



RESOURCE AND PATIENT MANAGEMENT SYSTEM

# **Accounts Receivable**

(BAR)

## **Addendum to User Manual**

Version 1.8 Patch 27  
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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 Accounts Receivable (BAR namespace) package. The system is designed to automate the management of accounts receivable in the Resource and Patient Management System (RPMS).

Please review and distribute this addendum to your Accounts Receivable (A/R) staff *prior to* the installation of this patch.

Please refer to the notes file released with this patch for all other technical documentation.

## 1.0 Introduction

### 1.1 Summary of Changes

Patch 27 provides enhancements and minor corrections to version 1.8 of the Accounts Receivable application. These changes include updates to accommodate the Medicare Beneficiary Identifier (MBI) that will replace social security numbers (SSNs) on Medicare and Railroad Retirement cards.

**Change Request (CR) 9269** – A change was made to the Policy Number fields in the A/R Bill/IHS file to accommodate an MBI. The A/R Bill will reflect the policy number that was in Patient Registration at the time the claim was approved in Third Party Billing.

**Change Request 9273** – A report was added to the ERA Posting menu that provides a list of corrected patient/subscriber names and/or policy numbers if the payer has included that information in an Electronic Remittance Advice (ERA) file (List Corrections Sent in ERA, Section 2.2.2).

**Change Request 9274** – A change was made to the Age Day Letter & List to accommodate the new MBI format. The report will display a patient's MBI if there was an MBI in Patient Registration at the time the claim was approved in Third Party Billing.

**Change Request 9275** – A change was made for debt letters to accommodate an MBI if an MBI was used when approving a claim in Third Party Billing. However, sites should not be placing Medicare or Railroad Retirement into the debt letter queue. If, for some reason, these insurers are placed into the queue, the debt letters will print MCR for the patient's policy number.

**Change Request 9276** – Changes were made to the Report ERA Claims option in the ERA Posting Menu to display a patient's MBI if the claim was billed to the payer using an MBI.

**Change Request 9727 (HEAT348817)** – A correction was made to the Visit Location entry in the A/R Collection Batch file so that collection batch dollar amounts are properly updated when a site has the Mult 3P EOB parameter set to Yes in A/R Site Parameters and the site is posting in the Post Unallocated Cash (PUC) option.

## 2.0 Patch 27 Details

### 2.1 A/R Bill/IHS Updated for MBI

The A/R Bill/IHS file provides a snapshot of the 3P Bill at the time a claim was approved in the Third Party Billing application. One of the pieces of data stored on the A/R Bill is the patient's insurance policy number, which reflects the number that was in Patient Registration at the time the claim was approved in Third Party Billing.

In order to accommodate the Medicare Beneficiary Identifier (MBI) format for Medicare and Railroad Retirement patients, a change was made to the A/R Bill/IHS file to accept and store an MBI in the existing POLICY NUMBER field.

The Policy Number can be viewed by using the Bill Inquire command in the PAY option or the ADJ option of the Posting Menu. The Policy Number can also be viewed in FileMan by doing an Inquire on the A/R Bill/IHS file for a specific bill number.

```

OUTPUT BROWSER                Mar 19, 2018 12:58:18                Page:    2 of    2_
+
NUMBER/ITEM: 1                BRIEF DESCRIPTION: "OFFICE CONSULTATION"
DATE: APR 20, 2018@09:00      ITEM CODE: 510
BILLING SERVICE: MEDICAL PROCEDURES  QUANTITY: 1
UNIT COST: 753.600            TOTAL ITEM COST: 753.6
3P ITEM NUMBER: 1
LINE ITEM CONTROL NUMBER: 000000301431270001
TOTAL BILL AMOUNT (c): 753.6    COMPUTED TOTAL ITEM COST (c): 753.6
POLICY HOLDER (FT): DEMO,PATIENT  POLICY NUMBER (FT): 1AA2AA3AA44
OTHER BILL IDENTIFIER: 12345A-DH-111
COLLECTIONS STATUS DATE: APR 28, 2018@10:26:07
AMOUNT: 53.6                    TYPE: INITIAL BILL
AMOUNT IN COLLECTIONS(C): 0
AGE (c): 19                      0-30 (c): 53.6
31-60 (c): 0                      61-90 (c): 0
91-120 (c): 0                     120+ (c): 0
3P BILL STATUS (c): BILLED        3P CLAIM STATUS (c): Uneditable (Billed)
PRIMARY DIAGNOSIS (c): R07.9      ICD CODE INDICATOR (c): ICD-10-CM

Enter ?? for more actions                >>>_
+  NEXT SCREEN                -  PREVIOUS SCREEN        Q  QUIT
Select Action: +//

```

Figure 2-1: MBI displayed in the Bill Inquire command of the ADJ option

## 2.2 Electronic Remittance Advice (ERA)

When a payer sends payment or adjustment information on a bill in an ERA file, part of the data included with the bill number is the patient name and insurance policy number. The payer will populate the patient name and policy number submitted by the provider on the billed claim and may also send back corrections to the patient name and/or policy number. The Report ERA Claims option is updated to display a patient’s MBI when the MBI is populated in an ERA file. A new report allows for viewing corrected subscriber/patient information in an ERA file (List Corrections Sent in ERA, Section 2.2.2).

### 2.2.1 Report ERA Claims

**PST > ERA > RPT**

The Report ERA Claims option provides numerous ways to view claim information in an ERA file, including the patient’s insurance policy identification number. To accommodate the MBI format, the RPT option is updated to display a patient’s MBI if an MBI is populated in an ERA file. To view the patient’s policy number in the RPT option, select either **Detailed** (Figure 2-2) or **Brief – One Line for the Type of Report** (Figure 2-3).

```

WARNING: Confidential Patient Information, Privacy Act Applies
=====
ELECTRONIC CLAIM REPORT - Detailed                MAY 19,2018@15:14   Page 1
FOR FILE NAME: DEMOERA_MEDICARE.txt                CHECK/EFT TRACE: !EFT01255687
                                                    NPI: 1122334455
FOR RPMS FILE: 1042_ERA_04/28/2018
-----
BATCH: MEDICARE-04/28/2018-1                      ITEM # 1
-----
MEDICARE                                          CUSTOMER SERVICE
PO BOX 12345                                     PH: (800)000-0000
ANYTOWN,USA 98765-4321
=====
= = = = = P O S T E D = = = = =
123456A          DEMO,PATIENT A          20180405          - 1A11A11AA11
AMOUNT BILLED.....$                          338.40
PAYMENT.....$                                  249.65
ADJUSTMENTS
  1 Non-covered charge(s).....$              88.75
    4 NONPAY / 696 Non-covered Charge(s)
-----
TOTALS FOR POSTED
AMOUNT BILLED..... 1 BILLS(S) $              338.40
PAYMENTS.....      0 BILLS(S) $              249.65
ADJUSTMENTS.....  1 BILLS(S) $                88.75
* * E N D   O F   R E P O R T * *
    
```

Figure 2-2: MBI displayed on Detailed report

```

WARNING: Confidential Patient Information, Privacy Act Applies
=====
ELECTRONIC CLAIM REPORT - Brief                               MAY 19,2018@15:14   Page 1
FOR FILE NAME: DEMOERA2_MEDICARE.txt                       CHECK/EFT TRACE: !EFT0987654
                                                           NPI: 1122334455
FOR RPMS FILE: 1043_ERA_02/28/2018
-----
BATCH: MEDICARE-04/28/2018-2                               ITEM # 1
-----
MEDICARE                                                    CUSTOMER SERVICE
PO BOX 12345                                                PH: (800)000-0000
ANYTOWN,USA 98765-4321
=====
= = = = = P O S T E D = = = = =
123456A          DEMO,PATIENT A          20180305      - 1A11A11AA11
987654B          DEMO,PATIENT B          20180312      - 123456789A
223344A          DEMO,PATIENT A          20180320      - 1A11A11AA11
*****
TOTALS FOR POSTED
AMOUNT BILLED.....          3 BILLS(S)      $          616.40
PAYMENTS.....              0 BILLS(S)      $           0.00
ADJUSTMENTS.....           3 BILLS(S)      $           566.75
    
```

Figure 2-3: MBI displayed on Brief – One Line report

## 2.2.2 List Corrections Sent in ERA

**PST > ERA > RPTC**

Payers have the ability to send corrections to the patient/subscriber name and/or policy number in an ERA file by populating the NM1 segment(s) in Loop 2100. Prior to patch 27, the only way to view this information was by looking at the raw data file or by using the View Import Header (VIEW) option in the ERA Posting Menu. Neither of these options provide an easy-to-read, condensed view of the corrected information, so a new report was added in patch 27. The new report, List Corrections Sent in ERA, displays corrected patient/subscriber information from any payer in an easy-to-read format.

**Note:** It isn't necessary to perform any of the ERA matching steps to run the RPTC report. Once the file is loaded into Accounts Receivable, the RPTC report can be run by anyone who has access to the ERA Posting Menu.

At the "Select file" prompt, type the RPMS ERA file number, the ERA check number, or the ERA file name and press Enter. At the "Output Device" prompt, press Enter to display the report to your computer screen. The report can also be queued, sent to a printer, or exported to a Host File Server and opened with Microsoft Word or Notepad. If you need assistance sending the report to a printer or exporting to your Host File Server, please contact your local IT support staff.

```

+-----+
|          ACCOUNTS RECEIVABLE SYSTEM - VER 1.8p27          |
+               List Corrections Sent in ERA               +
|               2017 DEMO CLINIC                           |
+-----+
User: USER,SUPER          BUSINESS OFFICE          21-MAY-2018 9:30 AM

This report will provide a list of corrected patient and/or insured
information that is sent back in an ERA file from the payer. This report
is informational only; there will be no changes made by this option to
the patient/insured information in Patient Registration. Changes to
Patient Registration data must be made manually.

Information reported on the RPMS line is pulled from RPMS Accounts
Receivable. If an ERA claim cannot be matched to an RPMS Bill, there will
not be a BILL# listed for the patient. Instead, the BILL(s) field will
display the ERA claim number(s) along with "BILL NOT FOUND IN RPMS"
(for example: 12345A-BILL NOT FOUND IN RPMS).

Information reported on the ERA line is pulled from the ERA file.

Select file: 1041_ERA_04/28/2018 DEMOERA_MEDICARE.txt CHK/EFT #:!EFT01255687

Output Device: HOME//

Printing...
    
```

Figure 2-4: Selecting an ERA file to view on the computer screen

The header of the report will display basic information about the ERA file such as the RPMS Location you are logged in to, the ERA file name, and the RPMS file number. The payer and payer address, as it appears in the ERA file, displays underneath the report header, followed by the report data.

The report data will include two lines for each patient whose name and/or policy number has been corrected in the ERA file. The first line of data, labeled RPMS under the DATA SOURCE column, contains the patient name and insurance policy number that was received by the payer on the provider’s submitted claim. The second line of data, labeled ERA under the DATA SOURCE column, contains the corrected information that the payer is sending back in the ERA file.

The ERA line of data will only be populated if the payer has made a correction. For example, if the policy number is being corrected but the patient name is not, the patient name fields will be blank (see Figure 2-5).

**Note:** The RPTC report is intended for information only. Any changes to patient insurance information in Patient Registration will have to be done manually.

```

=====
List Corrections Sent in ERA          MAY 21,2018@09:30    Page 1
Location: 2017 DEMO CLINIC
For File Name: DEMOERA_MEDICARE.txt
For RPMS File: 1041_ERA_04/28/2018
    
```

```

=====
MEDICARE                                PO BOX 12345
                                         ANYTOWN,USA 98765-4321
-----
DATA      LAST NAME          FIRST NAME      MI    SUFFIX  POLICY NUMBER
SOURCE    BILL(S)
-----
RPMS      DEMO                FEMALE         A
ERA       DEMONSTRATE          LAFEMALE
          112233B
-----
RPMS      DEMO                PATIENT
ERA       123456A
          3BB4BB5BB66
-----
RPMS      WEATHERS                STORMY         R
ERA       CORRECTEDLASTNAME    FIRSTNAME    K
          328775A
          1AA2AA3AA44
-----
*****END OF REPORT*****
    
```

Figure 2-5: RPTC report example

## 2.3 Age Day Letter & List

**RPT > ARM > ADL**

The Age Day Letter & List is updated to accommodate the MBI format. If a Medicare or Railroad Retirement claim is approved in the Third Party Billing application using a patient’s MBI, the MBI will display on the ADL report. If the claim is approved using a patient’s Health Insurance Claim Number (HICN), the HICN will continue to be displayed.

```

=====
MEDICARE over 1 days                                04/20/2018    PAGE: 1
-----
Policy Holder          Policy #      Claim #      DOS          Amt Bld      Balance
PT. SS #              Policy #      Claim #      DOB
-----
DEMO,PATIENT A        123456789A   123456A     04/02/2018   228.00       228.00
Pat: DEMO,PATIENT A   DH-111       01/02/1950
123456789 Comment: _____
DEMO,PATIENT A        5A55A55AA55 123456B     04/02/2018   228.00       228.00
Pat: DEMO,PATIENT A   DH-111       01/02/1950
123456789 Comment: _____
DEMO,MBI              8T88T88TT88 987654A     04/16/2018   53.60        53.60
Pat: DEMO,MBI         DH-123       07/04/1960
112233445 Comment: _____
DEMO,HICN             987654321B   328769B     04/07/2018   26.88        26.88
Pat: DEMO,HICN       DH-321       12/25/1955
987654321 Comment: _____
    
```

Figure 2-6: ADL report example

## Appendix A: MBI Information from CMS

The following is from the CMS website:

The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 requires that the Centers for Medicare & Medicaid Services (CMS) remove social security numbers (SSNs) from all Medicare cards by April 2019. A new Medicare Beneficiary Identifier (MBI) will replace the SSN-based Health Insurance Claim Number (HICN) on the new Medicare and Railroad Retirement cards. CMS will begin issuing the new cards to patients in phases beginning on April 1, 2018.

Complete information regarding the Medicare MBI initiative can be found at the CMS website: <https://www.cms.gov/Medicare/New-Medicare-Card/index.html>.

## Acronym List

| Acronym | Term Meaning                                 |
|---------|--|
| 3P      | Third Party                                  |
| A/R     | Accounts Receivable                          |
| ADJ     | Post Adjustments                             |
| CMS     | Centers for Medicare & Medicaid Services     |
| CR      | Change Request                               |
| ERA     | Electronic Remittance Advice                 |
| HICN    | Health Insurance Claim Number                |
| IHS     | Indian Health Service                        |
| IT      | Information Technology                       |
| MACRA   | Medicare Access and CHIP Reauthorization Act |
| MBI     | Medicare Beneficiary Identifier              |
| OIT     | Office of Information Technology             |
| PAY     | Post Payments and Adjustments                |
| RPMS    | Resource and Patient Management System       |
| SSN     | Social Security Number                       |

## Contact Information

If you have any questions or comments regarding this distribution, please contact the OIT Help Desk (IHS).

**Phone:** (888) 830-7280 (toll free)

**Web:** <https://www.ihs.gov/helpdesk/>

**Email:** [support@ihs.gov](mailto:support@ihs.gov)