



RESOURCE AND PATIENT MANAGEMENT SYSTEM

Accounts Receivable

(BAR)

Addendum to User Manual

Version 1.8 Patch 21
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Division of Information Resource Management
Albuquerque, New Mexico

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Preface

The technical nature of this document and the frequent use of abbreviations and acronyms as part of file names, field names, and menu options make it impossible to fully define the abbreviations and acronyms where they first occur in the text without causing the readability of the document to suffer.

A reader unfamiliar with these terms is invited to consult the Acronym List beginning on page 12.

1.0 Introduction

1.1 Summary of Changes

Patch 21 provides enhancements to version 1.8 of the Accounts Receivable (A/R) application (BAR). The majority of the changes allow the user to post with the ASC X12 835 Health Care Claim Payment/Advice. In the Load New Import option, the 5010 version of the 835 was added to allow for processing 5010 files from payers. The 4010 version will continue to be available in the Resource and Patient Management System (RPMS) for processing 4010 files.

1.1.1 Patch 21

Modifications

- Loop 1000A for 5010
 - Added a new A/R EDI TRANSPORT for importing 5010 files called HIPAA 835 v5010
 - Added a new field PAYER COUNTRY #.27 to the A/R EDI CHECK file to hold the value from N404 element being captured in segment N4.
 - Added the field PAYER COUNTRY SUBDIVISION #.28 to the A/R EDI CHECK file to hold the value captured from element N407 being captured in segment N4.
 - Added a new field in the EDI CHECK file multiple PAYER CONTACT INFO:
 - New field CONTACT FUNCTION CODE #.04. This was added to handle a new set of codes identifying contact information in segment PER01. The new codes are:
 - CX = PAYERS CLAIM OFFICE
 - BL = TECHNICAL DEPARTMENT
 - IC = INFORMATION CONTACT
 - For the PER segment element PER01, added new codes to ‘Contact Function Code’ entry in A/R EDI TABLES file.
 - The PER segment data should populate the .3 multiple in the A/R EDI CHECKS file.
 - Codes used to indicate “Electronic Mail”, “Telephone Extension”, “Facsimile”, “Telephone”, or “Uniform Resource Locator” have been added to the #.02 TYPE OF COMMUNICATION field of the .3 multiple in A/R EDI CHECKS file.
- Loop 1000B for 5010
 - For N1 segment element N104

- Added XV to the set of codes in field .08 IDENTIFICATION CODE QUALIFIER. XV = CMS PLAN ID in EDI CHECK.
- Added the CMS PLAN D field #101 to file EDI CHECKS.
- Edited the XV code to 'Identification Code Qualifier' entry in the A/R EDI TABLES file. Changed description from 'HCFA National Plan ID' to 'CMS Plan ID'
- N4 segment
 - Added all elements since we were not collecting any PAYEE segment information. Added the following fields to the A/R EDI CHECKS file to store these elements:
 - (#1201) PAYEE ADDR 1
 - (#1202) PAYEE ADDR 2
 - (#1203) PAYEE CITY
 - (#1204) PAYEE STATE
 - (#1205) PAYEE ZIP
 - (#1206) PAYEE COUNTRY
 - (#1207) PAYEE CT SUBDIVISION
 - Added segment RDM and its elements. No data is being stored except in the VALUE sub-file of the A/R EDI IMPORTS file.
- Loop 2100 for 5010
 - CLP SEGMENT element CLP06 has added codes in 5010 17 and ZZ. These new codes were added to the 'Claim Filing Indicator Codes' entry in the A/R EDI TABLES file.
 - Added the NM1 segment 'Other Subscriber' and its elements.
 - Added new codes 28 and 6P to REF01 in segment REF and also to the 'Reference Identification Qualifier' entry in the A/R EDI TABLES file.
 - 28 = Employee Identification Number
 - 6P = Group Number
 - The DTM segment was split into four segments in the A/R EDI TRANSPORT file. Added field #901 COVERAGE EXPIRATION DATE to CLAIMS sub-file for new DTM segment. Added field #902 CLAIM RECEIVED DATE to CLAIMS sub-file for new DTM segment.
- Loop 2110 for 5010
 - Added the new segment REF - Line Item Control Number. These element values are not stored anywhere except in the VALUE multiple of the A/R EDI IMPORT file.
 - Added the new segment REF - Health Policy Id

- Added the OK qualifier to the ‘Reference Identification’ entry in the A/R EDI TABLES file.
- Modified the BPR to allow the user to view in greater detail the PLB segment data and the amounts sent by the payer. This new PLB DETAIL REPORT is displayed right after the CHECK MATCHING REPORT
- Added field #1001 LINE ITEM CONTROL NUMBER to the top level of the A/R BILL file. This field is populated by a claim from third party billing (TPB) with flat rate billing.
- Added field #12 LINE ITEM CONTROL NUMBER to ITEM multiple of A/R BILL file. The field is populated by TPB claim with line item billing.
- Added a code to accept line item control number (LICN) data from TPB and add data to new LICN fields in A/R BILL file.
- Modified the TAR report to include PSC (Post Status Change/Sent to Collections) in the statements.
- Corrected a bug in the Auto Post Beneficiary option that allowed posting without having an open cashiering session.
- Corrected an undefined error when running TRN option in the ERA Posting Menu.
- Corrected an issue with multiple NTE segments in the header. This fix ignores the NTE segments when loading ERA file.
- Corrected an issue with the TDN Reconciliation Report not exporting as a file; the report would only print to the screen regardless of whether the user specified a device or chose to export the report as a file from RPMS.
- The View Import Header in the ERA Posting menu was modified to display all segments to users who have programmer access. The user does not have to be logged in under programmer mode for this feature to work.
- The NEW Load Import option has been slightly modified so that the format of the file (4010 vs. 5010) is checked before it is actually loaded into the A/R EDI IMPORT file. This was done to prevent files from being deleted if they had previously been loading using the incorrect format transport.
- The View Cashiering Sessions option was modified to prevent a supervisor from reconciling and transmitting a cashiering session if the user is logged into any of the posting options.
- A correction was made for the TRN option in the ERA Posting menu when a file name is not selected, <UNDEF>EN+3^BAREDPCS.
- A correction was made to the Transaction Statistical Report to prevent an error from occurring with the Visit / Clinic sorting option, <UNDEF>DETAIL+85^BARRADJ2.

HEAT tickets

- 19931 - Changes were made to the automatic write off to allow for selecting a date range, specific A/R account, and non-beneficiary patients. OIT should be contacted if the automatic write off is needed at your site.
- 20490 - Disallow posting if the user does not have a cashiering session in a status of OPEN. It was discovered that, if a supervisor has reconciled and/or transmitted a user's cashiering session, the user was able to continue using that session for posting. In this scenario, transactions posted after the session was reconciled and/or transmitted were not being captured in a cashiering session and thus were not being transmitted to the Unified Financial Management System (UFMS). If a user attempts to post transactions using a cashiering session that has already been reconciled and/or transmitted, a message will be displayed to the user indicating that his/her session has been closed and a new one must be opened in order to perform posting functions.
- 20496 – A change was made to the View Cashiering Sessions option (CSH - SUP - VON) to display all cashiering sessions that do not have a status of TRANSMITTED and have a session ID on or after 10/1/08 (UFMS live date). This modification will ignore the value set in the UFMS Display Date Limit field in A/R Site Parameters when displaying current status to Supervisor. Note: This modification will have no effect on users who are reviewing their own sessions (option CSH - UVCH), i.e., users will be limited to viewing batches based on the value entered in the UFMS Display Date field in A/R Site Parameters.
- 30281 – Modified the Payment Summary Report to include PSC transactions.
- 42678, 43499 – Corrected a Medicaid parsing issue with 4010 ERA files to prevent the date of service from being converted to -1. This sometimes occurred because the %DT variable was set to required seconds. Also, the ERA delimiter was hard coded for “*” which caused a parsing issue with ERA files that contain a different character as a delimiter.
- 42918 – A modification was made in ERA processing to look at the numeric portion of the bill number and the first alpha character, if there is one.
- 43451 – A correction was made so that collection batch items that are in a status of “rolled” or “cancelled” will not be used to match to ERA checks. If an ERA check is found in more than one collection batch item, a list will be displayed to the user of potential matches. The user will be able to manually match the ERA check to the correct collection batch item.
- 46386 – A correction was made to patient statements to prevent a blank page from printing between each patient's statement.
- 48289 – A correction was made to the Transaction Statistical Report to allow the user to select Podiatry as a Clinic type.

- 48986 – A correction was made to the Transaction Statistical Report to correct error <UNDEFINED>SUBDSRC+3^BARRADJ2.

2.0 Patch 21 Details

2.1 Changes to Cashiering

2.1.1 View Cashiering Sessions

(Option CSH – SUP – VON)

There were two changes made to this option. The first change is a modification that will display to the supervisor all sessions that have been opened from 10/1/2008 to current and that have not been transmitted to UFMS, regardless of the value that is set in the UFMS Display Date Limit field in A/R Site Parameters. This change will have no effect on users who are reviewing their own sessions.

In Figure 2-1, the UFMS Display Date Limit field has been set to T-1 for the purpose of demonstrating this change in the addendum.

```

UFMS DIRECTORY: c:\inetpub\ftproot\pub\rpms\ Replace
UFMS DISPLAY DATE LIMIT: T-1//
BOOKING DATE IN UFMS: OCT 1,2008//
    
```

Figure 2-1: UFMS Display Date Limit field

At the VON option the supervisor will be able to view all cashiering sessions that were opened from 10/1/2008 to current and have not been transmitted. As shown in Figure 2-2, the supervisor is able to view cashiering sessions that were opened eight months ago, even though the Display Date Limit field has been set to T-1.

```

+-----+-----+-----+-----+-----+-----+-----+-----+-----+
|                ACCOUNTS RECEIVABLE SYSTEM - VER 1.8                |
+-----+-----+-----+-----+-----+-----+-----+-----+-----+
|                View Cashiering Sessions                            |
|                INDIAN HEALTH HOSPITAL                            |
+-----+-----+-----+-----+-----+-----+-----+-----+-----+
User: SISNEROS,GINA                BUSINESS OFFICE                05-DEC-2011 11:52 AM

UFMS DISPLAY DATE LIMIT: NOVEMBER 28,2011 (T-1W)

The following SESSIONS are currently RECONCILED =>
  SESSION ID    CASHIER                DATE RECONCILED                ERA\PST
-----
1. 3110201.152845 VALENCIA,TINA    FEB 02, 2011@15:30:22        \
2. 3110514.155051 LUJAN,ADRIAN    MAY 16, 2011@15:52:12        \
3. 3110723.160326 SISNEROS,GINA    JUL 25, 2011@16:04:35        \
-----

Press <RETURN> to change statuses being displayed or,
Select Session Number to View or RV/Review/approve all listed sessions or
Q/Quit: Q
    
```

Figure 2-2: VON option screen

The second change to the View Cashiering Sessions option prevents a supervisor from reconciling a cashiering session if the user is logged into any of the posting options. It was discovered that a supervisor was able to reconcile and transmit a cashiering session that was actively being used, and that the user was able to continue posting using that transmitted session. In that scenario, transactions posted to the transmitted session were not being captured in a cashiering session and thus were not being transmitted to UFMS.

With the installation of patch 21, if a supervisor attempts to reconcile a cashiering session while the user is logged into any of the posting option, the message shown below will be displayed and the supervisor will not be allowed to continue reconciling that session. The user must be logged out of the posting menu in order for the supervisor to reconcile his/her session.

```

+-----+
|          ACCOUNTS RECEIVABLE SYSTEM - VER 1.8          |
+          View Cashiering Sessions                      +
|          INDIAN HEALTH HOSPITAL                       |
+-----+
User: SISNEROS,GINA          BUSINESS OFFICE          3-NOV-2011 3:38 PM

UFMS DISPLAY DATE LIMIT: NONE SET (T-5000)

The following SESSIONS are currently OPEN =>
  SESSION ID    CASHIER          DATE OPENED          ERA\PST
-----
1. 3111024.133101 LUJAN,ADRIAN M    OCT 24, 2011@13:31:01 \
2. 3111027.171618 SISNEROS,GINA      NOV 03, 2011@09:32:16 * \
-----

Press <RETURN> to change statuses being displayed or,
Select Session Number to View or RC/Reconcile all listed sessions or
Q/Quit: 1

RC/Reconcile V/iew Transactions S/Status History
Enter Action: RC

CANNOT RECONCILE SESSION 3111024.133101
THE CASHIER IS LOGGED IN AND CURRENTLY IN THE 'Post Payments and
Adjustments' OPTION

Enter RETURN to continue or '^' to exit:

```

Figure 2-3: Reconciliation screen with error

If a cashiering session is reconciled by a supervisor rather than by the user and the user attempts to enter any of the posting options without opening a new session, the message in Figure 2-4 will be displayed and the user will be required to open a new cashiering session.

```

YOUR SESSION HAS BEEN CLOSED

* * YOU MUST SIGN IN TO BE ABLE TO PERFORM POSTING/COLLECTION FUNCTIONS! *
*

**> Sorry, access to this option has been denied by the application.

```

Figure 2-4: Session closed message

2.2 Electronic Remittance Advice (835)

2.2.1 Load New Import

(Option PST – ERA – NEW)

The Load New Import option was modified to allow for uploading files in the new 5010 format. When loading an ERA file in the 5010 format, type a “??” to view the available modes of transport. Notice that HIPAA 835 v5010 has been added as an available selection. RPMS will retain the ability to upload and process 4010 files.

```

+-----+-----+-----+-----+-----+-----+-----+-----+-----+-----+
|                ACCOUNTS RECEIVABLE SYSTEM - VER 1.8                |
+-----+-----+-----+-----+-----+-----+-----+-----+-----+-----+
|                                Load New Import                                |
|                                INDIAN HEALTH HOSPITAL                        |
+-----+-----+-----+-----+-----+-----+-----+-----+-----+-----+
User: SISNEROS,GINA                BUSINESS OFFICE                07-DEC-2011 2:46 PM

Enter your Current Signature Code:    SIGNATURE VERIFIED

Select A/R EDI TRANSPORT NAME: ??

Choose from:
AHCCCS
HIPAA 835 v4010
HIPAA 835 v5010
MEDICARE 835 3041.4A

Select A/R EDI TRANSPORT NAME:

```

Figure 2-5: Load New Import screen

2.2.2 Review & Match File for BPR

(Option PST – ERA – BPR)

Two changes were made to this option. The first change will allow the user to manually match an ERA check to a collection batch item when a duplicate check number is found in the A/R EDI Check file. With the release of patch 20, it was discovered that the payer occasionally duplicates an ERA check number. In that scenario, RPMS was unable to automatically match the ERA check to the correct collection batch item.

If an ERA file contains a check number that already exists in the A/R EDI Check file, the message shown below will be displayed along with a list of possible matches that the user may select from.

```

Select ERA Posting Option: BPR  Review & Match File for BPR
Matching ERA 835 to A/R Collection Batch & Items...

Select file: 1117_ERA_11/22/2011  TEST_5010_5.txtCHK/EFT #: 0000072829
                                                CHK/EFT #: 00023816644
                                                CHK/EFT #: GA00978847

I will begin matching the following items:

#1  BPR02: 868.68
    TRN02: 0000072829                Matching...

Chk/EFT # 1 matches more than one collection batch and item.
Please select one:

LINE      BATCH                ITEM  A/R ACCOUNT  $  BATCHED  BALANCE
  1  GINAS MEDICARE-04/19/2009-1  1    MEDICARE    421.75    421.75
  2  GINAS MEDICARE-11/22/2011-1  1    MEDICARE    868.68    868.68

Please enter the LINE # of the collection batch/item that matches this ERA:
2

Updating A/R EDI CHECKS file with Collection Batch Data...  ... Done!
    
```

Figure 2-6: Review & Match File for BPR screen

The second change to this option will allow the user to view PLB segment(s) in great detail, if present. If a PLB segment is detected in an ERA file, the report in Figure 2-7 will be displayed after the BPR report is displayed.

```

=====
PLB DETAIL REPORT                               NOV 22,2011@15:39:47       PAGE 1
LOCATION: INDIAN HEALTH HOSPITAL
FOR RPMS FILE: 1117_ERA_11/22/2011
=====
      NPI          FY DATE
NO   AMOUNT      CD   DESCRIPTION      REFERENCE ID
=====
      1225002322    DEC 31, 2011
1     -50,365.87  BN   Bonus           007620110630000
2     -9,922.59  BN   Bonus           007620110630000
3     -2,355.13  BN   Bonus           007620110630000
      -----
      -62,643.59

      1902875594    DEC 31, 2011
1     -3,288.57  BN   Bonus           007620110630000
2     -2,062.30  BN   Bonus           007620110630000
      -----
      -5,350.87

      330057155    175  DEC 31, 2011
1     -0.06    L6   Interest Owed
    
```

2	-0.16	BD	Bad Debt Adjustment

	-0.22		

	-67,994.68		

Figure 2-7: PLB report

The column headers represent the following:

- **NPI** The NPI for the identifier found in PLB01
- **FY DATE** The date of the payer fiscal year found in PLB002
- **NO** Count of the number of entries contained for the PLB segment
- **AMOUNT** Dollar Amount found in PLB04, PLB06, PLB08, etc.
- **CD** Code used to identify the code used in PLB03-01, PLB05-01, etc. A list of PLB adjustment reason codes may be found in the appendix.
- **DESCRIPTION** The description of the code from PLB03-01, PLB05-01, etc. Again, a list of PLB adjustment reason codes may be found in the appendix.
- **REFERENCE ID** The identifier sent by the payer in PLB03-02, PLB05-02, etc. The identifier should be placed into this column

Appendix A: List of Adjustment Reason Codes in PLB Segments

CODE	NAME	STATUS
50	LATE CHARGE	ACTIVE
51	INTEREST PENALTY CHARGE	ACTIVE
72	AUTHORIZED RETURN	ACTIVE
90	EARLY PAYMENT ALLOWANCE	ACTIVE
AH	ORIGINATION FEE	ACTIVE
AM	APPLIED TO BORROWER'S ACCOUNT	ACTIVE
AP	ACCLERATION OF BENEFITS	ACTIVE
B2	REBATE	ACTIVE
B3	RECOVERY ALLOWANCE	ACTIVE
BD	BAD DEBT ADJUSTMENT	ACTIVE
BN	BONUS	ACTIVE
C5	TEMPORARY ALLOWANCE	ACTIVE
CR	CAPITATION INTEREST	ACTIVE
CS	ADJUSTMENT	ACTIVE
CT	CAPITATION PAYMENT	ACTIVE
CV	CAPITAL PASSTHRU	ACTIVE
CW	CERTIFIED REGISTERED NURSE ANESTHESIST PASSTHRU	ACTIVE
DM	DIRECT MEDICAL EDUCATION PASSTHRU	ACTIVE
E3	WITHHOLDING	ACTIVE
FB	FORWARD BALANCE	ACTIVE
FC	FUND ALLOCATION	ACTIVE
GO	GRADUATE MEDICLA EDUCATION PASSTHRU	ACTIVE
HM	HEMOPHILIA CLOTTING FACTOR SUPPLEMENT	ACTIVE
IP	INCENTIVE PREMIUM PAYMENT	ACTIVE
IR	INTERNAL REVENUE SERVICE WITHHOLDING	ACTIVE
IS	INTERIM SETTLEMENT	ACTIVE
J1	NONREIMBURSEABLE	ACTIVE
L3	PENALTY	ACTIVE
L6	INTEREST OWED	ACTIVE
LE	LEVY	ACTIVE
LS	LUMP SUM	ACTIVE
OA	ORGAN ACQUISITION PASSTHRU	ACTIVE
OB	OFFSET FOR AFFILIATED PROVIDERS	ACTIVE

Acronym List

A/R	Accounts Receivable
BPR	835 segment that contains financial information such as type of payment, amount of check, etc.
CLP	835 segment that contains claim payment information such as claim number, amount of payment,
CMS	Centers for Medicare and Medicaid Services
CSH	RPMS menu option
DTM	835 segment that specifies dates and times related to an individual claim
EDI	Electronic Data Interchange
ERA	Electronic Remittance Advice
HCFA	Health Care Financing Administration
LICN	Line Item Control Number
NTE	835 segment within the file header containing notes/special instructions
PER	835 segment that contains payer business contact information
PLB	835 segment that contains provider level adjustments to the payment amount
PST	RPMS menu option
REF	835 segment that contains the line item control number
SUP	RPMS menu option
TDN	Treasury Deposit Number
TPB	Third Party Billing
TRN	RPMS menu option

UFMS Unified Financial Management System

UVCH RPMS menu option

VON RPMS menu option

Contact Information

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