

Centralized Billing Unit Refresher For Clerical Staff



**October 11, 2018
2:00 PM – 3:30 PM**

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This video presentation was created to assist with coding accuracy for services rendered to patients seen at the ADPH county health departments only. It is the responsibility of the clinician to use his or her professional discretion to document and bill for appropriate services rendered.

Disclaimer

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**Upon completion of this presentation,
Administrative Support Staff will have an
Understanding of documentation and
coding Guidelines used for billing at the
Alabama Department of Public Health**

Objective



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- **At the conclusion of this presentation,
participants should be able to:**
 - **Outline variables that can affect
reimbursement**
 - **Global Fee**
 - **Medicaid requirements**

Conclusion

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- Illustrate how the documentation of a patient encounter is converted into revenue
- Utilize common coding/billing terms
- List common reasons claims are denied

Conclusion

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Patient Registration

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<input checked="" type="radio"/> Title	Ms			
<input type="radio"/> Suffix	CRNP			
First Name *	Jasmine	Middle		Last Name *
Gender *	Female			Gender Identity
Sexual Orientation	--Select--			Status
DOB *	8/3/1993			SSN
Previous	First Name			Last Name
Mother's Maiden	First Name			Last Name
Current Address				
Address *	3600 N HICKORY ST LOT 8			
City *	LOXLEY	State *	AL	County
Zip *	36551	Country	United States of America	
Alternate Address	<input type="checkbox"/> Same as above			
Address	P O BOX 433			
City	LOXLEY	State	AL	County
Zip	36551	Country	United States of America	
Mobile *	(251) 229-1637	Location *	Baldwin Robertsdale 1	
Email		Account No	27478	

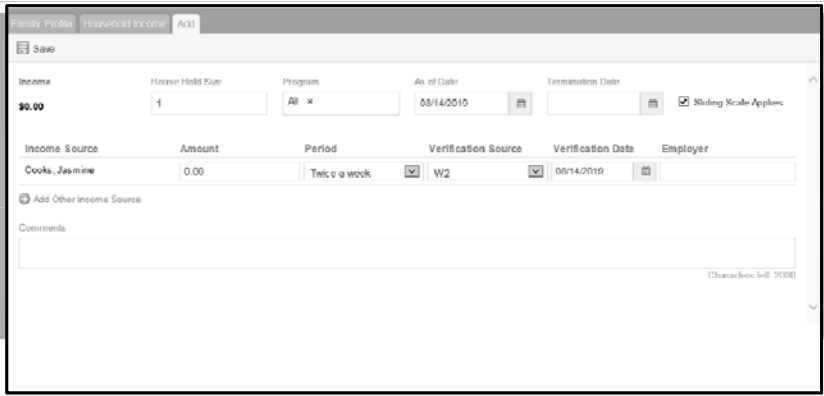
Profile

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Insurance	
Plan *	--Select--
Address *	--Select--
Priority	Secondary <input checked="" type="checkbox"/>
Subscriber Policy No. *	
Group Number	
Sign On File *	10/0/2010
Effective Date	
Exception Code	
WCB Carrier Code W	
Insurance Code (P)	HM Health Maintenance Organization (HMO)
Comments	
Claim File Indicator *	
Insured Party	Self <input checked="" type="checkbox"/>

Insurance

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The screenshot shows a web-based form titled "Family Profile" with tabs for "Household by case" and "Add". The form is for "Income Assessment" and includes a "Save" button. The main section is titled "Income" and contains the following fields:

- Income:** \$0.00
- Household Size:** 1
- Program:** All *
- As of Date:** 05/14/2015
- Termination Date:** (empty)
- ☒ Sliding Scale Applies

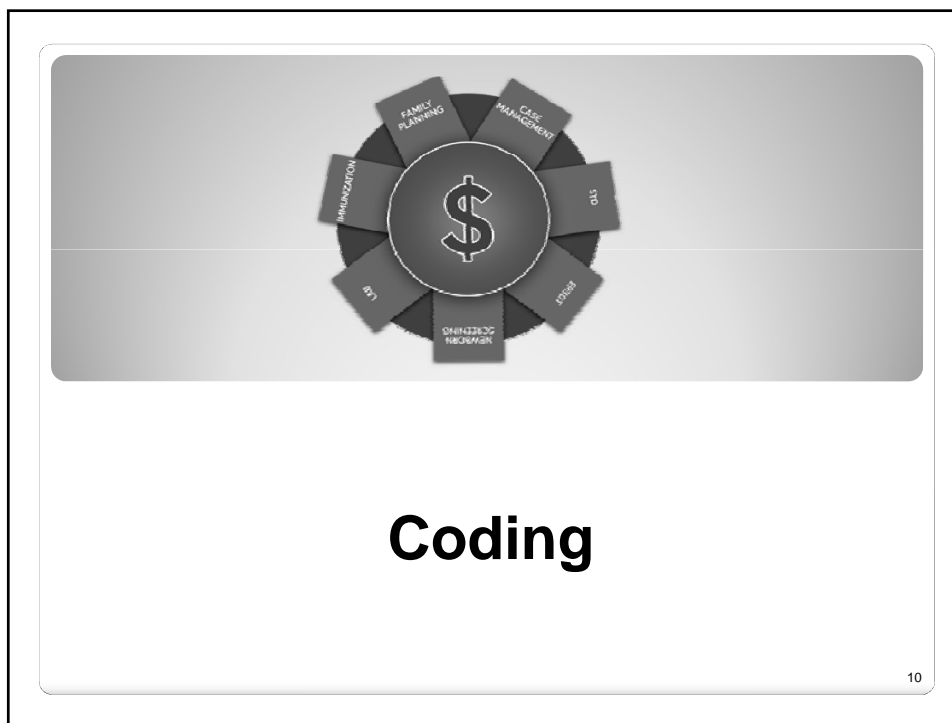
Below these fields is a table with the following columns: Income Source, Amount, Period, Verification Source, Verification Date, and Employer.

Income Source	Amount	Period	Verification Source	Verification Date	Employer
Cooks, Jasmine	0.00	Tell's a work	<input checked="" type="checkbox"/> W2	<input checked="" type="checkbox"/> 05/14/2015	

Below the table is a section for "Add Other Income Source" and a "Comments" text area. The bottom right corner of the form displays "Character Set: 2000".

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Income Assessment



Coding

- A process of transforming descriptions of medical encounters, diagnoses, procedures, diagnostic tests and supplies provided to a patient into universal code numbers, often referred to as CPT (Current Procedural Terminology)
- For every ailment, injury, diagnosis, and medical procedure, there is a corresponding code.



What is Coding?

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**Forms Used In
Billing Review**

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Provider Notes: Progress Note

Save Print Assign Send File Review Letters Create eSuperbill Change Case

Arial Black

Alabama Department of Public Health
Family Planning Assessment Record
Revisit

Reason for Visit:
☐ Chaperone Name: ☐ Translator Name/Number:

Accepted Well Woman Additional Services: ☐ N/A ☐ Yes ☐ No

<< Complaints >>

LMP/Method:

Ob/Gyn History:
 Breastfeeding: No
 Pap Smear: Normal, 2017 2015, 2009, 2003 NEG
 Uterine Anomaly: No
 Genital Herpes: No
 Dysmenorrhea: No
 Fibroids: No

Provider Note
Documentation for all services and additional
notes rendered during the encounter

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Evaluation and Management (E&M)

Encounter: 10/03/2018 Time: 11:15 AM Location: Montgomery Co Health Department Provider: Grana-McIntyre, Mary

Diagnoses: ICD-9

1. Z11.3 Encounter for screening for infections w... V74.5 2. Z11.4 Encounter for screening for human immuno... V73.09

3. Z11.8 Encounter for screening for other infect... V73.09 4. JCD-9 JCD-9

Procedures: CPT-4

E&M 99211-99215: Established Patient Office Visit ☐ 99211 ☐ 99212 ☒ 99213 ☐ 99214 ☐ 99215

	Program	Modifier	Qty	Dx. Pfr *	Unit	Charge	Amount
99213	EST OFFICE OUTPATIENT	ST	25	1	1,2,3	1,000	0.00
99401	HIV PRE TEST COUNSEL	ST	0	1	2	1,000	17.99
			0			PU	0.00

eSuperbill
Summary of all services rendered, based on
documentation (CPT Codes) from the
Provider Note.

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Charge Screen

Billing component used in creating a bill file to submit to payer source

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Messaging

Module used to send messages, charts, etc. to other user within the application.

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Common Problems on the Provider Note

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FP Documentation:
Documentation:
Counseling
PT:3 Yes
Counseling done/protocol:Yes
Topics Indicated:
1) Key Topic Areas: Discussed a/s of method
2) Key Topic Areas: discussed risk of STDs
3) Key Topic Areas: Discussed importance of calcium and Vit D intake daily
Supplies Given:
Details:
Previous documentation/record reviewed No contraindication noted Order for medication in chart
Medication Depo Provera
Site: Left Deltoid
Patient Tolerated Well:Yes, RTC for FPS depo Oct 5- 19
☒ Required Consent(s) reviewed and signed by patient

Prescription:
MedroxyPROGESTERONE Acetate 150 MG/ML Intramuscular Suspension: 150 Milligram(s) every 12 weeks , Start 07/20/2018, Qty 1 Vial For 90 Day(s), ICD: Z30.42

Diagnoses:
Encounter for surveillance of injectable contraceptive - Z30.42

Procedures:
MEDROXYPROGESTERONE ACETATE (CPT-11050), Units: 1
INJECTION SUBQ/IM (CPT-86372), Units: 1

Patient / Guardian Education:
Patient verbalizes understanding for ADPH Depo Provera Shots Fact Sheet Nov 16. Provided by Peggy McGraw on 07/20/2018 10:39 AM

Incorrect

E&M Visit Code – Not Selected as a Procedure Code

E/M codes MUST be selected under “Procedures” on the provider note in order to bill for the visit.

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Current Medications:
Post Medication:
 Depo-Provera 400 MG/ML Intramuscular Suspension, 0.4 Milliliter(s) every 12 weeks, Qty 4 Vial For 90 Day(s), - Past by Jones, Lisa on 04/20/2018

Vital Signs:
 Weight 157 lbs 4 oz, Height 5'2", BMI 28.76 kg/m sq, Category Overweight, BP 128/80 mmHg, - Sitting, Right Arm, Standard Cuff Size, Manual Recording, Urine Pregnancy Test Negative Taken on Apr 20, 2018 at 1:23 PM by Turesdale, Christine

☐ IMM Screening Checklist

Lab Order:
 URINE PREGNANCY TEST (CPT-81025) (Urine)

☒ Required Consent(s) reviewed and signed by patient

Diagnoses:
 Encounter for surveillance of injectable contraceptive - Z30.42

Procedures:
 INJECTION SUBQ/IM (CPT-96372), Units: 1.
 EST OFFICE OUTPATIENT VISIT 15 MINUTES (CPT-99213), Units: 1.

HP Documentation:
 Documentation:
 Counseling
 PT+3 Yes
 Counseling done/protocol Yes
 Topics Indicated
 1) Key Topic Areas: calcium with Vitamin D
 2) Key Topic Areas: Prepared for abstinence
 3) Key Topic Areas: Return July 6 - July 20

Correct

E&M Visit Code – Selected as a Procedure Code

E/M codes MUST be selected under “Procedures” on the provider note in order to bill for the visit.

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Lab Result:
 Specimen collected on 04/04/2018 4:05PM
 04/04/2018 81025 - URINE PREGNANCY TEST
 Urine Pregnancy Test

Diagnoses:
 Encounter for surveillance of injectable contraceptive - Z30.42
 Encounter for pregnancy test, result negative - Z32.02

Procedures:
 EST OFFICE OUTPATIENT VISIT 15 MINUTES (CPT-99213), Units: 1.
 INJECTION SUBQ/IM (CPT-96372), Units: 1.
 MEDROXYPROGESTERONE ACETATE (CPT-J1050), Units: 1.
 URINE PREGNANCY TEST (CPT-81025), Units: 1.

Incorrect

Ordering Labs and/or Prescriptions

All Labs MUST be ordered under “Lab Order” and all medications MUST be ordered under “Prescription”.
DO NOT enter labs or prescriptions under “Procedures”

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Lab Order:
 HEMOGLOBIN (CPT-85018) *[No Specimen Selected]*
 URINE PREGNANCY TEST (CPT-81025) *[Urine]*

Lab Order:
 CT-GC-TV (Chlamyd/Gonor/Trich) (Lab-CT-GC-TV) *[Cervical Swab]*

Lab Order:
 SYPHILIS SCREEN (Lab-SYPH_SCRN) *[Blood]*

Lab Order:
 HIV SCREEN AG-AB BIOPLEX (Lab-HIV-SCRN) *[Blood]*

Correct

Prescription:
 Depo-Provera 400 MG/ML Intramuscular Suspension: 0.4 Milliliter(s) every 12 weeks , Start 06
 year

Ordering Labs and/or Prescriptions

**All Labs MUST be ordered under “Lab Order” and all medications MUST be ordered under “Prescription”.
DO NOT enter labs or prescriptions under “Procedures”**

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Lab Order:
 Pap Lb, HPV-hr (Lab-195050) *[Cervix]*

Lab Order:
 URINE PREGNANCY TEST (CPT-81025) *[Urine]*
 HEMOGLOBIN (CPT-85018) *[Blood capillary]*

Lab Order:
 CT-GC-TV (Chlamyd/Gonor/Trich) (Lab-CT-GC-TV) *[Cervical Swab]*

Lab Order:
 HIV SCREEN AG-AB BIOPLEX (Lab-HIV-SCRN) *[Blood]*

Lab Order:
 SYPHILIS SCREEN (Lab-SYPH_SCRN) *[Blood]*

Incorrect

Documentation – Labs Not Resulted

It is required that all labs must be resulted before they can be billed.

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Lab Order: URINE PREGNANCY TEST (CPT-81025) [Urine]		
Lab Result: Specimen collected on 06/27/2018 2:23PM 06/27/2018 81025 - URINE PREGNANCY TEST		
Urine Pregnancy Test	negative	Range Negative
Lab Result: Specimen collected on 08/09/2018 3:48PM 08/09/2018 87210 - VAGINAL WET MOUNT		
WBC	20-30 /HPF	Range 0-3
Clue Cells	absent	Range Absent
Yeast	absent	Range Absent
Trichomonas	absent	Range Absent
RBC		
Bacteria		Range Absent
ph		
WIFF	Positive	Correct

Documentation – Labs Resulted

It is required that all labs must be resulted before they can be billed.

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Lab Result: Specimen collected on 10/05/2018 11:38AM 10/05/2018 81025 - URINE PREGNANCY TEST		
Urine Pregnancy Test	positive	Range Negative
Acknowledged:	Wooten, Kim 10/05/2018 11:38AM	
Reviewed:	Wooten, Kim 10/05/2018 11:38AM	
Modified:	Wooten, Kim 10/05/2018 11:38AM	
Added:	Wooten, Kim 10/05/2018 11:38AM	
Assessment and Plan:		
Diagnosis: Encounter for pregnancy test, result positive - 732 01		
Procedures: FST OFFICE OUTPATIENT VISIT 5 MINUTES (CPT 99211), Units: 1		

Positive Pregnancy Test

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Family Planning				Additional Family Planning Diagnoses	
Contraceptive Pills				Breast Conditions	
Annual	99214	FP	Z30.41	Mastitis without abscess	N61.0
Def Physical / Revisit	99213	FP	Z30.41	Abscess of the breast and nipple	N61.1
Initial Visit	99205	FP	Z30.41	Unspecified lump or mass in breast	N63.0
Injectable Contraceptive				Galactorrhea (not assoc. w/childbirth)	
Annual	99214	FP	Z30.42	Nipple discharge	N64.52
Def Physical / Revisit	99213	FP	Z30.42	Retraction of nipple	N64.53
Initial Visit	99205	FP	Z30.42	Mastitis, postpartum, unspecified	O91.23
Checking of Intrauterine Contraceptive Devi				Mastodynia	
Annual	99214	FP	Z30.431		N64.4
Def Physical / Revisit	99213	FP	Z30.431		
Initial Visit	99205	FP	Z30.431		
Insertion of Intrauterine Device				Cervix	
Annual	99214	FP	Z30.430	Cervical Polyp	N84.1
Initial Visit	99205	FP	Z30.430	ASC cytology	I87.619
Revisit	99213	FP	Z30.430	ASC-US cytology	I87.610
Removal of Intrauterine Device				ASC-H cytology	
Annual	99214	FP	Z30.432	LSIL cytology	I87.612
Initial Visit	99205	FP	Z30.432	High Risk HPV DNA positive	I87.610
Revisit	99213	FP	Z30.432	Cytologic evidence of malignancy	I87.614
Removal & Reinsertion				Unsatisfactory cytology	
Annual	99214	FP	Z30.433	Lacking transformation zone	I87.616
Initial Visit	99205	FP	Z30.433	Chlamydia	
				Chlamydia, unspecified	A56.00

CPT Codes with Diagnosis (Dx) Codes
The Coding Guide should be used to reference Dx that correspond to the correct CPT code(s)

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Diagnoses:

Encounter for surveillance of injectable contraceptive - Z30.42

Encounter for pregnancy test, result negative - Z32.02

Procedures:

INJECTION SUBQ/IM (CPT-96372), Units: 1.

EST OFFICE OUTPATIENT VISIT 15 MINUTES (CPT-99213), Units: 1.

Administration Code

Whenever an injection is administered, document the appropriate administration code shown on the ADPH Coding Guide

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Electronically signed by RN. on Tuesday, May 1, 2018 at 10:58 AM

append; add 99213 under procedure

Appended By: RN on 10/3/2018 at 07:51 AM

Add FP 99213

Appended By: CRNP on 9/25/2018 at 04:45 PM

Patient in for supply visit, but hx of ASCUS pap without f/u. In 2012-ASCUS neg, 2014-normal. She did not go for colpo. 2018-pap normal, but since no HPV was done. HPV done today. Importance of abn pap f/u. Patient verbalized understanding.

Appended By: CRNP on 5/1/2018 at 12:47 PM

Wrong Provider Signing the Note

The highest level clinician providing services should sign the provider note and create the superbill

27

Electronically signed by RN. on Tuesday, May 1, 2018 at 10:58 AM

append; add 99213 under procedure

Appended By: RN on 10/3/2018 at 07:51 AM

Add FP 99213

Appended By: CRNP on 9/25/2018 at 04:45 PM

Patient in for supply visit, but hx of ASCUS pap without f/u. In 2012 ASCUS neg, 2014 normal. She did not go for colpo. 2018-pap normal, but since no HPV was done. HPV done today. Importance of abn pap f/u. Patient verbalized understanding.

Appended By: CRNP on 5/1/2018 at 12:47 PM

Addendum – Wrong Person Appending the Record

Only the Clinician that created the Provider Note or eSuperbill can append it.

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DO NOT:

- Delete
- Remove
- Copy and Paste documentation into a patient's record

Terminology NOT to Use When Appending

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YOU CAN USE:

- Add CPT code
 - Ex: Add CPT code 99211, as 99213 was used in error
- Add Dx code
 - Ex: Add Dx code Z32.02

Terminology to Use When Appending

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eSuperbill

**Summary of all services rendered,
based on documentation (CPT Codes)
from the Provider Note.**

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Procedures	Program	Modifiers	Qty	Dx Pointers	Unit	Charge	Amount
99213 - EST OFFICE OUTPATIENT VISIT 15 MINUTES	FP	FP	1	1	1.000	PU	202.00
01025 - URINE PREGNANCY TEST	FP		1	2	1.000	PU	3.12
85018 - HEMOCLORIN	FP	00	1	1	1.000	PU	2.00

Comments
bleeding problem

Signed by RN. [] on Monday, July 9, 2018 at 9:29 AM
remove Z11.36remove 85018

Appended by RN. [] on Tuesday, August 21, 2018 at 2:09 PM Review

eSuperbill

When a clinician appends the eSuperbill, the system will request that the appended note is reviewed, typically by the clerk that is creating/submitting the charges."

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Charge Screen

Billing component used in creating a bill file to submit to payer source

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- Alabama Medicaid Agency (AMA)
- Blue Cross Blue Shield (BCBS)
- Different payers have different rules.
- Different health departments programs have different rules.
- Coding only applies to services provided in the Health Department.

All Payers Are Not Alike



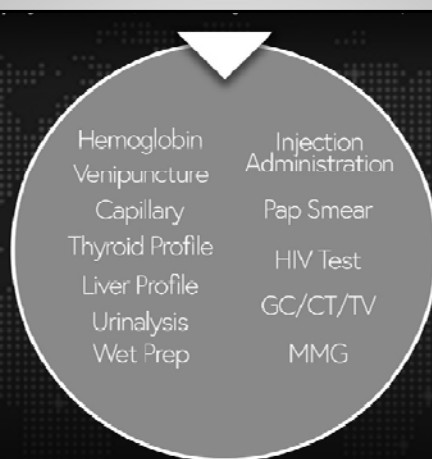
34

- Certain services are included in the global fee for Medicaid.
- Health Department is not considered a pharmacy provider therefore we can not bill certain birth control methods to BCBS.
- Patients are unique and coding should reflect this.

**All Payers Are
Not Alike**



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Medicaid Family Planning Global Fee

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Insurance - Appointment - Provider

Place of Service: 71, Public Health Clinic

Primary Plan: MEDICAID PLAN FRS

Secondary: -Select-

Location: Houston Co Health D

Claim Type: Original

Referring: Thomas, Grace

Billing Entity: Houston County Health

Diagnosis & Procedure

Diagnosis:

- 230.42 Encounter for surveillance of intrauterine device
- 232.02 Encounter for pregnancy test, result negative
- ICD 10
- ICD 9

Procedures:

Start DOS	End DOS	Modifier	Dx Pk *	Units	Patient \$	Plan \$	Ordering Provider
05/04/2018	05/04/2018	FP	1	1	UN	0.00	235.00
05/04/2018	05/04/2018		0	2	UN	0.00	3.00
			0	1	UN	0.00	0.00
			0	1	UN	0.00	0.00

Total: 0.00 238.00 238.00

Notes & Comments

Claim Status: 2. Billed to Prim plan (ED)

Responsible Plan: MEDICAID PLAN FRS

Key Elements of the Charge Screen

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Insurance - Appointment - Provider

Place of Service: 71, Public Health Clinic

Primary Plan: MEDICAID PLAN FRS

Secondary: -Select-

Location: Baldwin Robertsdate

Claim Type: Original

Referring: Thomas, Grace

Billing Entity: Baldwin County Health

Diagnosis & Procedure

Diagnosis:

- 730.02 Encounter for pregnancy test, result positive
- 730.42 Encounter for surveillance of injectable contraceptive
- ICD 10
- ICD 9

Procedures:

Start DOS	End DOS	Modifier	Dx Pk *	Units	Patient \$	Plan \$	Ordering Provider
08/13/2018	08/13/2018	FP	1	1.2	UN	0.00	225.00
08/13/2018	08/13/2018	UU	1	2	UN	0.00	18.00
08/13/2018	08/13/2018		0	1	UN	0.00	3.00
			0	1	UN	0.00	0.00

Total: 0.00 256.00 256.00

Notes & Comments

Claim Status: 6. Hold Claim

Responsible Plan: MEDICAID PLAN FRS

Splitting of Charges

You should ONLY split charges if the method is billed back to the family planning state level NPI (ex. Rings, depo, IUDS)

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Split Charge

Split

CPT	Description	Program	Billing Entity
99213	OFFICE OUTPATIENT VISIT 15 MINUTES	FF	Baldwin County Health Dept Robertsdale FP CLINIC
J1050	MEDROXYPROGESTERONE ACETATE	FF	Ala Dept of Public Health Statewide FP Baldwin HO
81025	URINE PREGNANCY TEST VISUAL COLOR CMPSNL	FP	Baldwin County Health Dept Robertsdale FP CLINIC

Total Records: 3

Splitting of Charges

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Insurance - Appointment - Provider

Place of Service: 71 Public Health Clinic

Accept Assignment: ☒

Primary Plan: MEDICAID PLAN R Referral: PAN Copay: 0.00 Paid/Allocate: ☐

Secondary: Select Referral: PAN Ad: Reason: ☐

Location: Baldwin Robertsdale Start DOS: 08/13/2018 End DOS: 08/13/2018 Transaction: 10/05/2018

Claim Type: Original Original Ref #:

Admission: ☐ Discharge: ☐ Dates: Add New Dates:

Rendering: Thomas, Grace Billing: ☒ Thomas, Grace Referring: Billing Entity: Ala Dept of Public Health

Diagnosis & Procedure

1. Z32.02 Encounter for pregnancy test r V72.41 2. Z30.42 Encounter for surveillance of injectable o V25.49

3. ICD-10 ICD-9 4. ICD-10 ICD-9

Procedure	Start DOS	End DOS	Modifier	Ix Pr*	Units	Patient S	Plan S	Ordering Provider
J1050	08/13/2018	08/13/2018	UD	1 2	150	UN	0.00	10.00
				0	1	UN	0.00	0.00
Total						0.00	18.00	18.00

This charge was created from another charge that includes these services: (81025) and (99213)

Notes & Comments: ☐ Validate

Claim Status: 7 Never been billed Responsible Plan: P MEDICAID PLAN R

Splitting of Charges

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Insurance - Appointment - Provider Place of Service 71, Public Health Clinic ☒ Accept Assignment

Primary Plan MEDICARE PLAN HCN Referral PAN Copay 0.00 Paid Allocate
 Secondary -Selected- Referral PAN Adv. -Reason-
 Location Houston Co Health U Start DOS 05/04/2018 End DOS 05/04/2018 Transaction 05/04/2018
 Claim Type Original Original Ref #
 Admission Discharge Dates Add New Dates
 Resending Thomas, Grace Billing Thomas, Grace Referring Billing Entity Houston County Health

Diagnosis & Procedure

Diagnosis 1. Z30.42 Encounter for surveillance of Y25.45 2. Z32.02 Encounter for pregnancy test, result nega VT2.41
 3. ICD-10 4. ICD-10 5. ICD-10

Procedures	Start DOS	End DOS	Modifier	Qty	Pir	Units	Patient \$	Plan \$	Ordering Provider
99213 FP	05/04/2018	05/04/2018	FP	1	1	1 UN	0.00	235.00	Select- ✓
81025 FP	05/04/2018	05/04/2018		0	2	1 UN	0.00	3.00	-Selected- ✓
				0	1	1 UN	0.00	0.00	-Selected- ✓
				0	1	1 UN	0.00	0.00	Select- ✓
Total							0.00	238.00	238.00

Notes & Comments
 Claim Status Z-Billed To Prim plan (EDI) Responsible Plan F-MEDICARE PLAN HCN

Validate Button

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Claim Validation

Validate History

Scrub 10/09/2018 10:49:43 AM
 Scrubber is Passed, No Errors were found.

BRE 10/09/2018 10:49:35 AM
 BRE is Passed, No Errors were found.

Validate Button

Two green bars as shown above, indicated charge is ready to be billed, based on info on charge screen

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Payer and Payment Method

Payment By: C. VERONICA MELAI
 Payment Method: Cash
 Claim Control #:
 Payment Date: 10/9/2018
 Deposit Date:
 Reversal: ☐

Advances and Allocation

Total Unapplied:
 Current Visit Unapplied:
 Allocate from Unapplied:
 Copy: \$0.00

☐ Cross over Claim Interest Amount: 0.00

CPI	SL 0035	Charged	Balance	Amount	Postdated	Transfers	Copy	Write Off	Details	Net Bal	Plan Bal
99014	10/1/2018	260.00	-40.00							40.00	0.00
Transaction: 10/1/2018 (Patient)				0.00	100.00	0.00	0.00	0.00			
Transaction: 10/6/2018 (Patient)				0.00	100.00	0.00	0.00	0.00			
Transaction: 10/9/2018 (Patient)				0.00	100.00	0.00	0.00	0.00			
(H)	99401	10/1/2018	17.99	17.99						17.99	0.00
(H)	84603	10/1/2018	30.00	30.00						30.00	0.00
(H)	X1025	10/1/2018	3.00	3.00						3.00	0.00
Total		X10.99	10.99	0.00	0.00	0.00	0.00	0.00		10.99	0.00

Notes & Comments

Claim Status: 1. Dilled To Patient / Self Pay
 Next Responsible: C. VERONICA MELAI
 Comment:
 Edit Delete Edit Delete

Double Payment Charges

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Problem Lists

Claims that have been flagged for errors in demographics or Billing Rules Engine

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- **Located in the Billing Module**
- **Used to communicate billing issues with designated district and county staff**
- **Ex. Demographics, eligibility, patient has undocumented insurance, claims flagged of billing error, etc.**
 - **Messages that identifies the issue will be found in CureMD**

Problem Lists

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Recap for Clerks

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CAN	CAN'T
<ul style="list-style-type: none"> • Update units on the charge screen, if correct on the provider note and/or eSuperbill • Add/Delete modifiers • Update diagnosis pointers • Utilize training materials for coding, provided by CBU Only • Make sure correct primary plan is selected • Make sure correct Billing Entity is selected based on the service 	<ul style="list-style-type: none"> • Can not add, delete, or change CPT code selections on charge screen • Can not add, delete, or change diagnosis codes on charge screen • Can not append eSuperbill or documentation <ul style="list-style-type: none"> • Ex: The clinician must append eSuperbill if changes need to be made before a charge is created and submitted.

Recap for Clerks

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- **Clear and accurate documentation**
- **Reviewing Provider Documentation**
 - Documentation must match the billed services – every billed service and its corresponding diagnosis code must be clearly documented in the medical record
 - Services must be medically necessary for the treatment of the patient's condition
 - If it wasn't documented – it did not happen and can not be coded or billed

Recap for Clerks

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- **Select the “Zip Code” hyperlink to populate the address properly. If you do not, your address will not save**
- **Enter all accurate patient demographics**
- **Ensure that the Sliding Scale Fee is checked and that programs show ALL**

Quick Tips

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- **Review Provider Note thoroughly**
- **Refresh Charges. Make sure that the appropriate insurance carrier is selected, if any. Then add your modifiers. Lastly, tab through each line of the eSuperbill and the charge screen to ensure the system is pulling in the correct rate and/or activating the sliding fee scale.**

Quick Tips

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- **Highest level provider MUST sign the provider note and the eSuperbill**
- **Be sure that we are using the ALFP1 for Emergency Contractive not S4993**
- **Refer to the policy for correcting documentation for retired/separated employees**

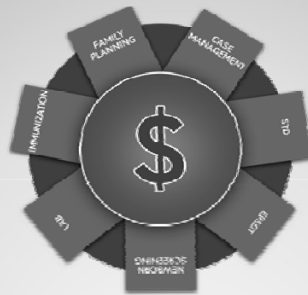
Quick Tips

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- **Incomplete exams are not to be billed to a payer.**
- **Questions? Contact your District or CBU Representative**

Quick Tips

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Questions

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