults Menu (F2)
- Report Menu (F5)
- Finance Reports
- Exit (F11)



Version: 1.5

SiteName Your Clinic This package contains instructions for updating the eDay Sheet for the Family Planning fee, contraceptive code, and visit code changes. These instructions CANNOT be performed until the last Family Planning receipt is issued on August 31, 2009.

These changes go into effect September 1, 2009.

All changes listed in this package must be made BEFORE Family Planning receipts can be issued on September 1, 2009.

The changes must be made by the Office Manager using the Office Manger User Id and Password. Remember DO NOT share passwords!

Each clinic will be updating their own category codes, descriptions, and fee codes because the Family Planning information is consistent from county to county, the other service codes may not be consistent. Pushing out these changes from central office would override county specific updates to the other service codes.

Family Planning receipts CANNOT be issued while these changes are being made. Other receipts may be issued while the Office Manager is making these changes.

As soon as the Office Manager determines when they will be making these changes please let me know via email. The changes can be made either after all Family Planning receipts have been issued on August 31, 2009 or before any Family Planning receipts are issued on September 1, 2009. I need to know so I can arrange to be available for support.

Please review this package and become familiar with the contents. If you have questions while you are reviewing the material please call or email me.

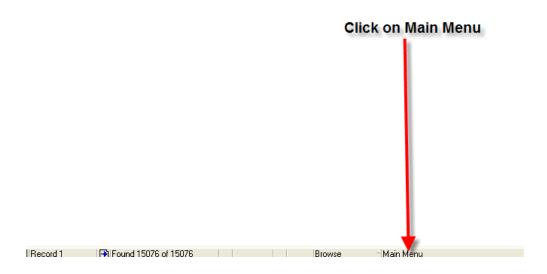
Randy Tatum 334 206-5735 randy.tatum@adph.state.al.us

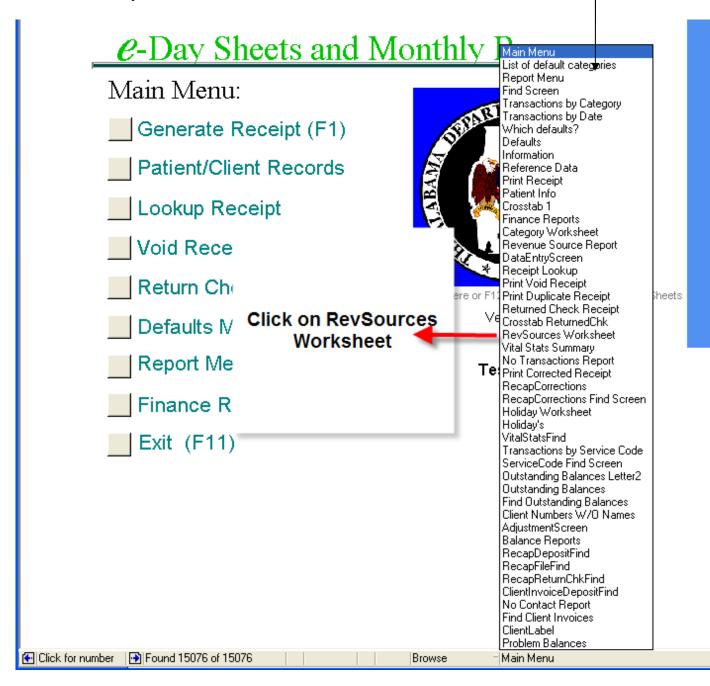
Effective 09/01/2009, there will NO LONGER be a separate Revenue (Recap) Code for Contraceptives

ONE TIME ONLY Updating Revenue Source Code Sign on using the Office Manager User Id and Password

e-Day Sheets and Monthly Recaps

Main Menu: STATUTE OF Generate Receipt (F1) Patient/Client Records Lookup Receipt Void Receipt Return Check Click here or F12 for information about this Day Sheets Version: 1.5 Defaults Menu (F2) SiteName Report Menu (F5) **Test Day Sheet** Finance Reports Exit (F11)





You will receive this screen.

Locate the Revenue Source Code 11

Click on the Category box containing FP

REVENUESOU	REVENUEDES	VALID	CATEGORY	
)1	COUNTY FUNDS		MISC	
05	MISCELLANEOUS		MISC	
08	MATERNITY CARE COORDINATION		MAT	
09	GIFT OF LIFE		MISC	
10	HOME HLTH OTH FEES		MISC	
13	FAM PLAN PT FEES		FP	
14	MEDICAID MATERNITY - FEE SERVI		MAT	
15	MATERNITY PT FEE		MAT	
16	MEDICAID WAIVER-COA		MISC	
18	DONATIONS		MISC	
20	PATIENT FEES DENTAL		DEN	
22	PATIENT FEES CLINIC		oc	
23	IMMUNIZATIONS		IMM	
24	ENVIRONMENT FEE		ENV	
27	MATERNITY OTHER		MAT	
28	MEDICAID DENTAL		DEN	
30	LOCAL SUPPORT		MISC	
31	LOCAL SUPPORT		MISC	
32	LOCAL SUPPORT		MISC	
33	LOCAL SUPPORT		MISC	
34	LOCAL SUPPORT		MISC	
35	LOCAL SUPPORT		MISC	
37	HIV/AIDS WAIVER		MISC	
4A	OPTIONS I		MISC	
40	LOCAL SUPPORT		MISC	
41	CASE MANAGEMENT		MISC	
44	OPTIONS II		MISC	
45	OFFICE VISITS - MEDICAID		MISC	
47	LOCAL SUPPORT		MISC	
50	LOCAL SUPPORT		MISC	
51	LOCAL SUPPORT		MISC	
52	2% Sales Tax receipt		MISC	
53	LOCAL SUPPORT		MISC	
54	LOCAL SUPPORT		MISC	
55	LOCAL SUPPORT		MISC	
56	LOCAL SUPPORT	-	MISC	
58	LOCAL SUPPORT		MISC	
59	LOCAL SUPPORT		MISC	
60	LOCAL SUPPORT		MISC	
61	LOCAL SUPPORT		MISC	
62	LOCAL SUPPORT		MISC	
63	LOCAL SUPPORT		MISC	
63 84	LOCAL SUPPORT			Locate Revenue Source Code 11
65	LOCAL SUPPORT		MISC	Locate Neveride Source Code 11
69	LOCAL SUPPORT	-	MISC	
71	Vital Statistic	-	VS	Click on the Category box
	Family Planning Contraceptive		FP	containing FP
11	r armiy marining contraceptive		<u> </u>	Containing FF

Replace the FP with SPACES ONLY on the Line with 11 in the Revenuesou column

REVENUESOU	REVENUEDES	VALID	CATEGORY
01	COUNTY FUNDS		MISC
05	MISCELLANEOUS		MISC
08	MATERNITY CARE COORDINATION		MAT
09	GIFT OF LIFE		MISC
10	HOME HLTH OTH FEES		MISC
13	FAM PLAN PT FEES		FP FP
14			MAT
	MEDICAID MATERNITY - FEE SERVI		
15	MATERNITY PT FEE		MAT
16	MEDICAID WAIVER-COA		MISC
18	DONATIONS		MISC
20	PATIENT FEES DENTAL		DEN
22	PATIENT FEES CLINIC		OC
23	IMMUNIZATIONS		IMM
24	ENVIRONMENTAL FEE		ENV
27	MATERNITY OTHER		MAT
28	MEDICAID DENTAL		DEN
30	MONTGOMERY		MISC
31	MPHC SUPPORT MONTGOMERY		MISC
32	CITY OF PIKE ROAD		MISC
33	LOCAL SUPPORT		MISC
34	LOCAL SUPPORT		MISC
35	LOCAL SUPPORT		MISC
37	HIV/AIDS WAIVER		MISC
4A	OPTIONS I		MISC
40	LOCAL SUPPORT		MISC
41	CASE MANAGEMENT		MISC
44	OPTIONS II		MISC
45	OFFICE VISITS - MEDICAID		MISC
47	LOCAL SUPPORT		MISC
50			MISC
	LOCAL SUPPORT		
51	LOCAL SUPPORT		MISC
52	LOCAL SUPPORT		MISC
53	LOCAL SUPPORT		MISC
54	LOCAL SUPPORT		MISC
55	LOCAL SUPPORT		MISC
56	LOCAL SUPPORT		MISC
58	LOCAL SUPPORT		MISC
59	LOCAL SUPPORT		MISC
60	LOCAL SUPPORT		MISC
61	LOCAL SUPPORT		MISC
62	MACWC OFFICE MONTGOMERY		MISC
63	SCHOOL NURSE OFFICE MONT		MISC
64	BAPTIST HOSPITAL		MISC
65	JACKSON HOSPITAL		MISC
69	LOCAL SUPPORT		MISC
71	V S FEES 1ST COPY -		VS
38	BIOMONITORING		MISC
			MISC
11	Family Planning Contraceptive		

Press F10 to return to the Main Menu

FAMILY PLANNING CATEGORY UPDATES AND ADDITIONS

Below are Family Planning Service Codes to be deactivated. Visit Rate and Description changes. and New Service Category Codes that need to be added to the Default Category Table in the e-Day Sheet.

THESE MUST BE IMPLEMENTED BEFORE RECEIPTS ARE ISSUED ON 09/01/2009.

Please follow these instructions and enter the information that is in **BOLD**.

FIRST, UPDATE Existing Categories that will NO LONGER BE USED:

Below are the existing categories that will no longer be used when issuing regular receipts.

- Select Defaults Menu (F2) from the Main Menu
- Click on Default Categories

10:	e line should look like the	FP FP	Family Planning-Periodic Revisit	\$182.00 🕶
•	,		T anning t chodic revious	\$102.00 [*
	ess the Delete Key to rem ck on the Default Amount		it to "0 00"	
	ess Enter	and change	11 10 0.00	
	e Line should look like the	e one below		
	Family Planning	FP FP	▼ Family Planning-Periodic Revisit	\$0.00
Locate	Category Code 103			
 Clic 	ck on the Service C code	103.		
• The	e line should look like the	one below.		
. 10:	3 Family Planning	▼ FP	Extended Family Planning Counseling Visit	\$182.00
• Pre	ess the Delete Key to rem	ove the 103		
	ck on the Default Amount		it to "0.00"	
• <u>Pre</u>	ess Enter	_		
• The	E Line should look like the	e one below.		
	Family Planning	▼ FP	Extended Family Planning Counseling Visit	\$0.00
Locate	Category Code 106A			
	ck on the Service C code	106A.		
	e line should look like the			
			Dilla Manthly	ന വ
. 10	6A Family Planning	▼ FP	→ Pills Monthly	\$8.00 -

Locate Category Code 106B

Press Enter

- Click on the Service C code 106B.
- The line should look like the one below.
- 106B Family Planning ▼ Pills Quarterly \$24.00 🔻 ▼ FP

▼ Pills Monthly

Press the Delete Key to remove the 106B

Press the Delete Key to remove the 106A

The Line should look like the one below. Family Planning

Click on the Default Amount and change it to "0.00"

▼ FP

\$0.00 🕶

•	Press Enter The Line should look like the	· ·	וו נט	0.00	
	Family Planning	▼ FP	T	Pills Quarterly	\$0.00 🔻
L •	ocate Category Code 106C Click on the Service C code 1 The line should look like the c				
	106C Family Planning	▼ FP	•	Pills Annual	\$112.00 ▼
•	Press the Delete Key to remo Click on the Default Amount a <u>Press Enter</u> The Line should look like the	and change		"0.00"	
,	Family Planning	▼ FP	~	Pills Annual	\$0.00 🔻
L •	ocate Category Code 106D Click on the Service C code 1 The line should look like the c		~	Injection Contraceptive Quarterly	\$15.00 <u></u>
	Press the Delete Key to remo Click on the Default Amount a <u>Press Enter</u> The Line should look like the	and change			
,	Family Planning	▼ FP	~	Injection Contraceptive Quarterly	\$0.00 -
•	Press the Delete Key to remo Click on the Default Amount a <u>Press Enter</u> The Line should look like the	and change		"0.00"	<u> </u>
	Family Planning	▼ FP	•	Patch Quarterly	\$0.00 🔻
L •	ocate Category Code 106F Click on the Service C code 1 The line should look like the c	ne below.		Ring Quarterly	\$45.00 ▼
			_	King Quarterly	ֆ45.UU <u>▼</u>
•	Press the Delete Key to remo Click on the Default Amount a <u>Press Enter</u> The Line should look like the	and change		"0.00"	
	Family Planning	▼ FP	•	Ring Quarterly	\$0.00 🔻
L • •	Click on the Service C code 1 The line should look like the company of the should look on the Default Amount and should look on the Default Amount and should look on the Service Click on the Service C code 1 The line should look like the code 1 The line sho	one below. FP ove the 1060			\$19.00 <u>~</u>
•					
•	Press Enter The Line should look like the Family Planning	one below.	-	Diaphragm	\$0.00 ▼

•	Locate Category Code 106H • Click on the Service C code 106H .	
	The line should look like the one below.	
		rmicidal Jelly \$9.00 🔻
	Press the Delete Key to remove the 106H	
	 Click on the Default Amount and change it to "0. 	00"
	Press Enter	
	The Line should look like the one below.	
	Family Planning ▼ FP ▼ Spe	rmicidal Jelly \$0.00 ▼
		-
•	Locate Category Code 106K	
	 Click on the Service C code 106K. 	
	 The line should look like the one below. 	
	• 106K Family Planning ▼ FP ▼ Impla	nt - Removal with Reinsertion \$435.00 ▼
	Press the Delete Key to remove the 106K	1
	 Click on the Default Amount and change it to "0. 	00"
	 <u>Press Enter</u> 	
	 The Line should look like the one below. 	
	• Family Planning ▼ FP ▼ Impl	ant - Removal with Reinsertion \$0.00 🔻
•	Localo Galogoly Godo 10011	
	 Click on the Service C code 106N. 	
	The line should look like the one below.	
		ant + Insertion \$385.00 ▼
	Press the Delete Key to remove the 106N	
	 Click on the Default Amount and change it to "0. 	00"
	Press Enter The second s	
	The Line should look like the one below.	** ** ** ** ** ** ** ** ** ** ** ** **
	• FP ▼ Imp	ant + Insertion \$0.00 ▼
	Lacata Catamani Oada 100B	
•	Locato Gatogoty Godo 1001	
	Click on the Service C code 106P. The line should leak like the are below.	
	• The line should look like the one below. 106P Family Planning ▼ FP ▼ IUD	Removal \$77.00 ▼
	 Press the Delete Key to remove the 106P 	Tremoval \$\psi \cdot \cd
	 Click on the Default Amount and change it to "0. 	nn"
	 Press Enter 	00
	The Line should look like the one below.	
		Removal \$0.00 🔻
	•	-
	Locate Category Code 106Q	
	Click on the Service C code 106Q.	
	The line should look like the one below.	
		th Monthly \$22.00 ▼
	Press the Delete Key to remove the 106Q	
	 Click on the Default Amount and change it to "0. 	00"
	Press Enter	
	The Line should look like the one below.	
	Family Planning ▼ FP ▼ Pat	ch Monthly \$0.00 ▼
	_	

- Locate Category Code 106RClick on the Service C code 106R.
 - The line should look like the one below.

•	106R	Family Planning	▼ FP	▼ Ring Monthly	\$15.00 -
•	Press the	e Delete Key to rei	move the 106	R	-
•	Click on	the Default Amour	nt and change	e it to " 0.00 "	
•	Press Er	<u>nter</u>			
•	The Line	should look like th	ne one below.	i	
_		Family Planning	▼ FP	Ring Monthly	\$0.00 🔻

F10 back to the Main Menu

SECOND, UPDATE Existing Categories with Rate and Description Changes:

THESE RATE and DESCRIPTION CHANGES CAN ONLY BE ENTERED AFTER THE CLOSE OF BUSINESS 08/31/2009 OR THE FIRST THING (before receipts are issued) 09/01/2009.

Below are some existing categories that need Description and/or Rate changes.

- · Select Defaults Menu (F2) from the Main Menu
- Click on Default Categories
- Locate Category Code 100
 - · Click on the Description box and enter:
 - "Initial/Annual/Extended Visit",
 - Click on the Default Amount box and change it to "156.00"
 - Press Enter.
- Locate Category Code 102
 - · Click on the Description box and enter:
 - "Periodic Revisit or Deferred Physical Visit",
 - Click on the Default Amount box and enter "67.00"
 - Press Enter.
- Locate Category Code 104
 - · Click on the Default Amount box and enter "33.00"
 - Press Enter.
- Locate Category Code 107
 - Click on the Default Amount box and enter "11.00"
 - Press Enter.
- Locate Category Code 106I
 - · Click on the Description box and enter:

"IUD/Paragard by Contract Provider",

- Click on the Default Amount box and enter " 275.00"
- Press Enter.
- Locate Category Code 106J
 - Click on the Description box and enter:

"IUD/Mirena by Contract Provider",

- Click on the Default Amount box and enter "451.00"
- Press Enter.
- Locate Category Code 106L
 - · Click on the Description box and enter:
 - "Female Sterilization by Contract Provider",
 - Press Enter.

- Locate Category Code 106M
 - · Click on the Description box and enter:

"Male Sterilization by Contract Provider",

- Press Enter.
- Locate Category Code 1060
 - Click on the Description box and enter:

"Implant/IUD Removal".

- Click on the Default Amount box and enter "75.00"
- Press Enter.
- F10 back to the Main Menu

Third, Add New Categories:

Below are some new categories to be entered for issuing receipts for Visit/Contraceptives.

- Select Defaults Menu (F2) from the Main Menu
- Click on Default Categories
- Click on New Category Record and enter the following on the blank category line: "101A",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - · Click on the Description box and enter:
 - "In/An/Ext Vst w/ Pill Pack.".
 - Click on Default Amount box and enter "163.00"
 - Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101D",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - · Click on the Short Cat box and select "FP",
 - · Click on the Description box and enter:

"In/An/Ext Vst w/ Injection",

- Click on Default Amount box and enter "158.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101E",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - Click on the Description box and enter:

"In/An/Ext Vst w/ Patch",

- Click on Default Amount box and enter "178.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101F",
 - Click on the Category drop down box select "FAMILY PLANNING"
 - Click on the Short Cat box and select "FP"
 - · Click on the Description box and enter:

"In/An/Ext Vst w/ Ring",

- Click on Default Amount box and enter "171.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101G"
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP",
 - · Click on the Description box and enter:

- "In/An/Ext Vst w/ Diaphragm/Jelly"
- Click on Default Amount box and enter "184.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101I"
 - Click on the Category drop down box select "FAMILY PLANNING"
 - Click on the Short Cat box and select "FP"
 - Click on the Description box and enter:

"In/An/Ext Vst w/ Paragard Insertion"

- Click on Default Amount box and enter "356.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101J",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - · Click on the Description box and enter:

"In/An/Ext Vst w/ Mirena Insertion",

- Click on Default Amount box and enter "532.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "101K",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - · Click on the Description box and enter:

"In/An/Ext Vst w/ Implanon".

- Click on Default Amount box and enter "441.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103A",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP",
 - Click on the Description box and enter:

"Per Rvst/Def Phy w/ Pills",

- Click on Default Amount box and enter "74.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103D",
 - Click on the Category drop down box select "FAMILY PLANNING"
 - Click on the Short Cat box and select "FP"
 - Click on the Description box and enter:

"Per Rvst/Def Phy w/ Injection ",

- Click on Default Amount box and enter "69.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103E",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - · Click on the Short Cat box and select "FP",
 - · Click on the Description box and enter:
 - "Per Rvst/Def Phy w/ Patch"
 - Click on Default Amount box and enter "89.00"
 - Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103F"
 - Click on the Category drop down box select "FAMILY PLANNING"
 - Click on the Short Cat box and select "FP"
 - · Click on the Description box and enter:

"Per Rvst/Def Phy w/ Ring"

- Click on Default Amount box and enter "82.00"
- Press enter.
- Click on New Category Record and enter the following on the blank category line: "103G",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - Click on the Description box and enter:

"Per Rvst/Def Phy w/ Diaphragm/Jelly",

- Click on Default Amount box and enter "95.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103I",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - Click on the Description box and enter:

"Per Rvst/Def Phy w/ Paragard Insertion",

- Click on Default Amount box and enter "267.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103J",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - · Click on the Description box and enter:

"Per Rvst/Def Phy w/ Mirena Insertion",

- Click on Default Amount box and enter "443.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "103K",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - · Click on the Short Cat box and select "FP".
 - · Click on the Description box and enter:

"Per Rvst/Def Phy w/ Implanon",

- Click on Default Amount box and enter "352.00"
- Press Enter.
- Click on New Category Record and enter the following on the blank category line: "105",
 - Click on the Category drop down box select "FAMILY PLANNING",
 - Click on the Short Cat box and select "FP".
 - Click on the Description box and enter:

"Blood Pressure Recheck/Repeat Pap Smear",

- Click on Default Amount box and enter "0.00"
- Press Enter.
- F10 back to the Main Menu
 - Select Default Menu again
 - Default Categories.

Compare what is in your table to the one below, they should be the same. If not, you will need to go to the individual lines and make the changes.

The Codes No Longer used will be at the beginning of the Defaults Category listing with spaces in the Service C. See below

Service C Category	Short Ca	at	Description	Default Amount	
Family Planning	-	FP	•	Family Planning-Periodic Revisit	\$0.00 🔻
Family Planning	•	FP	•	Extended Family Planning Counseling Visit	\$0.00 🔻
Family Planning	•	FP	•	Pills Monthly	\$0.00 🔻
Family Planning	•	FP	•	Pills Quarterly	\$0.00 🔻
Family Planning	•	FP	•	Pills Annual	\$0.00 🔻
Family Planning	•	FP	•	Injection Contraceptive Quarterly	\$0.00 🔻
Family Planning	•	FP	•	Patch Quarterly	\$0.00 🔻
Family Planning	•	FP	•	Ring Quarterly	\$0.00 🔻
Family Planning	•	FP	•	Diaphragm	\$0.00 🔻
Family Planning	•	FP	•	Spermicidal Jelly	\$0.00 🔻
Family Planning	•	FP	•	Implant - Removal with Reinsertion	\$0.00 🔻
Family Planning	•	FP	•	Implant + Insertion	\$0.00 🔻
Family Planning	•	FP	•	IUD Removal	\$0.00 🔻
Family Planning	•	FP	•	Patch Monthly	\$0.00 🔻
Family Planning	•	FP	•	Ring Monthly	\$0.00 🔻

Scroll down the Default Category listing to Service Code 100 and compare the current Codes, Descriptions, and Fees with the ones below. They should be the same. If not, you will need to go to the individual lines and make the changes. These new categories will appear in the drop down box on the receipt entry screen where the other categories are selected for types of services.

		_				
100	Family Planning	•	FP	•	Initial/Annual/Extended Visit	\$156.00
101A	Family Planning	•	FP	•	In/An/Ext Vst w/ Pill Pack	\$163.00
101D	Family Planning	•	FP	•	In/An/Ext Vst w/ Injection	\$158.00
101E	Family Planning	•	FP	-	In/An/Ext Vst w/ Patch	\$178.00
101F	Family Planning	•	FP	•	In/An/Ext Vst w/ Ring	\$171.00
101G	Family Planning	•	FP	•	In/An/Ext Vst w/ Daiphragm/Jelly	\$184.00
1011	Family Planning	•	FP	•	In/An/Ext Vst w/ Paragard Insertion	\$356.00
101J	Family Planning	•	FP	•	In/An/Ext Vst w/ Mirena Insertion	\$532.00
101K	Family Planning	•	FP	•	In/An/Ext Vst w/ Implanon	\$441.00
102	Family Planning	•	FP	•	Peroidic Revisit or Deferred Physical Visit	\$67.00 [
103A	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Pills	\$74.00
103D	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Injection	\$69.00
103E	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Patch	\$89.00
103F	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Ring	\$82.00
103G	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Diaphragm/Jelly	\$95.00
1031	Family Planning	•	FP	▼	Per Rvst/Def Phy Vst w/ Paragard Insertion	\$267.00
103J	Family Planning	•	FP	•	Per Rvst/Def Phy Vst w/ Mirena Insertion	\$443.00
103K	Family Planning	•	FP	•	Per Rvst/Def Phy w/ Implanon	\$352.00
104	Family Planning	•	FP	•	GYN Problem/Laboratory/Counseling Visit	\$33.00
105	Family Planning	•	FP	▼	Blood Pressure Recheck/Repeat Pap Smear	\$0.00
1061	Family Planning	•	FP	•	IUD/Paragard By Contract Provider	\$275.00
106J	Family Planning	•	FP	•	IUD/Mirena By Contract Provider	\$451.00
106L	Family Planning	•	FP	•	Female Sterilization By Contract Provider	\$1,000.00
106M	Family Planning	•	FP	•	Male Sterilization By Contract Provider	\$300.00
1060	Family Planning	•	FP	•	Implant/IUD Removal	\$75.00
107	Family Planning	•	FP	•	Family Planning Pregnancy Test Only	\$11.00

Finally, scroll to the bottom of the Default Category listing and compare the Donation and Payment on Account codes with the ones below. They should be the same. If not, you will need to go to the individual lines and make the changes.

ENDON	Environmental Fees	▼ ENV	•	Environmental Donations	\$0.00 🔻
ENPOA	Environmental Fees	▼ ENV	•	Environmental Payment on Account	\$0.00 🔻
FPDON	Family Planning	▼ FP	•	Family Planning Donation	\$0.00 🔻
FPPOA	Family Planning	▼ FP	•	Family Planning Payment on Account	\$0.00 🔻
IMDON	Misc-Immun	▼ IMM	▼	Immunization Donation	\$0.00 🔻
IMPOA	Misc-Immun	▼ IMM	-	Immunization Payment on Account	\$0.00 🔻
OCDON	Other Clinic	▼ OC	•	Other Clinic Donation	\$0.00 🔻
OCPOA	Other Clinic	▼ oc	•	Other Clinic Payment on Account	\$0.00 🔻

Effective 09/01/2009, there will NO LONGER be a separate Revenue (Recap) Code for Contraceptives.

Because of the new Default Category Codes combining a visit with a contraceptive there will **NO LONGER be a requirement for two separate receipts when contraceptives are issued**. Only, one receipt with the correct Visit/Contraceptive code will be necessary.

THERE ARE TWO EXCEPTIONS THAT MAY REQUIRE TWO RECEIPTS:

- 1)The patient that has an IUD/Implanon removal (service code 1060) will have 2 charges that will require separate receipts.
 - A) A receipt for the visit and supplies if applicable
 - B) A receipt for the IUD/Implanon removal (1060)
- 2) The patient that applies for Plan First and is **not awarded** will have 2 charges billed to them that will require separate receipts based on the requirements at the time of the visit.
 - A) A receipt for the visit
 - B) A receipt for supplies if applicable

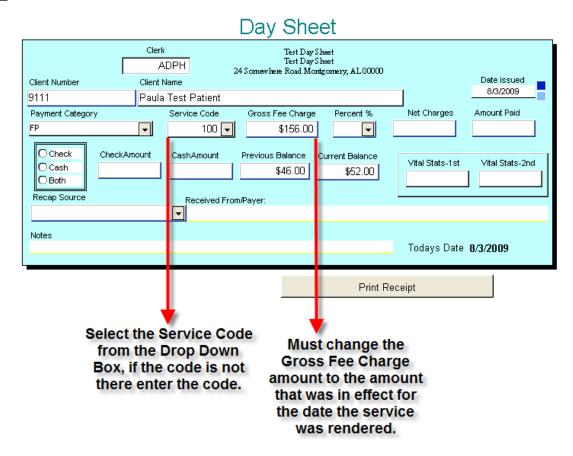
Please refer to the example on the next page.

In the example below a patient was not awarded Plan First and is being charged for an Annual Visit that was provided when they applied for Plan First.

Look up the Patients Number and Create a Receipt.

Leave the date as the CURRENT DATE.





Complete the receipt for the Annual Visit.

Main Menu (F10)

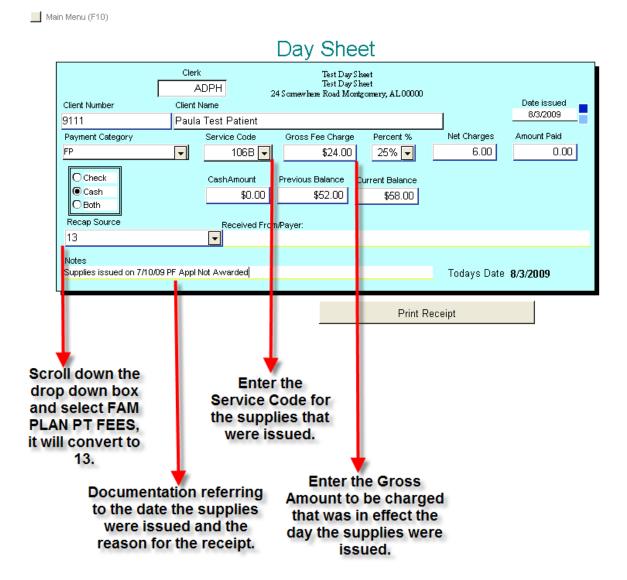
Day Sheet Test Day Sheet Test Day Sheet 24 Somewhere Road Montgomery, AL 00000 Clerk ADPH Date issued Client Number Client Name 8/3/2009 9111 Paula Test Patient Payment Category Service Code Gross Fee Charge Percent % Net Charges Amount Paid 46.00 FΡ 25% 🔻 0.00 \$182.00 100 🔻 ┰ Check CashAmount Previous Balance Current Balance Cash \$0.00 \$52.00 \$98.00 O Both Recap Source Received From/Payer: 13 For Services on 7/10/09 PF Not Awarded Todays Date 8/3/2009 Print Receipt Documentation After the Gross Fee referring to the date **Amount was** the service was changed. rendered and the reason for the receipt.

In the example below a patient was not awarded Plan First and is being charged for supplies that were provided while the Plan First application was being processed.

Look up the Patients Number and Create a Receipt.

Leave the date as the Current Date.

Complete the receipt following the instructions on the example below.



UPCOMING EVENTS

There will be a new version of the eDay Sheet sent out Wednesday, September 30, 2009.
We have not determined what time this version will be loaded. It maybe that someone will have to be available after hours on Wednesday 9/30/2009.
Please think about who will able to be available at each site for emails and/or phone calls during the process of loading the new version. Please send this to me via email. Make sure you indicate in your email the person's name, their location and a phone number where they can be reach after hours. randy.tatum@adph.state.al.us
More information will be coming on the New Version in the next couple of weeks. I just wanted to give you as much time to plan as possible.
Thank You for all of your hard work and dedication.