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Preface

The purpose of this addendum is to provide information about the Accounts Receivable (BAR) 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 staff prior to installation of this patch.

Refer to the notes files released with this patch for all other technical documentation.
1.0 Introduction

Patch 30 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

1.1.1 Patch 30

Change Request 4968

Modified the UFMS Age Summary Report (RPT > ARM > USM) to provide Allowance Category and ASUFAC when run by Allowance Category and Report Type 3. Also added an option to export the report as a comma separated file (csv) when run by Allowance Category and Report Type 3.

Change Request 6210

Corrected the alignment and the line numbering in several posting options to ensure that the A/R Bill Numbers and their corresponding dollar amounts are properly aligned, and to ensure that the bills are listed in correct numerical order according to when each bill was created in A/R.

Change Request 6977

Modified the portion of the ERA A/R Bill Matching option (PST > ERA > BLMT) that displays matched claims and reviews them for potential negative bill balances if ERA payments and adjustments are posted. Prior to patch 30, these entries were numbered (2, 4, 5, etc.). Patch 30 removes the numbering and realigns the entries to the left.

Change Request 9409

Corrected the Post Payments and Adjustments option (PST > PAY) and the Post Adjustments option (PST > ADJ) to ensure that an ‘m’ is displayed in front of bill numbers that contain a bill message.
Change Request 9476

Corrected the Cancelled Bills Report (MAN > RPT > CXL) to ensure that bills with a zero balance are not displayed when the user specifies that only bills with an open balance be reported. Also added an XML option to allow for exporting the report as an Excel spreadsheet.

Change Request 9568

Corrected the ERA A/R Bill Matching process to ensure that the correct Reason Not to Post is applied to ERA Point of Sale claims that are unmatched due to the date of service.

Change Request 10217

Corrected the ERA Load New Import option (PST > ERA > NEW) to prevent a programming error when an 835 file is loaded that contains one or more PER segments in Loop 2100. This PER segment provides Claim Contact Information for the payer such as a phone number, fax number, or email address.

Change Request 10501

Corrected the UFMS Age Summary Report to prevent a programming error when the user exits the report parameters by typing a caret (^).

Change Request 10550

Increased the fields that allow for adding, editing, and displaying check numbers from 40 characters to 50 characters. This change affects collection batch creation and editing, as well as numerous reports that display check numbers. Some of the reports will display the entire 50-digit check number while others will display an abbreviated check number followed by an asterisk (*).

Change Request 10582

Modified the Age Summary Report (RPT > ARM > ASM) and the UFMS Age Summary Report to include the total number of claims for each user-specified category, such as A/R Account or Billing Entity, as well as a total number of claims for all categories.

Change Request 10620

Corrected the Edit Status command in the ERA Review Postable Claims option (PST > ERA > REV) to prevent a programming error when a bill is selected for manual matching that contains a bill message. A change was also made to ensure that the ERA claim selected for matching is displayed on the same screen as the “Select A/R Bill/IHS Bill Number” prompt.
Change Request 11203

Updated the A/R EDI STND CLM ADJ REASONS file and the A/R EDI REMARK CODES file to include all Standard Adjustment Reason Code updates and all Remittance Advice Remark Code updates as released by the Washington Publishing Company in May of 2020 and July of 2020, respectively. These nationally published code lists can be viewed on the following x12 website: https://x12.org/codes.

Change Request 11206

Modified the UFMS Age Summary Report to provide the UFMS Invoice Number when run by Allowance Category and Report Type 3. Also added an option to export the report in an XML format when run by Allowance Category and Report Type 3.
2.0 Patch 30 Details

2.1 Check Number Field Expanded

The fields that allow for adding, editing, and displaying check numbers increased from 40 characters to 50 characters. This change affects collection batch creation and editing, as well as several reports that display check numbers. Some of the reports will display the entire 50-digit check number while others will display an abbreviated check number followed by an asterisk (*). The asterisk indicates that the entire check 50-digit number is not being displayed.

The options affected by this change are:

Collections Menu (COL)
- Collections Entry (EN)
- Collection Report Detailed/Final/Exceptions/Final Reprint (RPT>DT/FL/EX/RFL)
- Check Posting Summary (CPS)

Manager Menu (MAN)
- Edit Treasury Deposit/IPAC Number (ETDN)

Posting Menu (PST)
- Post Payments and Adjustments (PAY)
- Prepayment Collections (PRE)
- Reprint Receipt (RECP)
- Flat Rate Posting (FRP)
- View Flat Rate Bills (FBL)
- Post Unallocated Cash (PUC)
- ERA Posting (ERA)

Batch Reports Menu (RPT > BRM)
- Batch Posted Payments (BPP)

When a new collection batch is created or edited and the user attempts to enter a check number that exceeds 50 characters, a message will be displayed indicating that the response must be 3–50 characters in length, and the entry will not be saved. This message will also display when editing a collection batch item in the Edit Treasury Deposit/IPAC Number option (MAN > ETDN) or when entering or editing patient payments in the Prepayment Collections option (PST > PRE).
ENTERING PRIVATE-10/30/2020-1 TYPE: ALL TYPES BATCH TOTAL: 0
TDN/IPAC: TDNDEMO12345 TDN/IPAC AMOUNT: 1,000.00
TDN/IPAC/Deposit Date: OCT 30, 2020

ITEM 1 NEW MEXICO BC/BS INC
^ at Check Number to ask Payor
^ at Payor to exit entry
Check/EFT #: 9876543210AAAAAAAAA33333333BBBbbbbbbbb1234567890??
Answer must be 3-50 characters in length.
Check/EFT #: 9876543210AAAAAAAAA33333333BBBbbbbbbbb1234567890
TREASURY DEPOSIT/IPAC: TDNDEMO12345

CREDIT:

Figure 2-1: Message received in Collections Entry when a check number exceeds 50 characters

Reports that require the entire check number to display, such as the Collections Reports, were modified to accommodate check numbers that contain up to 50 characters. On the Collection Report Final Reprint, for example, the check number was moved to its own line so that up to 50 characters could display without disrupting the other displayed information.

DATE: COLLECTIONS REPORT -- FINAL (REPRINT) PAGE 1
10/30/20 2017 DEMO HOSPITAL

BATCH: PRIVATE-10/30/2020-1
TDN/IPAC #: TDNDEMO12345
CHK/IPAC DEPOSIT DATE: OCT 30, 2020
TOTAL: 1,000.00

ITEM RECEIVED CHECK # A/R ACCOUNT DISTRIBUTION AMOUNT
-----------------------------------------------------------------------------------------------------------------
EOB CHECK
1 10/30/20 9876543210AAAAAAAAA33333333BBBbbbbbbbb1234567890
NEW MEXICO BC/BS INC 1000.00
2017 DEMO HOSPI 1000.00

-----------------
SUBTOTAL 1000.00
-----------------
TOTAL 1000.00

Figure 2-2: Collection Report Final Reprint containing a 50-digit check number

Other reports that require the entire check number to display were modified in a slightly different way. For example, the ERA Check Amount and Check number for 835 option (PST > ERA > TRN), was modified to display a new field named ‘Full Check #’ when an ERA file contains a check number greater than 25 characters. In this scenario, the new field displays the entire ERA check number.
2.2 **A/R Bill Alignment Display**

A correction was made to the alignment and to the line numbering in several posting options to ensure that the data displayed is properly aligned and to ensure that the bills are listed in correct numerical order, according to when each bill was created in Accounts Receivable. Most bills are created in Accounts Receivable upon claim approval in the Third Party Billing application but occasionally, the bill entry is not created in Accounts Receivable, and must be uploaded manually using the Upload from Third Party Bill File option in Accounts Receivable (UPL).

The options affected by this change are:

- Post Status Change (ACM > PSC)
- Post Payments and Adjustments (PST > PAY)
- Post Adjustments (PST > ADJ)
- Flat Rate Posting (PST > FRP)
- Post Refunds (PST > REF)
- Post Remark Codes (PST > RMK)
- Post NCPDP Reject/Payment Codes (PST > RX)

Prior to patch 30, the menu options that display a list of bills based on a user-specified patient name and date range did not list the bills in the order they were created in Accounts Receivable. In addition, the columns were not properly aligned.
Accounts Receivable (BAR) Version 1.8 Patch 30

Addendum to User Manual Patch 30 Details
February 2021

Claims for DEMO,PATIENT from 01/01/2020 to 10/30/2020 Page: 1

Batch : PRIVATE         Item : 1
Amount :  500.00         Amount :  100.00
Posted :   77.00          Posted :   77.00
Unalloc:    0.00          Unalloc:    0.00
Balance:   423.00         Balance:    23.00

<table>
<thead>
<tr>
<th>Line #</th>
<th>DOS</th>
<th>Claim #</th>
<th>Billed Amount</th>
<th>Current Paymnts</th>
<th>Current Adjust</th>
<th>Current Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>01/04/2020</td>
<td>234567A-DH-13569*</td>
<td>550.00</td>
<td>0.00</td>
<td>0.00</td>
<td>550.00</td>
</tr>
<tr>
<td>5</td>
<td>01/04/2020</td>
<td>234567B-DH-13569*</td>
<td>392.81</td>
<td>0.00</td>
<td>0.00</td>
<td>392.81</td>
</tr>
<tr>
<td>6</td>
<td>01/04/2020</td>
<td>234567C-DH-13569</td>
<td>392.81</td>
<td>0.00</td>
<td>0.00</td>
<td>392.81</td>
</tr>
<tr>
<td>1</td>
<td>01/03/2020</td>
<td>123456A-DH-13569*</td>
<td>226.00</td>
<td>0.00</td>
<td>0.00</td>
<td>226.00</td>
</tr>
<tr>
<td>2</td>
<td>01/03/2020</td>
<td>123456B-DH-13569*</td>
<td>63.00</td>
<td>0.00</td>
<td>0.00</td>
<td>63.00</td>
</tr>
<tr>
<td>3</td>
<td>01/03/2020</td>
<td>123456C-DH-13569</td>
<td>289.00</td>
<td>0.00</td>
<td>0.00</td>
<td>289.00</td>
</tr>
</tbody>
</table>

Figure 2-4: Example of bill list display in patch 29

Patch 30 corrects the column alignment as well as the order in which bills are listed (the date the bill was created in Accounts Receivable). In addition to correcting the display alignment and the order in which the bills display, a correction was made to ensure that an ‘m’ displays in front of bill numbers that contain a bill message. This will be reflected in the menu options listed above for the A/R Bill Alignment Display.

Claims for (msg) DEMO,PATIENT from 01/01/2020 to 10/30/2020 Page: 1

Batch : PRIVATE         Item : 1
Amount :  1000.00        Amount :  1000.00
Posted :   0.00          Posted :   0.00
Unalloc:    0.00          Unalloc:    0.00
Balance:  1000.00        Balance:  1000.00

<table>
<thead>
<tr>
<th>LN#</th>
<th>DOS</th>
<th>Claim #</th>
<th>Billed Amount</th>
<th>Current Paymnts</th>
<th>Current Adjust</th>
<th>Current Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>01/02/20</td>
<td>m402455-DH-13577</td>
<td>200.00</td>
<td>0.00</td>
<td>0.00</td>
<td>180.00</td>
</tr>
<tr>
<td>2</td>
<td>02/24/20</td>
<td>m402458A-DH-13577*</td>
<td>300.00</td>
<td>0.00</td>
<td>0.00</td>
<td>300.00</td>
</tr>
<tr>
<td>3</td>
<td>02/24/20</td>
<td>402458B-DH-13577</td>
<td>300.00</td>
<td>0.00</td>
<td>0.00</td>
<td>300.00</td>
</tr>
<tr>
<td>4</td>
<td>09/14/20</td>
<td>402477A-DH-13577</td>
<td>479.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Figure 2-5: Example of bill list display in patch 30 with an ‘m’ indicating a bill message exists
2.3 ERA A/R Bill Matching Display

A change was made to the portion of the ERA A/R Bill Matching option (PST > ERA > BLMT) that displays matched claims and reviews them for potential negative bill balances if ERA payments and adjustments were to auto-post. Negative bill balance checks display for all IHS facilities. They also display for Tribal/Urban facilities that have chosen not to allow reverse ERA payments to be posted or negative ERA bill balances to be created. Tribal/Urban facilities can change this preference in the Site Parameter Edit option (MAN > SPE), if desired; however, sites that are unsure of how this could affect ERA posting, bill balances, and collection batch balances should contact their local IT or open a ticket with the IT Service Desk for support and guidance.

Prior to patch 30, the entries associated with negative bill balance checks were incorrectly numbered (2, 4, 6, etc.).

<table>
<thead>
<tr>
<th>CHECKING FOR NEGATIVE BALANCE IF MATCHED ERA CLAIMS ARE POSTED...</th>
</tr>
</thead>
<tbody>
<tr>
<td>2    ERA BILL: 123456B  CURRENT BILL AMT(RPMS): 126.00</td>
</tr>
<tr>
<td>(123456B-DH-13569)</td>
</tr>
<tr>
<td>PYMT: -100.00</td>
</tr>
<tr>
<td>A/R CAT: NON PAYMENT  A/R RSN: Non Covered Days/Room Chrg</td>
</tr>
<tr>
<td>ADJ: 0.00</td>
</tr>
<tr>
<td>A/R CAT: NON PAYMENT  A/R RSN: Chrgs pd/adj by another pay</td>
</tr>
<tr>
<td>ADJ: 0.00</td>
</tr>
<tr>
<td>BILL BALANCE IF ERA CLAIM IS POSTED: 226.00</td>
</tr>
<tr>
<td>4    ERA BILL: 4567890A  CURRENT BILL AMT(RPMS): 126.00</td>
</tr>
<tr>
<td>(4567890A-DIH-13569)</td>
</tr>
<tr>
<td>PYMT: 100.00</td>
</tr>
<tr>
<td>A/R CAT: NON PAYMENT  A/R RSN: Non Covered Days/Room Chrg</td>
</tr>
<tr>
<td>ADJ: 0.00</td>
</tr>
<tr>
<td>A/R CAT: NON PAYMENT  A/R RSN: Chrgs pd/adj by another pay</td>
</tr>
<tr>
<td>ADJ: 0.00</td>
</tr>
<tr>
<td>BILL BALANCE IF ERA CLAIM IS POSTED: 26.00</td>
</tr>
</tbody>
</table>

Matched Bills:  2 for $    0.00
Unmatched Bills: 0 for $    0.00
Total Bills:    2 for $    0.00

LOOKING FOR NON-MATCHED PAYMENTS AGAINST NONPAYMENT BATCHES

Do you wish to print report of the matching process? Y/

Figure 2-6: Example of negative bill balance check displayed in patch 29 ERA BLMT option

Patch 30 removes the numbering and realigns the entries to the left.
Checking for negative balance if matched ERA claims are posted...

<table>
<thead>
<tr>
<th>ERA BILL</th>
<th>CURRENT BILL AMT(RPMS)</th>
<th>PYMT</th>
<th>BILL BALANCE IF ERA CLAIM IS POSTED</th>
</tr>
</thead>
<tbody>
<tr>
<td>123456A</td>
<td>881.14</td>
<td>400.00</td>
<td>481.14</td>
</tr>
<tr>
<td>(123456A-DH-13577)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2345678D</td>
<td>413.00</td>
<td>100.00</td>
<td>313.00</td>
</tr>
<tr>
<td>(234567D-DH)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9876543A</td>
<td>1,249.07</td>
<td>100.00</td>
<td>1,149.07</td>
</tr>
<tr>
<td>(9876543A-DH-13577)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Matched Bills: 3 for $600.00
Unmatched Bills: 0 for $0.00
Total Bills: 3 for $600.00

Looking for non-matched payments against nonpayment batches

Do you wish to print report of the matching process? Y/

Figure 2-7: Example of negative bill balance check displayed in patch 30 ERA BLMT option

2.4 ERA REV Edit Status Display

A change was made to the Edit Status display in the ERA Review Postable Claims option (PST > ERA > REV) when manual matching to ensure that the ERA claim selected for matching displays on the same screen as the “Select A/R Bill/IHS Bill Number” prompt.

BAR Claim Review  Dec 17, 2020 14:15:17  Page: 1 of 0
HIPAA 835 v5010  File: 1044_ERA_10/18/2020  Chk/EFT#: 2222222222GGGGGGGGGG

<table>
<thead>
<tr>
<th>#</th>
<th>Claim</th>
<th>Date</th>
<th>Patient</th>
<th>AR Account</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>123456A</td>
<td>Mar 7, 2020</td>
<td>DEMO, PATIENT</td>
<td>CLAIM UNMATCHED</td>
<td>BILL AMOUNT DOESN'T MATCH RPMS</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>BILL NUMBER/RX NOT FOUND IN RPMS</td>
</tr>
<tr>
<td>2</td>
<td>2345678</td>
<td>Nov 4, 2020</td>
<td>DEMO, PATIENT</td>
<td>CLAIM UNMATCHED</td>
<td>BILL NUMBER/RX NOT FOUND IN RPMS</td>
</tr>
<tr>
<td>3</td>
<td>3456789</td>
<td>Nov 4, 2020</td>
<td>DEMO, PATIENT</td>
<td>CLAIM UNMATCHED</td>
<td>BILL NUMBER/RX NOT FOUND IN RPMS</td>
</tr>
<tr>
<td>4</td>
<td>3456789</td>
<td>Nov 4, 2020</td>
<td>DEMO, PATIENT</td>
<td>CLAIM UNMATCHED</td>
<td>BILL NUMBER/RX NOT FOUND IN RPMS</td>
</tr>
</tbody>
</table>

Select Action: Next Screen// 1   Edit Status
Select (s): (1-600): 1
Do you wish to change the status of claim 123456A (# 1 ) from status 'CLAIM UNMATCHED' to 'MATCHED' or 'EXCEPTION' <M/E>? MATCHED
Are you sure?? N// YES

Figure 2-8: Example of selecting an ERA claim for manual matching in the ERA REV option
After the selection is made to change an ERA claim status to 'Matched', users are taken to a new screen that displays the ERA claim that was selected. The “Select A/R Bill/IHS Bill Number” prompt will display which allows for entering a bill number, an RX number, or a patient name and date range. Once this information is entered, a list of associated bills will display to choose from.

<table>
<thead>
<tr>
<th>#</th>
<th>Claim</th>
<th>Date</th>
<th>Patient</th>
<th>AR Account</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>#1</td>
<td>123456A</td>
<td>MAR 07, 2020</td>
<td>DEMO, PATIENT</td>
<td>CLAIM UNMATCHED</td>
<td></td>
</tr>
</tbody>
</table>

Select A/R BILL/IHS BILL NUMBER:
Select PATIENT NAME: DEMO, PATIENT  
F 02-12-1970 XXX-XX-1234  MHS 13577

Select Beginning Date: 1/1/20  (JAN 01, 2020)
Select Ending Date: 1 JAN 2020//T  (DEC 17, 2020)

Figure 2-9: Example of screen displayed once an ERA claim has been selected for matching

<table>
<thead>
<tr>
<th>LN#</th>
<th>DOS</th>
<th>Claim #</th>
<th>Billed Amount</th>
<th>Billed To</th>
<th>Current Balance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>03/10/20</td>
<td>m123456A-DH-13577*</td>
<td>300.00</td>
<td>NEW MEXICO BC/BS INC</td>
<td>0.00</td>
</tr>
<tr>
<td>2</td>
<td>03/10/20</td>
<td>123456B-DH-13577</td>
<td>300.00</td>
<td>NARRATIVE INSURANCE</td>
<td>300.00</td>
</tr>
<tr>
<td>3</td>
<td>09/14/20</td>
<td>m678901A-DH-13577</td>
<td>479.00</td>
<td>NARRATIVE INSURANCE</td>
<td>0.00</td>
</tr>
<tr>
<td>4</td>
<td>11/08/20</td>
<td>987654A-DH-13577</td>
<td>100.00</td>
<td>NARRATIVE INSURANCE</td>
<td>0.00</td>
</tr>
</tbody>
</table>

LINE # or 0 to quit:  (0-4):

Figure 2-10: Example of bill list generated based on entries made for bill number or patient name and date range

2.5 Reports

2.5.1 Cancelled Bills Report

A correction was made to the Cancelled Bills Report (MAN > RPT > CXL) to ensure that bills with a zero balance do not display when the user specifies that only bills with an open balance be reported. In addition, an XML option was added to allow for exporting the report as an Excel spreadsheet.

To access the XML option, select Report Type and then select option 3 – Detail and Summary (XML). Select any other desired parameters and press Enter until you get to the “Device” prompt. Type HFS to export the report to your Host File Server, and then type your local directory path along with a report name and an extension of ‘.xml’. The naming convention should look something like this: ‘c:\pub\CancelledBillsRpt093020.xml’.

Keep in mind that your site’s directory path will likely be different. Contact your local IT department if you need assistance.
Select Management Reports <TEST ACCOUNT> Option: CXL  Cancelled Bills Report

Include ONLY bills with an open balance? YES//     ONLY BILLS W/OPEN BALANCE

NOTE: This report will contain data for VISIT location(s) regardless of BILLING location.

INCLUSION PARAMETERS in Effect for Cancelled Bills Report:
=====================================================================  
- Report Type............: DETAIL

Select one of the following:
  1   LOCATION
  2   BILLING ENTITY
  3   DATE RANGE
  4   CANCELLING OFFICIAL
  5   PROVIDER
  6   ELIGIBILITY STATUS
  7   REPORT TYPE

Select ONE or MORE of the above INCLUSION PARAMETERS: 7  REPORT TYPE

Select one of the following:
  1   Detail
  2   Summary
  3   Detail and Summary (XML)

Select TYPE of REPORT desired: 1// 3  Detail and Summary (XML)

INCLUSION PARAMETERS in Effect for Cancelled Bills Report:
=====================================================================  
- Report Type............: Detail and Summary (XML)

Select one of the following:
  1   LOCATION
  2   BILLING ENTITY
  3   DATE RANGE
  4   CANCELLING OFFICIAL
  5   PROVIDER
  6   ELIGIBILITY STATUS
  7   REPORT TYPE

Select ONE or MORE of the above INCLUSION PARAMETERS:
Sort Report by [V]isit Type or [C]linic: V// VISIT TYPE
Select Visit Type: ALL// ALL

NOTE: You have selected to produce a Detail and Summary (XML) Cancelled Bills Report
For ALL Visit Locations
containing ONLY bills with an Open Balance.

Proceed? YES//

The report is in spreadsheet XML format so please use the HFS device
and include the '.xml' suffix on the file name.
i.e. 'c:\temp\CXLreport.xml'

Enter RETURN to continue or '^' to exit:

Output DEVICE: HOME// HFS HOST FILE SERVER
HOST FILE NAME: C:\TEMP\c\pub\CancelledBillsRpt093020.xml ADDRESS/PARAMETERS: "
WNS"//

Requested Start Time: NOW// (SEPT 30, 2020@12:33:45)
Task # 36095 queued.

Enter RETURN to continue or '^' to exit:

Figure 2-11: Exporting the Cancelled Bills Report using the new XML option

Access your site’s server and retrieve the exported report. The report will
automatically open in an XML format, which can be edited as desired and saved as an
Excel document. The XML report will contain two tabs. One tab provides Detail
information, and another tab provides Summary information.

The Detail report will look similar to Figure 2-12.

<table>
<thead>
<tr>
<th>CANCELLED BILL</th>
<th>VISIT LOCATION</th>
<th>VISIT TYPE</th>
<th>DATE</th>
<th>BILL #</th>
<th>AMOUNT</th>
<th>ACCOUNT CODE</th>
<th>PROVIDER CODE</th>
<th>BILLING CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>12345</td>
<td>Hospital</td>
<td>Dental</td>
<td>09/30/2020</td>
<td>2345</td>
<td>123.45</td>
<td>12345</td>
<td>12345</td>
<td>12345</td>
</tr>
<tr>
<td>67890</td>
<td>Hospital</td>
<td>Dental</td>
<td>10/01/2020</td>
<td>5678</td>
<td>98.76</td>
<td>67890</td>
<td>67890</td>
<td>67890</td>
</tr>
<tr>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
<td>...</td>
</tr>
</tbody>
</table>

Figure 2-12: Example of Detail Cancelled Bills XML Report
The Summary report will look similar to Figure 2-13.

Figure 2-13: Example of Summary of Cancelled Bills XML report

2.5.2 Claim Count Added to ASM and USM Reports

The Age Summary Report (RPT > ARM > ASM) and the UFMS Age Summary Report (RPT > ASM > USM) were modified to include the total number of claims for each user-specified category, such as A/R Account or Billing Entity, as well as the total number of claims for all categories.
<table>
<thead>
<tr>
<th>A/R ACCOUNT</th>
<th>CURRENT</th>
<th>31-60</th>
<th>61-90</th>
<th>91-120</th>
<th>120+</th>
<th>BALANCE</th>
</tr>
</thead>
<tbody>
<tr>
<td>AETNA US HEALTHCARE</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>1079.51</td>
<td>1079.51</td>
</tr>
<tr>
<td># of Claims</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CHAMPVA CENTER</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>427.50</td>
<td>427.50</td>
</tr>
<tr>
<td># of Claims</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CIGNA HEALTHCARE</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>1683.01</td>
<td>1683.01</td>
</tr>
<tr>
<td># of Claims</td>
<td>14</td>
<td>14</td>
<td>14</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>GEHA</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>15445.75</td>
<td>15445.75</td>
</tr>
<tr>
<td># of Claims</td>
<td>14</td>
<td>14</td>
<td>14</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>MEDICAID FQHC</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>344.00</td>
<td>344.00</td>
</tr>
<tr>
<td># of Claims</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNITED HEALTH CARE</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>755.00</td>
<td>755.00</td>
</tr>
<tr>
<td># of Claims</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>UNITED HEALTHCARE O</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>206.00</td>
<td>206.00</td>
</tr>
<tr>
<td># of Claims</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>VISIT loc Total</strong></td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>0.00</td>
<td>19940.77</td>
<td>19940.77</td>
</tr>
<tr>
<td># of Claims</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>44</td>
<td>44</td>
</tr>
</tbody>
</table>

Figure 2-14: Example of ASM Report displaying total number of claims

2.5.3 **UFMS Data Added to USM Report**

The UFMS Age Summary Report (RPT > ARM > USM) was modified to provide Allowance Category, ASUFAC, and UFMS Invoice Number when run by Allowance Category and Report Type 3. In addition, the ability to export a csv or an XML file was added.

To view the new data elements displayed on the USM report, select **Allowance Category** as the sorting parameter. You may select one Allowance Category or press Enter to select all. At the “Report Type” prompt, select option 3 (Summarize by BILL w/in PAYER w/in ALLOW CAT/BILL ENTITY/INS TYPE).
BULK for Billed Date prior to 10/1/2008 will run automatically.
Enter FYnn-FYnn for a range of Fiscal Years e.g. FY09-FY12

Enter FISCAL YEAR for the Report: FY08-FY21// FY20

NOTE:  This report will contain data for VISIT location(s) regardless of BILLING location.

Select Visit LOCATION: ALL

Select one of the following:
1 A/R ACCOUNT
2 CLINIC TYPE
3 VISIT TYPE
4 DISCHARGE SERVICE
5 ALLOWANCE CATEGORY
6 BILLING ENTITY
7 INSURER TYPE

Select criteria for sorting: 5 ALLOWANCE CATEGORY

Select one of the following:
1 MEDICARE (INS TYPES R MD MH MC MMC)
2 MEDICAID (INS TYPES D K FPL)
3 PRIVATE INSURANCE (INS TYPES P H F M)
4 VETERANS (INS TYPES V)
5 OTHER (INS TYPES W C N I G T SEP TSI)

Select TYPE of ALLOWANCE CATEGORY to Display: ALL

Select one of the following:
1 Summarize by ALLOW CAT/BILL ENTITY/INS TYPE
2 Summarize by PAYER w/in ALLOW CAT/BILL ENTITY/INS TYPE
3 Summarize by BILL w/in PAYER w/in ALLOW CAT/BILL ENTITY/INS TYPE

Select REPORT TYPE: 1// 3 Summarize by BILL w/in PAYER w/in ALLOW CAT/BILL ENTITY/INS TYPE

Figure 2-15: Example of parameter selections required to access new data elements and new export options

After the Report Type is selected, three new options will display for viewing the report. To display the report on your computer screen or to print it, select option 3 (Print format).
To export a csv or XML file, choose option 1 or 2 as appropriate. At the “Output Device” prompt, type **HFS** for Host File Server. The Host File Name prompt will display, and although there might be a directory path populated in this field, you will need to type your directory path again and give your report a name.

You will also need to append your name with `.csv` or `.xml`, depending on which option you chose for exporting. The naming convention will look something like this: `c:\pub\USM12112020.xml`.

Keep in mind that your site’s local directory path will likely be different. Contact your local IT department for assistance if needed.

---

**This report is designed to be session logged or sent to a host file server device with no pauses between reports or full screens of information so please take appropriate steps to allow viewing of the entire report.**

Enter RETURN to continue or `'` to exit:

Select one of the following:

1. Comma Separated file (.csv suffix)
2. Spreadsheet XML (.xml suffix)
3. Print format

Select REPORT TYPE: 3// 2  Spreadsheet XML (.xml suffix)

Output DEVICE: HOME// HFS  HOST FILE SERVER
HOST FILE NAME: C:\TEMP\c:\pub\USM12112020.xml  ADDRESS/PARAMETERS: "WNS"

Requested Start Time: NOW// (DEC 11, 2020@16:18:54)
Task # 38289 queued.

Enter RETURN to continue or `'` to exit:

---

**Figure 2-16: Example of new export options available and how to utilize the XML option**

Access your site’s server and retrieve the exported report. The report will automatically open in an XML format, which can be edited as desired and saved as an Excel document, and will look similar to Figure 2-17.

---

**Figure 2-17: Example of USM XML Report**
Acronym List

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>A/R</td>
<td>Accounts Receivable</td>
</tr>
<tr>
<td>ASUFAC</td>
<td>A 6-digit code that uniquely identifies IHS/Tribal/Urban facilities by Area, Service Unit, Facility</td>
</tr>
<tr>
<td>CSV</td>
<td>Comma separated file</td>
</tr>
<tr>
<td>ERA</td>
<td>Electronic Remittance Advice</td>
</tr>
<tr>
<td>IHS</td>
<td>Indian Health Service</td>
</tr>
<tr>
<td>RPMS</td>
<td>Resource and Patient Management System</td>
</tr>
<tr>
<td>UFMS</td>
<td>United Financial Management System</td>
</tr>
<tr>
<td>XML</td>
<td>Extensible Markup Language</td>
</tr>
</tbody>
</table>
Contact Information

If you have any questions or comments regarding this distribution, please contact the IHS IT Service Desk.

Phone: (888) 830-7280 (toll free)
Web: https://www.ihs.gov/itsupport/
Email: itsupport@ihs.gov