

# New Enhancements

Med Tech has been busy keeping up with the ever-changing NPI issues over the past year. Prior to that we were in the process of updating our system based on your input and requests. Now that NPI is about done we're finally ready to implement several major updates. We feel these changes will make the system easier to use and more flexible. We do listen to suggestions and we try our best to implement them into our system. If you've checked our website, you've seen some of these enhancement under the [What's New](#) link from our home page.

Currently this latest major upgrade has been beta tested at two of our clients for approximately 2 months and is running smoothly. The clients who have been testing the enhancements absolutely love the newest features. These enhancements include:

1. Setting an insurance company as inactive with an inactive date for specific patients who change insurance.
2. Ability to override **PRINT CLAIM 'N'** when printing paper claims to print secondary crossovers that are supposed to crossover but don't.
3. Ability to track billing history from Patient Inquiry for the last (3) three bill dates for both primary and secondary claims.
4. Capability to find patients by their insurance id numbers through the Inquiry Menu.
5. Ability to locate "out of balance" accounts in the Month-End program menu.

## Inactive Flag with Date

In the Patient Master File, under Insurance Information, an **Inactive Flag** and **Date** have been added. If you select the new line 13 and type "Y" for being inactive, the date prompt will appear. **Inactive** meaning the patient still has procedures tied to this insurance company but switched insurance companies for future billing. This feature coordinates with Change Responsibility Status, Procedure Posting and Payment posting.

**Please note that you must also change the insurance coverage for inactive companies to "other", and make sure that there is an active primary company if the patient has insurance coverage.** The system will not let you post procedures to an inactive company.

The screenshot shows a window titled 'RMPAT4' with a blue header. The main content is a list of insurance records for patient account number 8771. The records are displayed in a table-like format with columns for insurance company, name, and other details. The current record is for AETNA, RIETH, DAWN, M. The 'Inactive' field is highlighted in yellow, and a date prompt 'Enter Inactive Date: 07/30/08' is visible next to it. The bottom of the screen shows a 'SELECT:' prompt and '(R) Next Record'.

| Acct#:                           | 8771       | ***                  | Patient Insurance Records | *** |
|----------------------------------|------------|----------------------|---------------------------|-----|
| AETNA                            |            | RIETH                | DAWN                      | M   |
| 1. Insurance Company Number..... | 26         |                      |                           |     |
| 2. Insured Party ID #.....       | AETNA INS  |                      |                           |     |
| 3. Insurance Coverage.....       | 2          | Secondary            |                           |     |
| 4. Group Number.....             |            |                      |                           |     |
| 5. Service Code.....             |            |                      |                           |     |
| 6. Insured Party Name.....       | RIETH      | DAWN                 | M                         |     |
| 7. Insured's Sex.....            | F          |                      |                           |     |
| 8. Insured's D.O.B.....          | 06/03/1970 |                      |                           |     |
| 9. Relationship to Insured.....  | 1          | Self                 |                           |     |
| 10. ADC number.....              | 000        |                      |                           |     |
| 11. Print Claim Form (Y/N).....  | Y          |                      |                           |     |
| 12. Comment.....                 |            |                      |                           |     |
| 13. Inactive (Y/N).....          | Y          | Enter Inactive Date: | 07/30/08                  |     |

SELECT: (R) Next Record

## Change Responsibility Status

With the new update, you can no longer transfer responsibility to an inactive insurance company (accidentally). The system will warn you that the company you are trying to transfer to is inactive. You can still transfer from an inactive company to an active company.

```
MEDSI012
RESPONSIBILITY STATUS TRANSFER
ACCOUNT NUMBER :8771                RIETH                DAWN                M
CHANGE THE STATUS OF PROCEDURES WHICH ARE
CURRENTLY THE RESPONSIBILITY OF : AETNA
TRANSFER TO THE RESPONSIBILITY OF : _
IN-ACTIVE INSURANCE: BLUE CROSS BLUE SHIELD
Enter (P) for patient or Insurance Company Number
Type the HELP (HOME) key to scroll thru Insurance Companies
```

## Procedure Posting with Inactive Flag set

When entering new procedures you **cannot** post a charge to an inactive company. If you do not have a primary insurance for the patient that is active you will see the message displayed below. If the patient has insurance coverage you must have an active insurance company to post to. If you answer "Y", you can then add another insurance company. If you answer "N", you will be able to continue posting a procedure as patient responsibility only!

```
MEDSI001
PROCEDURE ENTRY
Patient Name          D.O.B.      Insured's Name
RIETH                DAWN        M      06/03/1970  RIETH                DAWN        M
Patient Address      Sex         Insured's I.D. No.
8040 CORPORATE CIR   F          BCBS
NORTH ROYALTON      OH 44133
Other Insurance      Insured's Address
AETNA                8040 CORPORATE CIR
P.O. BOX 5569        NORTH ROYALTON      OH 44133
AKRON                ,OH 44333
Facility              Doctor
THOMAS H. KUNZEL, DPM
PRIMARY              Secondary
PRIMARY INSURANCE MARKED IN-ACTIVE
AETNA
P.O. BOX 5569
AKRON                ,OH
Other: MEDICARE
THIS ACCOUNT HAS NO ACTIVE PRIMARY INSURANCE - ADD ONE? _
```

## Payment Posting with Inactive Flag set

You can post payments from inactive companies. You cannot transfer responsibility to an inactive company (because they are inactive). Also please note the five (5) character rejection code. This is what is called an alphanumeric field, meaning you can type anything you want in the rejection code field. **It does not reference any company's specific rejection or remark codes. Our suggestion is to formulate global rejection codes that you can relate to. For example a missing NPI code, which could be a M110 for Medicare, might be a J0279 for Blue Cross. If you enter NONPI as the rejection code for both you can easily tell what the rejection was without having to review the EOMB. By using this method regardless of the specific company's rejection or remark code you will always be able to distinguish the rejection/remark code.**

| L | SERVICE DATE | COMP NO | PROC CODE | CHARGES | OPEN BALANCE | ALLOWED | DEDUC | CREDITED | ADJUST | S |
|---|--------------|---------|-----------|---------|--------------|---------|-------|----------|--------|---|
| 1 | 07/30/08     | 26      | 11719     | 30.00   | 9.00         |         | 0.00  | 5.00     |        | 4 |

Payment by Check 54321 Date : 08/01/08  
From Insurance Co. AETNA

1 MEDICARE 877 BLUE CROSS BLUE SHIELD  
26 AETNA

Paid: 5.00 Remain: Deduct: Remain:

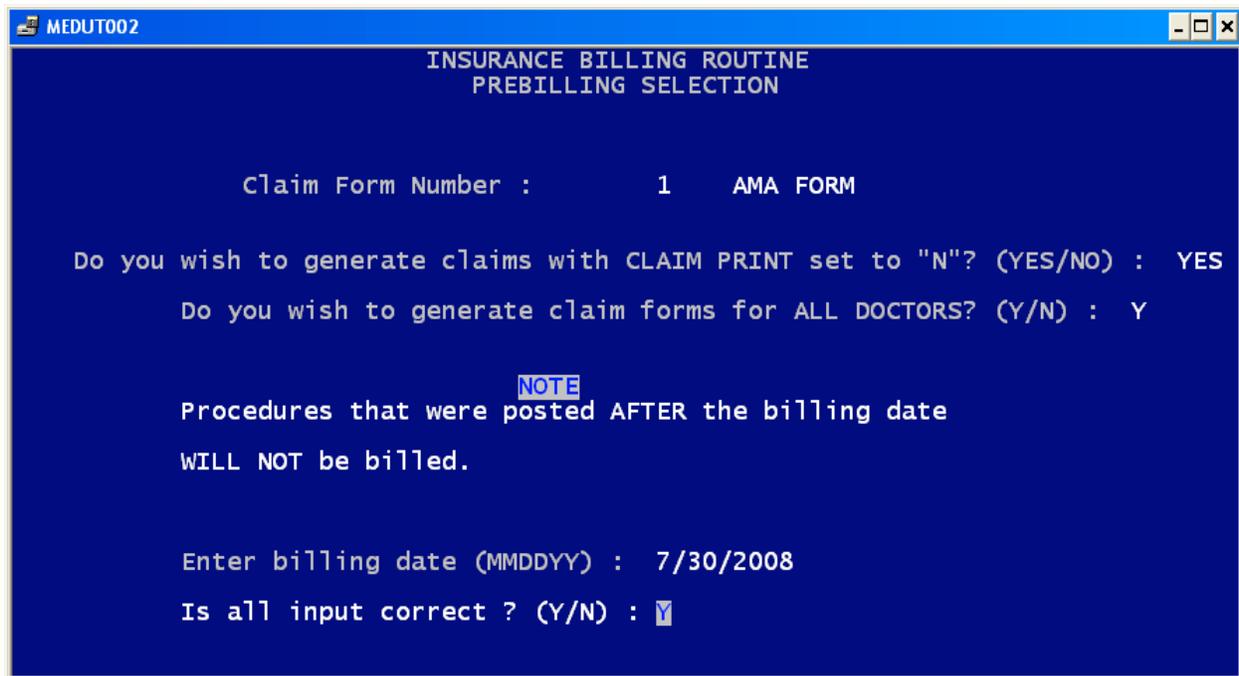
Enter REJECTION Code: MA315

## Claim Print "N"

In some cases, primarily Medicare, a primary claim will not always crossover automatically to the secondary insurance company even though the primary EOMB says it will. The new option when printing claims will allow you to print "ALL" paper claims regardless of the **PRINT CLAIM 'N'** setting in the Patient Insurance record.

***Please Note: This can be a dangerous selection as it will print claims for ALL secondaries regardless of the crossover setting!***

Please keep in mind when you are posting payments, you determine if the secondary claim should print on paper by entering 'Y' or 'N' at the PRINT CLAIM field.



## **Billing History**

The new update now includes the capability to retain three billing dates for primary claims as well as three billing dates for secondary claims. This feature will allow you to see the original date the claim was first billed for each procedure line as well as two subsequent bill dates.

When using Patient Inquiry, by selecting items 3 (all transactions) or 4 (open transactions) and viewing specific dates of service to display the detail of the payments, at the bottom of the screen you will see a new option - "H" for Billing History.

In the Billing History, the billed dates are stored and displayed with the insurance company number and name it was billed to, on what date it was billed, and how it was billed, whether as a primary or secondary claim.

The most current date billed for any procedure remains in the detailed entry on the first screen just as before.

**NOTE:** The logging of dates take effect after the update is downloaded to your computer. Previously billed claims will not have a billing history.

Also please note the rejection code listed in the far right column next to the \$5.00 Aetna payment. This was entered through payment posting when the Aetna payment was posted.

PATINQ

Acco. # 8771 RIETH DAWN M Phone...: (440) 884-3033  
 8040 CORPORATE CIR Cellular.:  
 NORTH ROYALTON, OH 44133

Patient: 4.00 Insurance: 0.00

PAYMENTS

| DATE     | AMOUNT | TYPE       | ORG | VOUCHER | INS CO. NO | COMPANY | REJECT      |
|----------|--------|------------|-----|---------|------------|---------|-------------|
| 07/30/08 |        | TRIM NAILS |     |         | 30.00      | 26.00   | 4           |
| 07/30/08 | 15.00  | PAYM       | INS | CHK     | 1234       | 1       | MEDICARE    |
| 07/30/08 | 6.00   | ADJ        | INS | CHK     | 1234       | 1       | MEDICARE    |
| 08/01/08 | 5.00   | PAYM       | INS | CHK     | 54321      | 26      | AETNA MA315 |

THIS PROCEDURE IS THE RESPONSIBILITY OF THE GUARANTOR  
 INS. CO. 1 MEDICARE WAS BILLED ON 07/30/2008  
 INS. CO. 26 AETNA WAS BILLED ON 07/31/2008

RETURN to continue [W] Print walkout [R] Re-bill Claim [H] Billing History \_

PATINQ

Acco. # 8771 RIETH DAWN M Phone...: (440) 884-3033  
 8040 CORPORATE CIR Cellular.:  
 NORTH ROYALTON, OH 44133

Patient: 4.00 Insurance: 0.00

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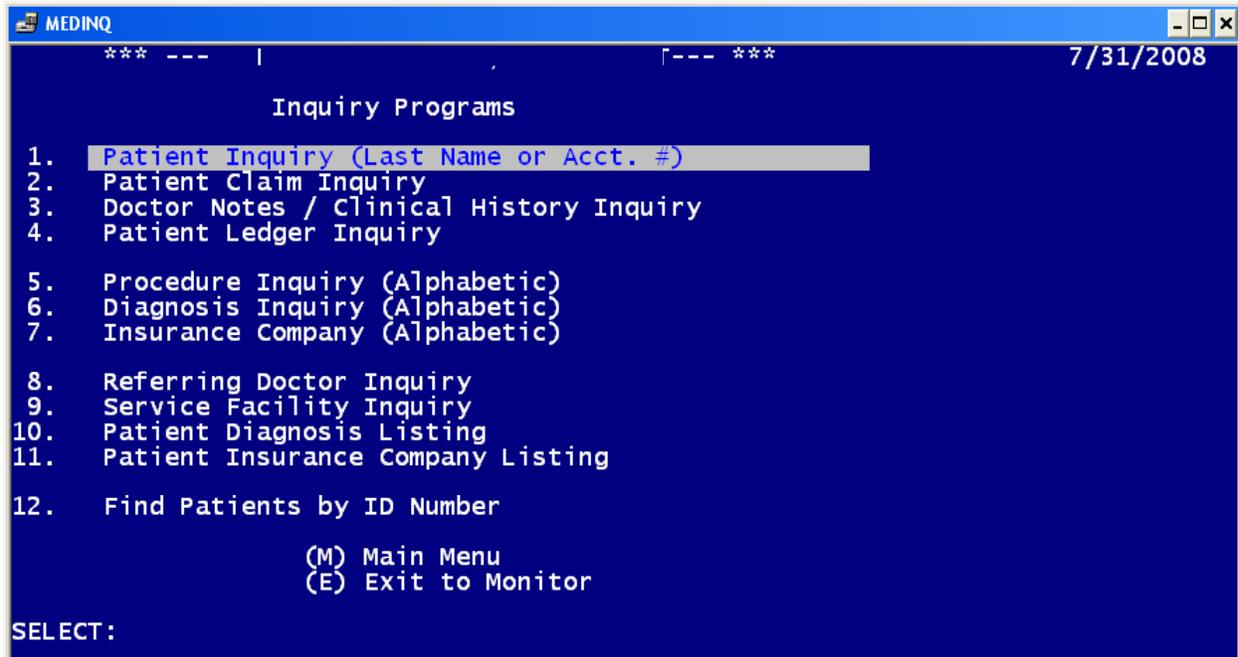
**BILLING HISTORY**

07/30/08 TRIM NAILS  
 INS. CO. 1 MEDICARE WAS BILLED AS PRIMARY ON 07/30/2008  
 INS. CO. 26 AETNA WAS BILLED AS SECONDARY ON 07/31/2008

[P] Previous Page [E] Exit to Patient Inquiry \_

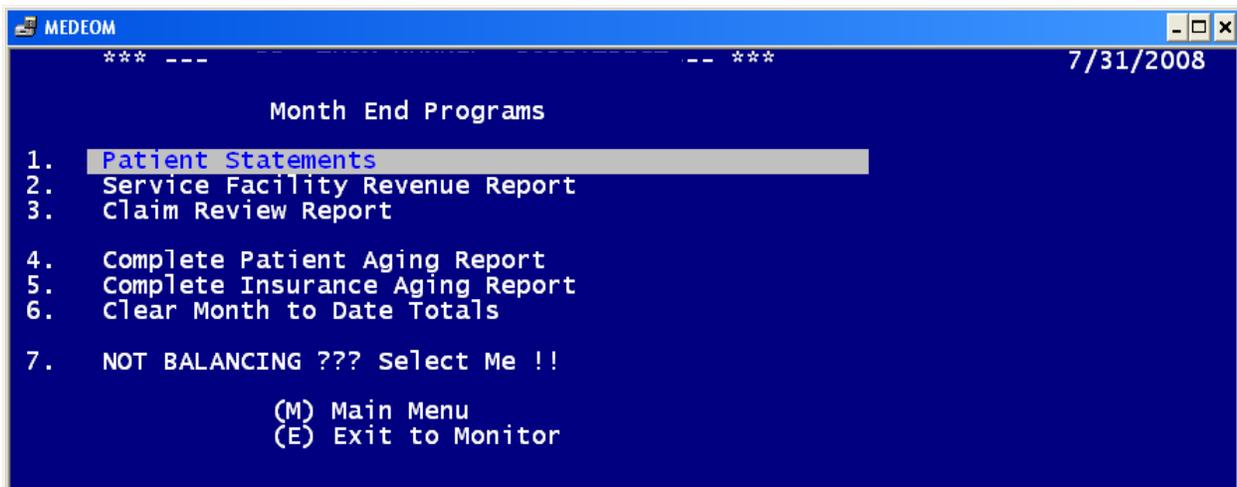
## Finding Patients by ID numbers

In the Inquiry Programs Menu, the added option to find Patients by ID number is located at the bottom (Item 12). It will allow you to type in any patients insurance id number to locate that patient giving you information regarding that patient.



## Month-End Balancing Help

As some of our clients balance their systems at month-end, there are times in which your revenue report is different from your aging report. We've added a new feature to help you in balancing. **NOTE: Everyone (except you) must be exited out of the Medical System when selecting this feature.** The only person who is allowed to be Medical is the person balancing. The steps are self-explanatory, but it **critical** that you read your screens before proceeding to the next step. If you select this option and wish for us to be on-line with you the first time, please do not hesitate to call the office and we can help you perform the month-end balancing for the first time.



## Patient Inquiry Changes

Please note that the patient inquiry contains new information related to the "active"/"inactive" flag in the patient insurance record. If a company is inactive it will display INACTIVE with the inactive date, i.e. company 877 below.

The screenshot shows a window titled "PATINQ" with a dark blue background and white text. The window contains the following information:

Acco. # 8771 RIETH 8040 CORPORATE NORTH ROYALTON, OH 44133 DAWN CIR M Phone...: (440) 884-3033 Cellular: [REDACTED] Patient: 0.00 Insurance: 9.00

**Insurance Company:**

| Company # | Phone         | Type      | Company Name           | Address         | City         | State | Zip   | Member Name | Member ID | Status              |
|-----------|---------------|-----------|------------------------|-----------------|--------------|-------|-------|-------------|-----------|---------------------|
| 1         | (614)464-9924 | Primary   | MEDICARE               | P.O. BOX 182957 | COLUMBUS, OH |       | 43218 | RIETH DAWN  | M         |                     |
| 877       |               | Secondary | BLUE CROSS BLUE SHIELD | P.O. BOX 10035  | TOLEDO, OH   |       | 43699 | RIETH DAWN  | M         | INACTIVE 07/31/2008 |
| 26        | (800)645-5677 | Other     | AETNA                  | P.O. BOX 5569   | AKRON, OH    |       | 44333 | RIETH DAWN  | M         |                     |

"DOWN-ARROW" to End\_