



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Accounts Receivable

(BAR)

Addendum to User Manual

Version 1.8 Patch 34
March 2023

Office of Information Technology
Division of Information Resource Management

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Preface

The purpose of this addendum is to provide information about the most recent patch for the Accounts Receivable (BAR) package. The system is designed to automate the management of receivables in the Resource and Patient Management System (RPMS).

Please review and distribute this addendum to your accounts receivable staff prior to installation of the patch. Refer to the notes file released with this patch for technical documentation.

References to “Change Requests” (CRs), “HEAT”, “Service Now” (or SNOW), and “ADO” (or Azure DevOps) will be seen throughout the document. A Change Request refers to a request to update or modify the software to correct or add additional functionality that will support the mission and goals of the Indian Health Service. HEAT is the retired software used to document issues reported by the field. SNOW has replaced HEAT as a means of tracking reported issues and documenting support requests. ADO is a system used to track software change requests and has replaced Serena, which was originally used to document the software change request.

<p>Note: This addendum is not intended to be a process guide. Consult your Business Office Manager or Area Business Office Coordinator for questions regarding business processes.</p>

1.0 Introduction

Patch 34 provides enhancements and minor corrections to version 1.8 of the Accounts Receivable application. Please review the changes in this addendum and add a copy to any printed documentation your site may be using for Accounts Receivable. These changes will be integrated into future versions of the software and future versions of the user manual and will no longer be considered a patch or an addendum at the time of the next version release.

Please note that the addendum provides guidance on changes made in the patch that are relevant to the user. To see a list of all changes made in a patch, refer to the patch notes for each of the respective patches.

1.1 Summary of Changes

ADO60913 / CR12235 - updated the A/R EDI STND CLM ADJ REASONS file and the A/R EDI REMARK CODES file with Claim Adjustment Reason Codes and Remittance Advice Remark Codes as provided by the American National Standards Institutes (X12) on August 1, 2022 and November 1, 2022, respectively. These nationally published code lists can be viewed on the following website: <https://x12.org/codes>. In addition, a new write-off code was added for manual posting: 431 AR BALANCE RECONCILIATION-UFMS.

ADO76207 / CR12267 - a change was made to the Upload from Third Party Bill File option (UPL) to allow for uploading bill numbers that contain up to 11 characters, including the alpha suffix. Also added help text when the UPL option is accessed and at the UPL bill selection prompt when a “?” is entered or when more than 11 characters are entered.

- Reported as a helpdesk ticket by Northern Navajo Medical Center (INC0095556)

ADO77921 - corrected an issue in the A/R Collection Batch/Item file that caused the Check Posting Summary (COL > CPS) to display all collection batch items as being item #1, regardless of what the item number really was (2, 3, 4, etc.).

- Reported as a helpdesk ticket by Phoenix Indian Medical Center (INC0143366)

ADO78239 - made changes to the UFMS cashiering export process behind the scenes that significantly speeds up the creation and export of UFMS A/R files. Prior to Patch 34, the export process reviewed all transactions going back to 10/1/2008. Patch 34 changes this so that the export process only reviews transactions that are relevant to the transactions being exported.

- Reported as a helpdesk ticket by Yakama Indian Health Center (INC0137882)

ADO80817 - updated the A/R Bill/IHS file to capture and store additional data from the 3P Bill file. Also corrected an issue with the 3P CLAIM STATUS field in the A/R Bill/IHS file to ensure that the 3P CLAIM STATUS is populated correctly on the A/R Bill.

2.0 Patch 34 details

2.1 Upload from Third Party Bill File

A change was made to the Upload from Third Party Bill File option (UPL) to allow for uploading 3P bills that contain up to 11 characters, including the alpha suffix. In addition, help-text will be displayed when the UPL option is accessed and at the UPL bill selection prompt when the user types ?? or enters a number that contains more than 11 characters.

When the UPL option is accessed, help-text will be displayed that explains what the option is used for and how it works.

```

+-----+
|          ACCOUNTS RECEIVABLE SYSTEM - VER 1.8p34          |
+                   A/R MASTER MENU                   +
|                   2017 DEMO HOSPITAL                   |
+-----+
User: POSTER,SUPER          BUSINESS OFFICE          4-OCT-2022 12:57 PM

ACM   Account Management Menu ...
COL   Collection Menu ...
DCM   Debt Collection Menu ...
MAN   Manager ...
PAS   Patient Account Statement Menu ...
PST   Posting Menu ...
ROL   Rollback Bills to 3-Party
RPT   Report Menu ...
SVC   Switch Service/Section
UA    User Assistance
UPL   Upload from Third Party Bill File
-----
CSH   Cashiering Options ...

Select A/R MASTER MENU <TEST ACCOUNT> Option: UPL  Upload from Third Party Bill
File

This option allows you to upload an individual bill from Third Party Billing.
You may upload a bill that has not previously been uploaded.
If you upload a bill that exists, it will only update existing bill entries.

Enter your Current Signature Code:

```

Figure 2-1: Menu option help-text in the UPL option

To view the help-text at the ‘Select 3P Bill’ prompt, type ?? and press <enter>. This help-text will also be displayed if the user types in more than 11 characters.

```

Select A/R MASTER MENU <TEST ACCOUNT> Option: UPL Upload from Third Party Bill File
This option allows you to upload an individual bill from Third Party Billing.
You may upload a bill that has not previously been uploaded.
If you upload a bill that exists, it will only update existing bill entries.

Enter your Current Signature Code:      SIGNATURE VERIFIED

Please pick the satellite you wish to load

Select A/R PARENT/SATELLITE/IHS LOCATION: 2017 DEMO HOSPITAL  2017 DEMO HOSPITAL

Select 3P Bill: ??

This response must be a valid 3P Bill Number and must contain at least 2
characters and no more than 11 characters, and must not contain embedded
up-arrow.
    
```

Figure 2-2: Help-text displayed at the 'Select 3P Bill' prompt

2.2 Fields Added to the A/R Bill/IHS File

The A/R Bill/IHS file was updated to capture and store additional information from the 3P Bill. Please refer to Appendix A in this document for a list of new fields that could be populated in the A/R Bill/IHS file as of this patch. To view the data on a particular bill, use the 'Bill Inquire' command in any of the posting options. The example below was taken from the Post Adjustments option (PST > ADJ).

```

Claims for DEMO,PATIENT from 09/20/2022 to 09/20/2022                               Page: 1
-----
LN#  DOS      Claim #                Billed   Current   Current   Current
                Claim #                Amount   Payments Adjust.   Balance
-----
  1  09/20/22  123456A-DH-1111        299.00     0.00     0.00     299.00
-----
Select Command (Line # 1) : ??

                               Select Command Options
                               -----

A or 2 = Adjustments (Write-Off, Deductible, Non-Covered, Non-Pay, Penalty)
B = Bill Inquire
D = Patient Demographics
E = Edit a transaction not yet posted to A/R
H = History of Bill Transactions ($ only)
I = Insurer Demographics
M = Message
Q or 3 = Quit - Ends the data entry for this Patient and allows for posting to
A/R
R = Rollover
T = Toggle Display - Current transaction list.

Select Command (Line # 1) : B

OUTPUT BROWSER                               Nov 03, 2022 09:00:57                               Page: 1 of 3
    
```

```

IEN: 6126                                BILL NUMBER: 123456A-DH-1111
ASUFAC-IEN: 606415-6126                 A/R ACCOUNT: DEMO INSURANCE
BILL TYPE (PRIM OR ROLL): PRIMARY        BILLED DATE: OCT 16, 2022@11:23:04
PARENT LOCATION: 2017 DEMO HOSPITAL      A/R BILLING SITE/ASUFAC: 606415
PARENT A/R SERVICE SECTION: BUSINESS OFFICE
ENTRY TYPE: 3P UPLOAD                    AMOUNT BILLED: 299
TOTAL BILL AMOUNT: 299                   CURRENT BILL AMOUNT: 299
CURRENT BILL STATUS: OPEN                3P IEN (DA): 6126
3P APPROVE DATE: OCT 16, 2022@11:23:04
3P UPLOAD CREDIT: 0                      3P DUZ(2): 8241
PATIENT: DEMO,PATIENT                    DOS BEGIN: SEP 20, 2022
DOS END: SEP 20, 2022                    PATIENT SSN: XXXXX1234
PATIENT TYPE: ??                          PATIENT SUFAC/HRN: 1111
VISIT LOCATION: 2017 DEMO HOSPITAL        CLINIC TYPE: GENERAL
PRIMARY PROVIDER: DOCTOR,DEMO            VISIT TYPE: OUTPATIENT
BEN/NON-BEN: BENEFICIARY                 PATIENT NAME (FT): DEMO,PATIENT
PRIMARY DEBTOR: DEMO INSURANCE            SECONDARY DEBTOR: MEDICAID
+      Enter ?? for more actions          >>>
+      NEXT SCREEN      -      PREVIOUS SCREEN      Q      QUIT
Select Action: +//

```

Figure 2-3: Using the Bill Inquire command in the Post Adjustments option

Appendix A Fields Added to A/R Bill/IHS File

The following is a list of fields that were added to the A/R Bill/IHS file in Patch 34 along with their corresponding 3P Bill fields.

Table A-1: Fields Added to A/R Bill/IHS File

3P Bill Field #	3P BILL Field Name	A/R Bill/IHS Field #	A/R Bill/IHS Field Name
N/A		4	BILL TYPE (PRIM OR ROLL)(*field not new, renamed)
.02	BILL TYPE	27	UB BILL TYPE
.022	MANUAL, SPLIT CLAIM	119	MANUAL, SPLIT CLAIM
.06	EXPORT MODE	118	EXPORT MODE
.09	PROCEDURE CODING METHOD	120	PROCEDURE CODING METHOD
.114	MASTER TAX ID#	121	MASTER TAX ID#
.1212	TYPE OF TRANSPORT	703	AMB TYPE OF TRANSPORT
.1213	TRANSPORTED TO/FOR	704	AMB TRANSPORTED TO/FOR
.1214	POINT OF PICKUP MODIFIER	705	AMB POINT OF PICKUP MODIFIER
.1215	MEDICAL NECESSITY IND	706	AMB MEDICAL NECESSITY IND
.1216	DEST MODIFIER	707	AMB DEST MODIFIER
.122	POINT OF PICKUP ORIGIN	708	AMB POINT OF PICKUP ORIGIN
.123	POINT OF PICKUP ADDRESS	709	AMB POINT OF PICKUP ADDRESS
.124	POINT OF PICKUP CITY	710	AMB POINT OF PICKUP CITY
.125	POINT OF PICKUP STATE	711	AMB POINT OF PICKUP STATE
.126	POINT OF PICKUP ZIP	712	AMB POINT OF PICKUP ZIP
.127	DESTINATION	713	AMB DESTINATION
.128	COVERED MILEAGE	714	AMB COVERED MILEAGE
.129	NON-COVERED MILEAGE	715	AMB NON-COVERED MILEAGE
1601	DESTINATION NAME	716	AMB DESTINATION NAME
1602	DESTINATION ADDRESS	717	AMB DESTINATION ADDRESS
1603	DESTINATION CITY	718	AMB DESTINATION CITY
1604	DESTINATION STATE	719	AMB DESTINATION STATE
1605	DESTINATION ZIP	720	AMB DESTINATION ZIP
.14	APPROVING OFFICIAL	215	APPROVING OFFICIAL
.15	DATE/TIME APPROVED	218	APPROVAL DATE

3P Bill Field #	3P BILL Field Name	A/R Bill/IHS Field #	A/R Bill/IHS Field Name
.27	ORIGINAL BILL AMOUNT	28	ORIGINAL BILL AMOUNT
.28	FLAT RATE AMOUNT	29	FLAT RATE AMOUNT
.29	LINE ITEM CONTROL# - FLAT RATE	1001	LINE ITEM CONTROL# - FLAT RATE
.43	NUMBER X-RAYS INCLUDED	721	NUMBER X-RAYS INCLUDED
.44	ORTHODONTIC RELATED	722	ORTHODONTIC RELATED
.45	ORTHODONTIC PLACEMENT DATE	723	ORTHODONTIC PLACEMENT DATE
.46	PROTHESIS INCLUDED	724	PROTHESIS INCLUDED
.47	PRIOR PLACEMENT DATE	725	PRIOR PLACEMENT DATE
.48	CASE NUMBER	726	CASE NUMBER
.49	RESUBMISSION CONTROL NUMBER	727	RESUBMISSION CONTROL NUMBER
.51	ADMIT TYPE	728	ADMIT TYPE
.511	REFERRAL NUMBER	729	REFERRAL NUMBER
.512	PRIOR AUTHORIZATION NUMBER	730	PRIOR AUTHORIZATION NUMBER
.52	ADMISSION SOURCE/NEWBORN CODE	731	ADMISSION SOURCE/NEWBORN CODE
.525	NEWBORN DAYS	732	NEWBORN DAYS
.53	DISCHARGE STATUS	733	DISCHARGE STATUS
.54	PSRO APPROVAL CODE	734	PSRO APPROVAL CODE
.61	ADMISSION DATE	735	ADMISSION DATE
.62	ADMISSION HOUR	736	ADMISSION HOUR
.63	DISCHARGE DATE	737	DISCHARGE DATE
.64	DISCHARGE HOUR	738	DISCHARGE HOUR
.66	NON-COVERED DAYS	739	NON-COVERED DAYS
.711	RELEASE OF INFORMATION DATE	740	RELEASE OF INFORMATION DATE
.712	ASSIGNMENT OF BENEFITS DATE	741	ASSIGNMENT OF BENEFITS DATE
.713	PROPERTY/CASUALTY CLAIM NUMBER	742	PROPERTY/CASUALTY CLAIM NUMBER
.714	HEARING/VISION RX DATE	743	HEARING/VISION RX DATE
.715	START DISABILITY DATE	744	START DISABILITY DATE
.716	END DISABILITY DATE	745	END DISABILITY DATE
.717	DATE LAST WORKED	746	DATE LAST WORKED
.718	DATE AUTH TO RETURN TO WORK	747	DATE AUTH TO RETURN TO WORK

3P Bill Field #	3P BILL Field Name	A/R Bill/IHS Field #	A/R Bill/IHS Field Name
.719	ASSUMED CARE DATE	748	ASSUMED CARE DATE
.72	SERVICE TO DATE	749	SERVICE TO DATE
.721	RELINQUISHED CARE DATE	750	RELINQUISHED CARE DATE
.722	PROP/CASUALTY DT 1ST CONTACT	751	PROP/CASUALTY DT 1ST CONTACT
.723	PATIENT PAID AMOUNT	752	PATIENT PAID AMOUNT
.724	SPINAL MANIPULATION COND CODE	753	SPINAL MANIPULATION COND CODE
.725	PROP/CASUAL PATIENT ID	754	PROP/CASUAL PATIENT ID
.726	PROP/CASUAL PATIENT NUMBER	755	PROP/CASUAL PATIENT NUMBER
.727	ACUTE MANIFESTATION DATE	756	ACUTE MANIFESTATION DATE
.73	COVERED DAYS	757	COVERED DAYS
.74	RELEASE OF INFORMATION	758	RELEASE OF INFORMATION
.75	ASSIGNMENT OF BENEFITS	759	ASSIGNMENT OF BENEFITS
.816	ACCIDENT STATE	760	ACCIDENT STATE
.82	INJURY DATE	761	INJURY DATE
.825	EXP35 FL17 PROVIDER TYPE	762	EXP35 FL17 PROVIDER TYPE
.83	ACCIDENT TYPE	763	ACCIDENT TYPE
.84	ACCIDENT HOUR	764	ACCIDENT HOUR
.857	E-CODE	765	E-CODE
.858	E-CODE (2)	766	E-CODE (2)
.859	E-CODE (3)	767	E-CODE (3)
.86	DATE OF FIRST SYMPTOM	768	DATE OF FIRST SYMPTOM
.87	DATE OF FIRST CONSULTATION	769	DATE OF FIRST CONSULTATION
.88	REFERRING PHYSICIAN	770	REFERRING PHYSICIAN
.884	REFERRING PHYS ID QUALIFIER	771	REFERRING PHYS ID QUALIFIER
.885	REFER PHYSICIAN ID NO.	772	REFER PHYSICIAN ID NO.
.886	REFER PHYSICIAN PERSON CLASS	773	REFER PHYSICIAN PERSON CLASS
.887	REF PHYSICIAN PROVIDER CLASS	774	REF PHYSICIAN PROVIDER CLASS
.888	REFER PHYSICIAN TAXONOMY CODE	775	REFER PHYSICIAN TAXONOMY CODE
.889	REFER PROV NPI	776	REFER PROV NPI
.89	DATE OF SIMILAR SYMPTOM	777	DATE OF SIMILAR SYMPTOM

3P Bill Field #	3P BILL Field Name	A/R Bill/IHS Field #	A/R Bill/IHS Field Name
.91	EMPLOYMENT RELATED	778	EMPLOYMENT RELATED
.911	DATE LAST SEEN	779	DATE LAST SEEN
.912	SUPERVISING PROVIDER	780	SUPERVISING PROVIDER
.916	DELAYED REASON CODE	781	DELAYED REASON CODE
.922	IN-HOUSE CLIA	782	IN-HOUSE CLIA
.923	REF LAB CLIA	783	REF LAB CLIA
.99	PRE-PAYMENT AMOUNT	784	PRE-PAYMENT AMOUNT
10	HCFA 1500-B LINE 19	785	HCFA 1500-B LINE 19
11, .01, .02	Visits, VISIT, and VISIT STATUS	1101, .01, .02	Visits, VISIT and VISIT STATUS
13, .01	INSURER (multiple)	1301, .01	INSURER (multiple)
13, .011	REPLACEMENT INSURER	1301, .011	REPLACEMENT INSURER
13, .02	PRIORITY	1301, .02	PRIORITY
13, .03	STATUS	1301, .03	STATUS
13, 11, .01	COVERAGE TYPE	130111, .01	COVERAGE TYPE
17, .01, .02, .05	DIAGNOSIS, PRIORITY, PRESENT ON ADMISSION INDICATOR (multiple)	1701, .01, .02, .05	DIAGNOSIS, PRIORITY, PRESENT ON ADMISSION INDICATOR
19, .01	ICD PROCEDURE (multiple)	1901, .01	ICD PROCEDURE
19, .02	PRIORITY	1901, .02	PRIORITY
19, .03	DATE OF SERVICE	1901, .03	DATE OF SERVICE
19, .04	PROVIDER NARRATIVE	1901, .04	PROVIDER NARRATIVE
41, .01, .02	PROVIDERS (multiple)	4101, .01, .02	PROVIDERS (multiple)
	ITEM multiple:		
.01	a. CPT code	.11	CPT CODE
.22	b. CPT Narrative	3, 17	CPT NARRATIVE
23, .24, 25/27/43, .19	c. NDC (line item)	3, .12	NDC/MEDICATION

3P Bill Field #	3P BILL Field Name	A/R Bill/IHS Field #	A/R Bill/IHS Field Name
21, .09 23, .31 27, .05 33, .13 35, .05 37, .06 39, .06 43, .05 47, .05	d. MODIFIER	3, 13	MODIFIER
21, .11 23, .32 27, .08 33, .14 35, .06 37, .07 39, .14 43/47, .08	e. SECOND MODIFIER	3, 14	SECOND MODIFIER
21, .12 23, .33 27, .09 33, .15 35, .07 37, .08 39, .19 43, .09 47, .09	f. THIRD MODIFIER	3, 15	THIRD MODIFIER
37, .21	g. TEST RESULT	3, 23	TEST RESULT
37/43/47, .13	h. IN-HOUSE CLIA#	3, 21	IN-HOUSE CLIA#
37/43/47, .14	i. REFERENCE LAB CLIA#	3, 22	REFERENCE LAB CLIA#

Acronym List

Acronym	Meaning
3P	Third Party
ADO	Azure DevOps
A/R	Accounts Receivable
CR	Change Request
EDI	Electronic Data Interchange
HEAT	OIT Helpdesk Ticketing System (Retired)
IHS	Indian Health Service
IT	Information Technology
OIT	Office of Information Technology
RPMS	Resource and Patient Management System
SNOW	Service Now (OIT Helpdesk Ticketing System)
UFMS	United Financial Management System

Contact Information

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