RESOURCE AND PATIENT MANAGEMENT SYSTEM

Contract Health System (ACHS)

Patch 6 Addendum

Version 3.1 Patch 6
June 2003

Information Technology Support Center
Division of Information Resources
Albuquerque, New Mexico
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1.0 Introduction

Please review these changes and add a copy of them to any printed documentation your site may be using for ACHS 3.1. These changes will be integrated into future versions of the software and user manuals and will no longer be considered an addendum at the time of the next release.

Patch 6 of the Contract Health System contains following changes:

- Added new options for Denial Appeals: Appeal Status Edit and Denial Status Edit. (Section 2.1 and 2.2)
- Added new option, Send Approval message to FI. (Section 2.3)

Note: For a full list of changes in patch 6, please refer to the patch 6 notes file.

This document also contains the Patch 5 addendum information for ease of use.

Patch 5

With the release of Patch 5 in November of 2002 the following HIPAA-related changes were made:

- A new 278 menu with a new X12 Transaction 278 Processing option (section 3.0)

Patch 5 also contains a number of non-HIPAA related fixes and modifications. Please refer to the patch 5 notes file for a complete list of changes.
2.0 Patch 6

2.1 Appeal Status Edit (DAE)

This option allows for the addition and edit of the appeal status of patient appeals for payment reconsideration by IHS. You can track when the appeal entry was entered followed by its status (upheld, reversed etc.) and the respective appeal level (Local facility, Area, Headquarters). For Tribal programs, Second Level and Final Level were added for the various entities that consider the appeal in the typical Contract Health Service tri-level process.

Editing an Appeal Status

1. Type DEN at the “Select Contract Health System Option:” prompt.

2. Type APP at the “Select CHS Denial/Deferred Services Option:” prompt.

3. Type DAE at the “Select Denial Appeal Status Menu Option:” prompt.

******************************************************************************
*   Indian Health Service        *
* CONTRACT HEALTH MGMT SYSTEM   *
*    Version 3.1, Jun 11, 2001   *
******************************************************************************

DEMO TRIBE HEALTH CLINIC

DOC Document Generation ...
PAY Pay/Edit Documents ...
PRT Document Printing ...
ACC Account Balances ...
PT Patient Data
VEN Provider/Vendor Data
DIS Display Documents ...
DCR Document Control Register
MGT Facility Management ...
DEN CHS Denial/Deferred Services ...
XXXX CHS Programmer Utilities

Select Contract Health System Option: DEN CHS Denial/Deferred Services

******************************************************************************
*   Indian Health Service        *
* CONTRACT HEALTH MGMT SYSTEM   *
*    Version 3.1, Jun 11, 2001   *
******************************************************************************

DEMO TRIBE HEALTH CLINIC
4. Type the denial number or patient number at the “Enter the Denial Number or Patient:” prompt. The system will display the patient’s information.

5. Press the Return key at the “Is This Correct:” prompt if the patient information is correct. The system will then display the patient’s CHS denial document information.

6. Type 10 (APPEAL STATUS) at the “Enter Number Of Field To Edit or <RETURN> To Accept: (#-#):” prompt.

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**Figure 2-1: Editing an appeal (steps 1-3)**

4. Type the denial number or patient number at the “Enter the Denial Number or Patient:” prompt. The system will display the patient’s information.

5. Press the Return key at the “Is This Correct:” prompt if the patient information is correct. The system will then display the patient’s CHS denial document information.

6. Type 10 (APPEAL STATUS) at the “Enter Number Of Field To Edit or <RETURN> To Accept: (#-#):” prompt.
### Contract Health System (ACHS) V 3.1 Patch 6

**DATE ISSUED:** Mar 10, 1997  
**ISSUED BY:** ROGERS, DEMO

1. **DATE MED SVC:** Feb 20, 1996  
2. **DATE OF REQUEST:** Mar 15, 1996  
3. **MEDICAL PRIORITY:** I  
4. **VISIT TYPE:** OUTPATIENT

5. **PRIMARY PROVIDER:** DEMO MEDICAL CENTER HOSPITAL  
6. **SECONDARY PROVIDERS:** DEMO EMERGENCY PHYSICIANS  
   DEMO ARTS LABORATORY INC  
   DMSA

7. **PRIMARY DENIAL REASON:** EMER. SVC: NO APRVL W/IN 72 HRS  
8. **OTHER RESOURCES:** YES  
9. **OTHER IHS RESOURCES:** NONE  
10. **APPEAL STATUS:** APPEAL PENDING  
11. **APPEAL TRANSACTION RECORDS:** NONE  
12. **CHS OFFICE COMMENTS:** NONE

* - CHOOSE THESE FIELDS TO SEE FURTHER INFORMATION

**Enter Number Of Field To Edit** or **RETURN** To Accept: (8-12): 10

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**Figure 2-2: Editing an appeal (steps 4-6)**

7. Type the date of the appeal transaction at the “Select Appeal Transaction Date:” prompt. If you are adding a new appeal transaction date, the system will prompt you to confirm your choice.

8. Type the appeal transaction status at the “Appeal Transaction Status:” prompt. Type ?? for a list of available options.

---

**Select APPEAL TRANSACTION DATE:** **APRIL 3 1997**  
**APR 03, 1997**

Are you adding 'APR 03, 1997' as a new APPEAL TRANSACTION DATE (the 1ST for this DENIAL NUMBER)? No// Y (Yes)

**APPEAL TRANSACTION STATUS:** ??

Choose from:
- APPEAL PENDING
- PAYED WITH ADDITIONAL MONEY
- REVERSED AFTER APPEAL
- UPHELD AFTER APPEAL

**APPEAL TRANSACTION STATUS:** **REVERSED AFTER APPEAL**

**Figure 2-3: Editing an appeal (steps 7-8)**

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9. Type the appeal level at the “Appeal Level:” prompt. Type ?? for a list of available options.

10. Type the date the appeal was resolved at the “Appeal Resolve Date:” prompt.

11. Type any comments relating to the appeal (50 characters max) at the “Appeal Comments:” prompt.
12. The system will then display the updated patient’s CHS denial document information.

**APPEAL LEVEL:** ??

Choose from:

- **L** LOCAL SITE - SERVICE UNIT OR HEALTH DIRECTOR
- **A** AREA OFFICE
- **H** IHS HEADQUARTERS
- **S** TRIBAL PROGRAMS (SECOND LEVEL)
- **F** TRIBAL PROGRAMS (FINAL)

**APPEAL RESOLVE DATE:** **APRIL 3 1997 (APR 03, 1997)**

**APPEAL COMMENTS:** WE HAVE REVERSED OUR DECISION

**CHS DENIAL DISPLAY**

**PATIENT:** DEMO, PATIENT **CHART #:** NONE

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**DENIAL NO:** 000-OANY-3 **DENIAL STATUS:** Reversed

**DATE ISSUED:** Mar 10, 1997 **ISSUED BY:** ROGERS, DEMO L

1. **DATE MED SVC:** Feb 24, 1997  
2. **DATE OF REQUEST:** Mar 05, 1997  
3. **MEDICAL PRIORITY:** I  
4. **VISIT TYPE:** OUTPATIENT

5. **PRIMARY PROVIDER:** DEMO MEDICAL CENTER HOSPITAL
6. **SECONDARY PROVIDERS:** DEMO EMERGENCY PHYSICIANS
   DEMO ARTS LABORATORY INC
   DMSA

7. **PRIMARY DENIAL REASON:** EMER. SVC: NO APRVL W/IN 72 HRS
8. **OTHER RESOURCES:** YES
9. **OTHER IHS RESOURCES:** NONE
10. **APPEAL STATUS:** REVERSED AFTER APPEAL
11. **APPEAL TRANSACTION RECORDS:** 1
12. **CHS OFFICE COMMENTS:** NONE

* - CHOOSE THESE FIELDS TO SEE FURTHER INFORMATION

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**Figure 2-4: Editing an appeal (steps 7-11)**

### 2.2 Denial Status Edit (DSE)

This option allows you to edit the status of a denial document. You have the option of Reversing, Canceling, or Activating the denial.

If you use the appeal menu to Reverse a denial then the Denial status will be updated accordingly. This option corrects unintentional cancels and reactivates the appeal.

**Note:** When the denial is active it means it is still upheld as a denial.

**Editing a denial status**

1. Type **DSE** at the “Select Denial Appeal Status Menu Option:” prompt.
2. Type the denial number or patient number at the “Enter the Denial Number or Patient:” prompt. The system will display the patient’s information.

3. Press the Return key at the “Is This Correct:” prompt if the patient information is correct. The system will then display the patient’s CHS denial document information.

4. The system will display the status of the appeal.

5. Type YES at the “Do You Want To Edit The Denial Status?” prompt.

6. Type C (Cancel), R (Reverse), or A (Activate) at the “Cancel, Reverse or Activate this denial? (C/R/A):” prompt.

7. The system will then prompt you to confirm your selection by typing YES at the “Are You Sure You Want To (your selection) This Denial? (Y/N)?” prompt.

8. The system will confirm that you have either Canceled, Reversed, or Activated the denial.
9. Type any comments at the “CHS Office Comments:” prompt. When you are done typing comments, press the Escape key to exit and then press the Return key at the “EDIT Option:” prompt.

10. Press the Return key at the “Do You Want To Edit The Appeal Status? NO/” prompt. See section 2.1 to edit an appeal status.

11. Type another denial number or patient number at the “Enter the Denial Number or Patient:” prompt or press the Return key to exit this option.

<table>
<thead>
<tr>
<th>DO YOU WANT TO EDIT THE DENIAL STATUS? NO// YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cancel, Reverse or Activate this denial? (C/R/A): R</td>
</tr>
<tr>
<td>Are You Sure You Want To Reverse This Denial?</td>
</tr>
<tr>
<td>The status change will be recorded</td>
</tr>
<tr>
<td>Are You Sure You Want To Reverse This Denial? (Y/N)? NO// YES</td>
</tr>
<tr>
<td>Now Reversing Denial Number 000-OANY-2</td>
</tr>
<tr>
<td>Completed</td>
</tr>
<tr>
<td>Enter Notes</td>
</tr>
</tbody>
</table>

CHS OFFICE COMMENTS:
1> REVERSED BY UNIT CHSO
2> [ESC]
EDIT Option: [RET]

| DO YOU WANT TO EDIT THE APPEAL STATUS? NO// [RET] |

**Figure 2-6: Editing a denial status (steps 5-11)**

### 2.3 Send Approval Message to FI (FIM)

Use this option to eliminate the need for paper authorizations being sent to the Fiscal Intermediary (FI) for particular services such as sterilizations and other procedures in support of direct care. Upon issuing a purchase order authorization, you should use this option to send the approval via the Electronic Purchase order transmission to the FI. This option should be used immediately after issuing the purchase order.

#### Sending an approval message
1. Type DOC at the “Select Contract Health System Option:” prompt.
2. Type FIM at the “Select Document Generation Option:” prompt.

| ************************************************* |
| Indian Health Service |
| CONTRACT HEALTH MGMT SYSTEM |

**Figure 2-6:**
Figure 2-7: Sending an approval message (steps 1-2)

3. Type the document number at the “Select Document:” prompt. The system will display the document information.

4. Press the Return key to accept the default entry of YES at the “Do you want to send a EPO approval message to the FI?” prompt.

Figure 2-8: Sending an approval message (steps 3-4)
5. Type your message at the “CHS-FI Messages:” prompt. You can type ?? for a list of available options.

6. The system will then redisplay the document with the added approval message.

7. You may type another message at the “Do you want to send a EPO approval message to the FI?” prompt or type NO to exit this option.

Select CHS-FI MESSAGES: STERILIZATION// [RET]

| DOCUMENT: 0-00003 | PATIENT NAME: DEMO, PATIENT |
| DATE OF SERVICE: NOV 08, 1999 | APPROVAL MESSAGE(S) TO FI: |
| | 1. Sterilization |

Do you want to send a EPO approval message to the FI? YES// NO

Figure 2-9: Sending an approval message (steps 5-7)
3.0 Patch 5

X12 Transaction 278 Processing Option

Patch 5 of the Contract Health System addresses issues related to recent HIPAA Title II requirements. To meet these requirements, this patch implements the X12 transaction set 278 for HIPAA transaction set compliance.

To manually send a 278 transaction:

1. Type DOC at the main CHS menu.
2. Type 278O (capital “o”) at the “Select Document Generation Option:” prompt.
3. Type 278O (capital “o”) at the “Select X12 Transaction 278 Processing Option:” prompt.
4. Follow the prompts as they appear on your screen.

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**Figure 3-1: Patch 5 changes**
4.0 Contact Information

If you have any questions or comments regarding this distribution, please contact the ITSC Help Desk by:

Phone: (505) 248-4371 or
(888) 830-7280
Fax: (505) 248-4199
Web: http://www.rpms.ihs.gov/TechSupp.asp
Email: ITSCHelp@mail.ihs.gov