

## Electronic Billing

15 December 2020 1100 – 1200 EST  
17 December 2020 1600 – 1700 EST

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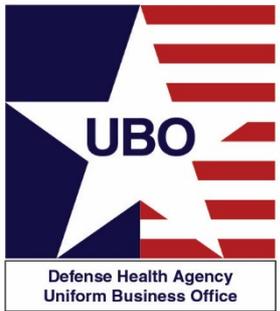
**Instructions for CEU credit are at the end of this presentation.**

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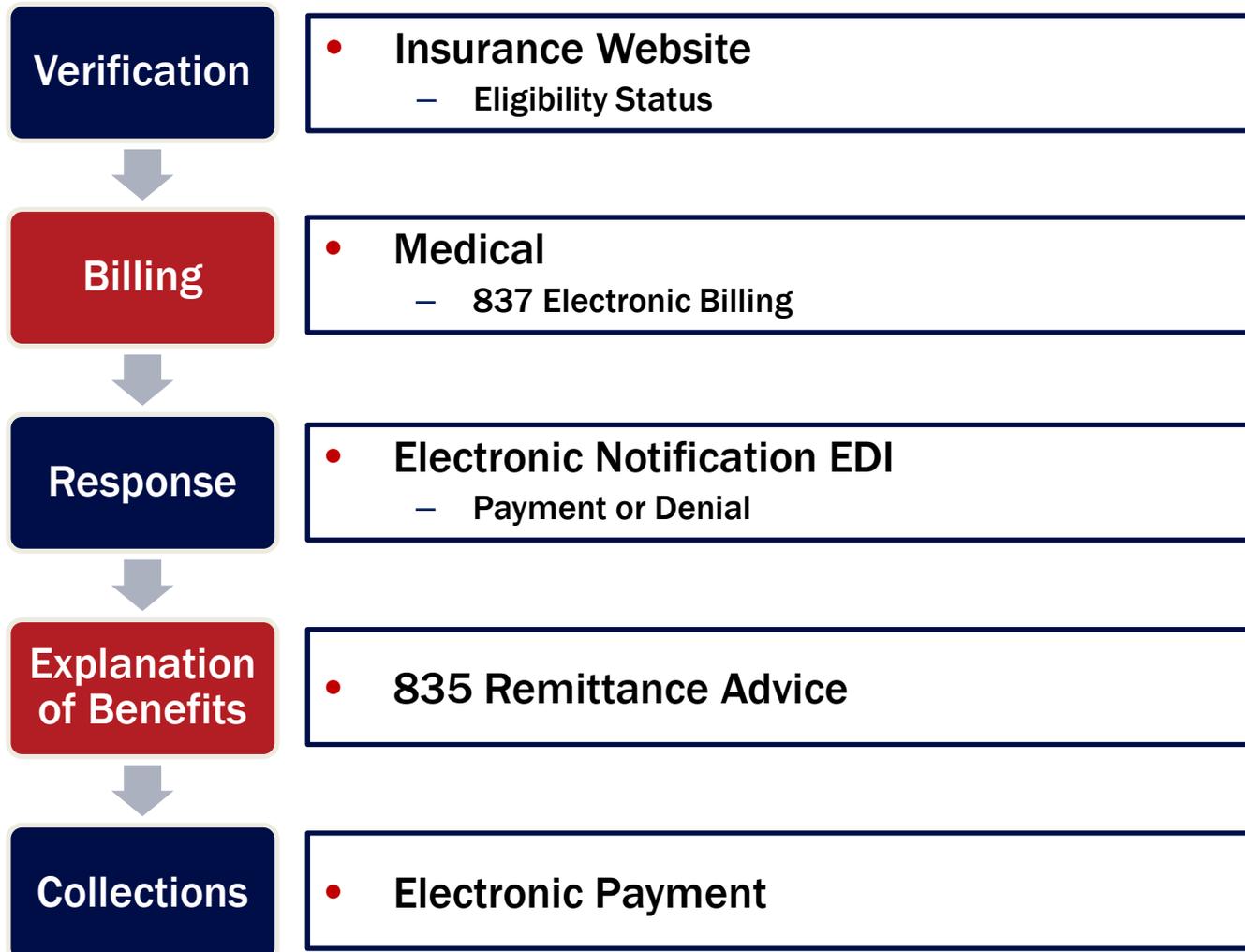
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- **Electronic Claims Life Cycle**
- **837 Electronic Data Interchange (EDI)**
- **835 Electronic Remittance Advice (ERA)**
- **Electronic Funds Transfers (EFT)**
- **ABACUS Recovery**
- **Additional Resources**



# Electronic Claims Life Cycle



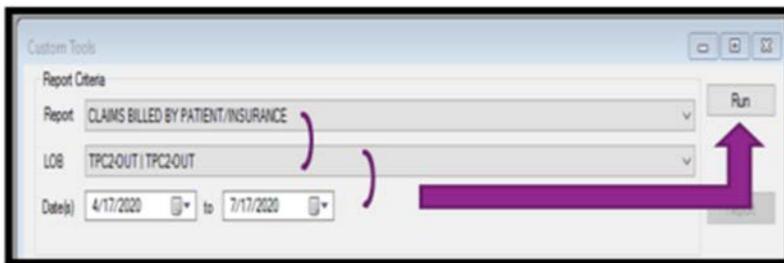


Select "Claims billed by patient/insurance"

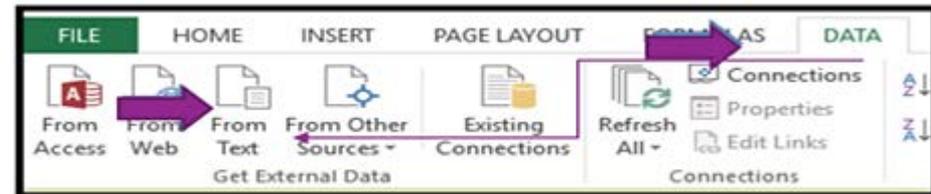
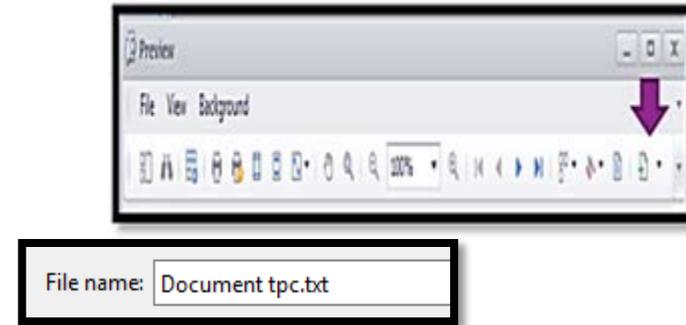
Select LOB "TPC2-OUT" from drop-down

Select Date (last 3-6 months)

Select "Run" & then "Report"



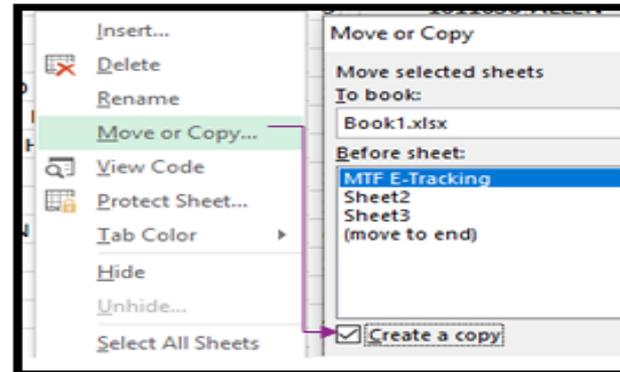
- Pop-up Preview → Export Document
  - Select “Text File” from the drop down
  - Pop-up → OK
  - Pop-up → “Save As” → Insert File Name
  - Select “Save”
- Save to Desktop
  - Pop-up → “Do you want to open this file” click “No”
- Open new Excel workbook
  - “Data” → “Get External Data” → “Select from Text”
  - Find intended document → Select “Import”
    - Pop-up → “Next” → “Next” → “Finish”
    - Pop-up → Import Data select “OK”
- Save As “MTF Name Payer List Electronic v1.Excel”



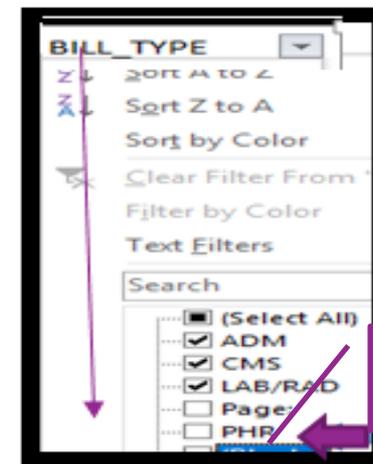
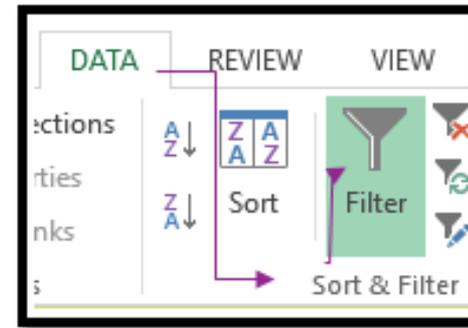
- Rename Sheet1 as “1y Claim Billed Master”

For Official Use Only	Header Row						ABACUS				NH BREMERTON
	S BILLED BY PATIENT/INSURANCE								1 BOONE RD CODE 08BRAZD		
									BREMERTON, WA 98312		
NO_OF_CLAIMS	PATIENT_IDEN	PAT_L_NAME	PAT_F_NAME	CARRIER_ID	PAYER_NAME	POLICY_NUMBER	GROUP_NUMBER	GROUP_NAME	BILL_TYPE		

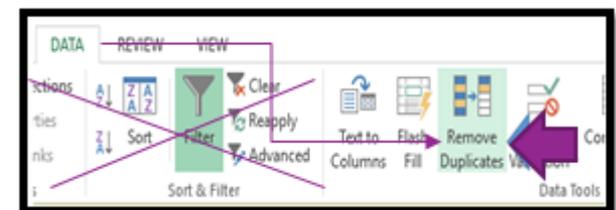
- Copy data to another tab
  - Right-click tab “1y Claim Billed Master,” select “move or copy” → “Create a Copy”
  - Copy for Pharmacy HICs, also as safety file



- Select “Header Row”
- Go to “Data” in top menu
  - In “Sort and Filter” select “Filter”
- Select “Header Row” again → “Filter Column by Bill Type”
  - Select “PHR” from drop-down
  - Select all “PHR” rows and delete
  - Select ALL from Bill Type and click OK
  - Pharmacy HICs next phase
- Select/Highlight “Header Row” along with all data rows
- Go to “Data”
  - In “Data Tools” select “Remove Duplicates”



Only select PHR, rest are not checked.

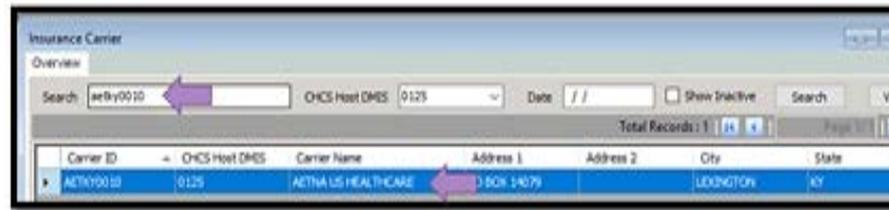
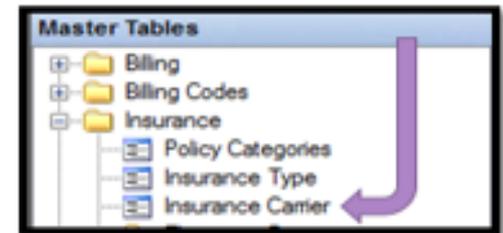


- Pop-up “Remove Duplicates” → Check Box “My Data Has Headers” and Select “Carrier ID” → “Payer Name” → “OK”
- A Box “Removed Duplicates” will show → “OK”
- List of all Billed MD Carrier ID (HIC) and Payer Name
  - Right-click tab “Rename” as “2y Claim Billed Medical

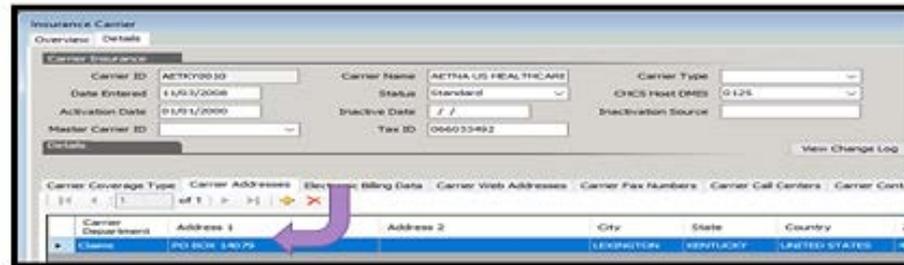


CARRIER_ID	PAYER_NAME
AETKY0010	AETNA US HEALTHCARE
AETTX0031	AETNA US HEALTHCARE
BCBWA0001	BCBS FEDERAL WASHINGTON
CIGDED0015	CIGNA INTERNATIONAL

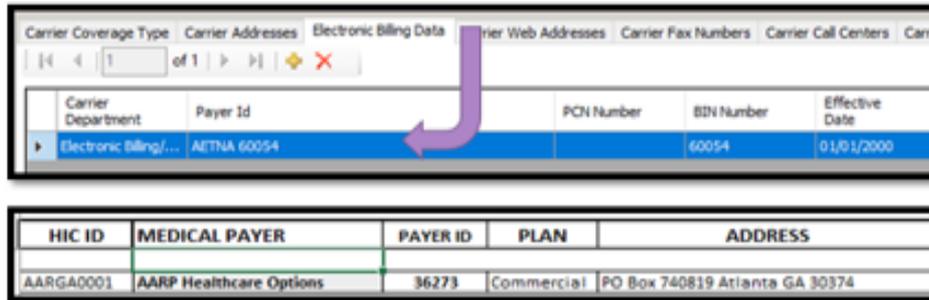
- Log in to ABACUS
- Go to Master Tables → Insurance Carrier
- Enter HIC ID from list into Search box
  - Select Carrier ID HIC ID line



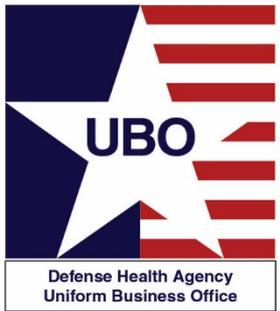
- Select “Carrier Addresses” tab for MD address



- Select “Electronic Billing Data” tab for Payer ID
  - Insert data into Excel

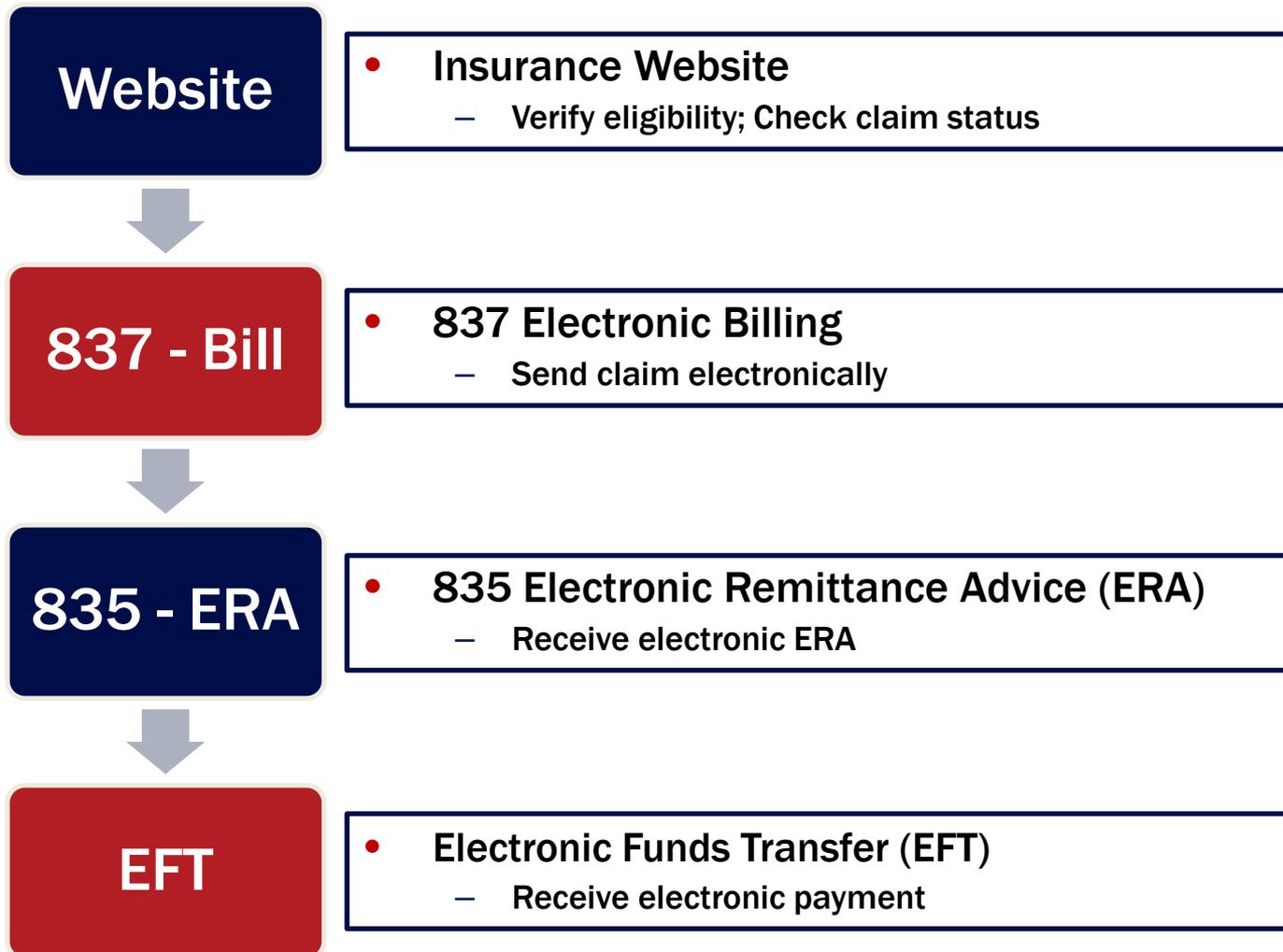


- Prior Auth: Add notes → MTF Notes: Add notes
- Duplicate HIC IDs
  - Research and Choose one or research and add notes how to choose correct HIC ID if duplicates exist
- Repeat for every payer, or top payers to start



# Electronic Data Interchange (EDI)

**ABACUS 837**



- Master Tables → Insurance → Insurance Carrier

Insurance Carrier

Overview Details

Carrier Insurance

Carrier ID: AETKY0010 Carrier Name: AETNA US HEALTHCARE Carrier Type: [v]  
 Date Entered: 11/03/2008 Status: Standard CHCS Host DMIS: 0125  
 Activation Date: 01/01/2000 Inactive Date: // Inactivation Source: [v]  
 Master Carrier ID: [v] Tax ID: 066033492

View Change Log

Carrier Coverage Type Carrier Addresses Electronic Billing Data Carrier Web Addresses Carrier Fax Numbers Carrier Call Centers Carrier Contacts Carrier Comments

Coverage Type	Coverage Status	Payer Billing Type	Effective Date	Termination Date	Description	Input Source
MD	Standard	B	01/01/2000			Conv...

- Choose Carrier-Payer HIC ID
  - Extra Coverage types can be removed
- Address Updated can be updated in PO Box 14079

Carrier Coverage Type Carrier Addresses Electronic Billing Data Carrier Web Addresses Carrier Fax Numbers Carrier Call Centers Carrier Contacts Carrier Comments

Carrier Department	Address 1	Address 2	City	State	Country	Zip	Zip Extn	Email
Claims	PO BOX 14079		LEXINGTON	KENTUCKY	UNITED STATES	40512		

- Add Electronic Billing Data

Carrier Coverage Type | Carrier Addresses | **Electronic Billing Data** | Carrier Web Addresses | Carrier Fax Numbers | Carrier Call Centers | Carrier C...

1 of 1

Carrier Department	Payer Id	PCN Number	BIN Number	Effective Date
Electronic Billing/...	AETNA 60054		60054	01/01/2000

**Electronic Billing Data** [X]

Electronic Billing Data [Add/Update]

Carrier ID:  Carrier Department:

Effective Date:  Termination Date:

Electronic Payer ID:  PCN Number:  BIN Number:

Description:

- Adding Master Carrier

AETKY0034	0125	AETNA GLOBAL BENEFITS	PO BOX 14079		LEXINGTON	KY	True
AETKY0010	0125	AETNA US HEALTHCARE	PO BOX 14079		LEXINGTON	KY	True
AETKY0005	0125	AETNA US HEALTHCARE	PO BOX 14089		LEXINGTON	KY	True

- Removed extra Coverage Types

Coverage Type	Coverage Status	Payer Billing Type	Effective Date	Termination Date	Description	Input Source
MD	Standard	B	01/01/2000		AETNA US HEALTHCARE	Conv...

- Verified electronic, deleted (X) if not blank

Carrier Department	Payer Id	PCN Number	BIN Number	Effective Date	Termination Date	Input Source

- Add/select Master Carrier

**Insurance Carrier**  
Overview Details

**Carrier Insurance**

Carrier ID: AETKY0005      Carrier Name: AETNA US HEALTHCARE  
 Date Entered: 11/03/2008      Status: Standard  
 Activation Date: 01/01/2000      Inactive Date: / /  
 Master Carrier ID: [dropdown]      Tax ID: [input]

**Details**

Search: aetky0010

Carrier ID	Carrier Name	CHCS Host DMIS
AETKY0010	AETNA US HEALTHCARE	0125

- Save

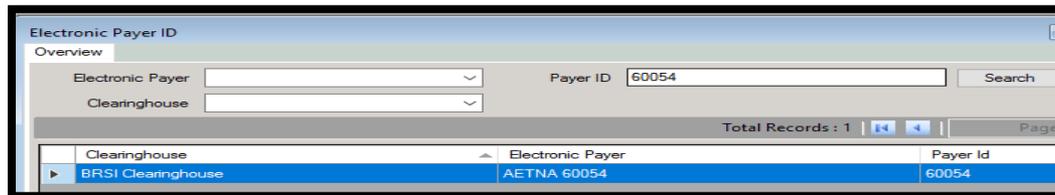
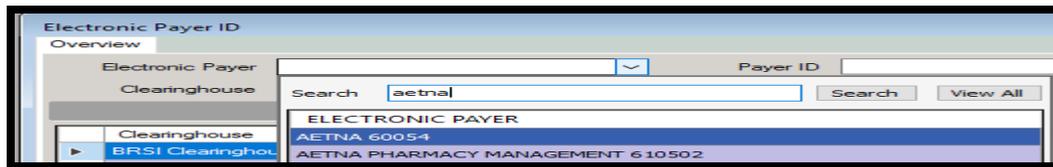
Master Carrier ID: AETKY0010 [dropdown]

- Master Tables → Insurance → Electronic Payer
  - Electronic Payer & Payer ID
- MTF Detailed HIC ID Data for Medical is Tracker in Excel
- Setting up a HIC ID to bill electronically
  - Electronic Payer
  - Electronic Payer ID
    - <https://www.practiceinsight.net/payers/payer-list/>
  - Insurance Carrier



Electronic Payer	
Overview	Details
Electronic Payer Name	AETNA 60054

- Electronic Payer
  - Add Payer ID
  
- Search by Name or Payer ID
  - Electronic Payer-Timely Filing Days: Aetna is several years, update
  
- Save



### Electronic Payer ID

Overview Details

**Related To**

Is Active

Clearinghouse:  Payer ID:

Electronic Payer:  Date Added:

Timely Filing Days:

**Enrollment**

Enrollment Required

Enrollment Date:  Enrolled By:

**Services Accepted**

Claim Status Check Accepted (276/277)?  Insurance Verification Accepted (270/271)?

**837**

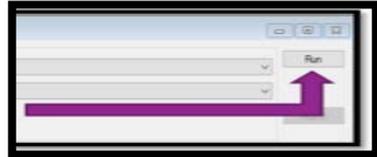
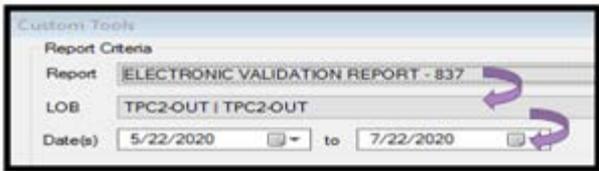
Institutional Charges  Dental Charges Accepted  Professional Charges Accepted

Pharmacy Charges  Allow For Electronic Attachments

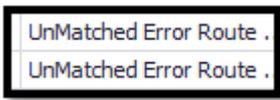
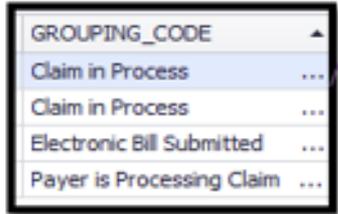
- Log in to ABACUS
- Go to Account Management → Custom Tools → Custom Tools



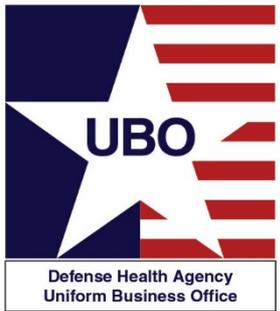
- Custom Tools-Report Criteria
  - Select “ELECTRONIC VALIDATION REPORT -837” from drop-down
  - Select LOB “TPC2- OUT” from drop-down
  - Select date (last 2-6 months)



- Click on Payer tab, select “Aetna” from drop-down
- Review Grouping\_Code tab for processed encounters
- Repeat for all payers



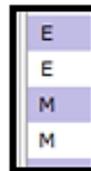
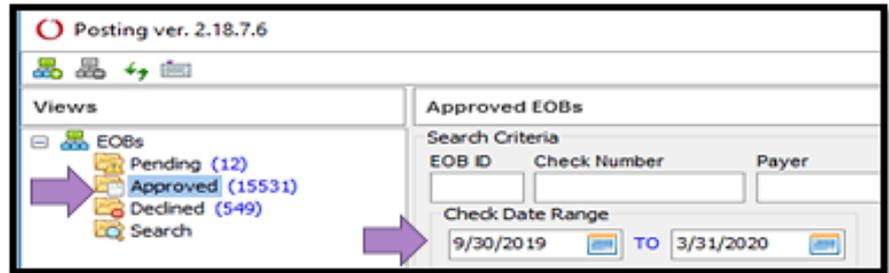
**Training Point- Grouping Code**  
 If there are issues, it is not always apparent. Claim in Process or Electronic Bill Submitted look good, but the claim may not have gone out, or no response from insurance; check the Transmit date and Recovery for the control number if needed.



# **Electronic Remittance Advice (ERA)**

**ABACUS 835**

- Identify current electronic 835-ERA in ABACUS
  
- Log into ABACUS
  - Go to Ledger Posting → EOB ERA Maintenance
  - Select EOBs Approved
    - Select “Payer” in header row to alphabetize
  - E is 835-ERA and M is Manual



- 835 ERA has all required data

EDISummaryForm

Patient Name: [REDACTED]

Clearinghouse Messages ERA 835

Entered On	Payer Name	Check Date	Check ID	Check Amount	Control Num	Total Billed	Amount Paid	Pat. Resp.
8/7/2019	PREMERA BLUE CROSS	8/6/2019	4000049615	6428.2	[REDACTED]	31	31	0

Account Note

Electronic Remittance Advice data loaded from:  
F:\EDI\N\_BREMERTON\_PROD\Pending\CR835\_20190806.BC.enc

Bulk payment (CHK) of 6,428.20 on Check 4000049615 dated 8/6/2019 Trace 1910499247 2  
PREMERA BLUE CROSS  
PO BOX 91059  
SEATTLE, WA 98111  
91-0499247  
PER \*BL\*EDI TEAM\*EM\*EDI@PREMERA.COM\*TE\*8004352715~

Check made payable to:  
NAVAL HOSPITAL BREMERTON  
1 BOONE RD  
CODE 08RAZD  
BREMERTON, WA 98312  
Payee TaxId 91-0565147 NPI 1427010420

Claim 15 [REDACTED] 31.00 paid 31.00 Patient Responsibility is 0.00  
Payer's Claim Control Number = F19186034270  
Claim received by payer on 7/3/2019  
Service from 6/6/2019 to 6/6/2019

Patient: [REDACTED]

Service Lines:

SVC ID	SVC Date	Charged	Paid
NU:0250	6/6/2019	13.70	13.70
NU:0250	6/6/2019	17.30	17.30

- Research required if no payment received

EDISummaryForm

Patient Name: [REDACTED]

Clearinghouse Messages

Err Num	Error Code	Severity	Insured ID	Date of Service	Amt Billed
▶ 0		A	[REDACTED]	5/14/2019	18.78

Error Message

Forwarded to Payer~

Payer: 62308 - CIGNA HEALTHCARE  
 Facility: NAVAL BRANCH HEALTH CLINIC EVERETT  
 File Name: F:\EDI\N\_BREMERTON\_PROD\Pending\CRDatafileCR\_20190702.TXT

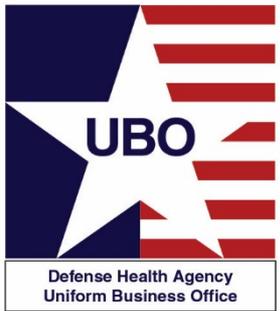
Payer Responses

Resp Date	Line Num	Submit Date	Date of Service	Amt Billed	Insured ID
▶ 7/3/2019	10		5/14/2019	18.78	[REDACTED]

Payer Response

Acknowledgement/Receipt- The claim has been received.- Entity acknowledges receipt of claim/encounter (Code A1-19-40)~

Payer: CIGNA HEALTHCARE  
 Claim File: [REDACTED]  
 Response File: CRDatafilePR\_20190703\_1.TXT



# Electronic Funds Transfer (EFT)

- Identify medical payer payment method
- Review daily check log
- Review Collections Information Repository (CIR) or Internal tracker for EFT (ACH) and credit card payments
  - Insert CC for credit card for all payers in the daily credit card log
  - Insert EFT for EFT (ACH) for all payers in the daily EFT log



- Review master list- medical payers- online service
- Each Payer may be a different process to implement

<b>K * DD1131 OTCnet</b>	<b>DATE</b>	<b>DD1131 * OTCnet/Check</b>	<b>Check Total</b>	<b>TPC OutPt *TPT* K1</b>
4000134634	7-Jul-2020	BCBS Federal	\$ 3,321.28	\$ 3,321.28
4000133839	30-Jun-2020	BCBS Federal	\$ 9,767.66	\$ 9,767.66
198814839	26-Jun-2020	Premera Blue Cross	\$ 147.97	\$ 147.97
<b>TOTAL: K*DD1131</b>			<b>\$ 13,236.91</b>	<b>\$ 13,236.91</b>

**Checks**



G * DD1131 CGateway	DATE	CreditGateway- ACH (EFT)	Check Total	TPC OutPt *TPT*
V020032	2-Jul-2020	PREMERA	\$ 13,671.82	\$ 13,671.82
V060017	6-Jul-2020	PREMERA	\$ 1,179.05	\$ 1,179.05
V060017	6-Jul-2020	REGENCE BCBCO	\$ 58.00	\$ 58.00
<b>TOTAL: G*DD1131</b>		<b>\$ 14,908.87</b>	<b>\$ 14,908.87</b>	<b>\$ 14,908.87</b>

**EFT**

C * DD1131 PayGov	DATE	PayGov/Credit Card	Check Total	TPC OutPt *TPT* C1
V548685	9-Jul-2020	Sound Health & Wellness T	\$ 2,426.75	\$ 2,426.75
V548685	9-Jul-2020	Sound Health & Wellness T	\$ 54.74	\$ 54.74
V551218	14-Jul-2020	Sound Health & Wellness T	\$ 196.80	\$ 196.80
<b>TOTAL: C*DD1131</b>		<b>\$ 2,678.29</b>	<b>\$ 2,678.29</b>	<b>\$ 2,678.29</b>

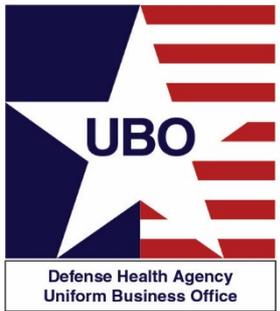
**Credit Card**

**Collections Information Repository (CIR)  
Voucher Detail Report**

Reporting Program/Subprogram: Pay.gov  
 Partner Name: Pay.gov Credit card

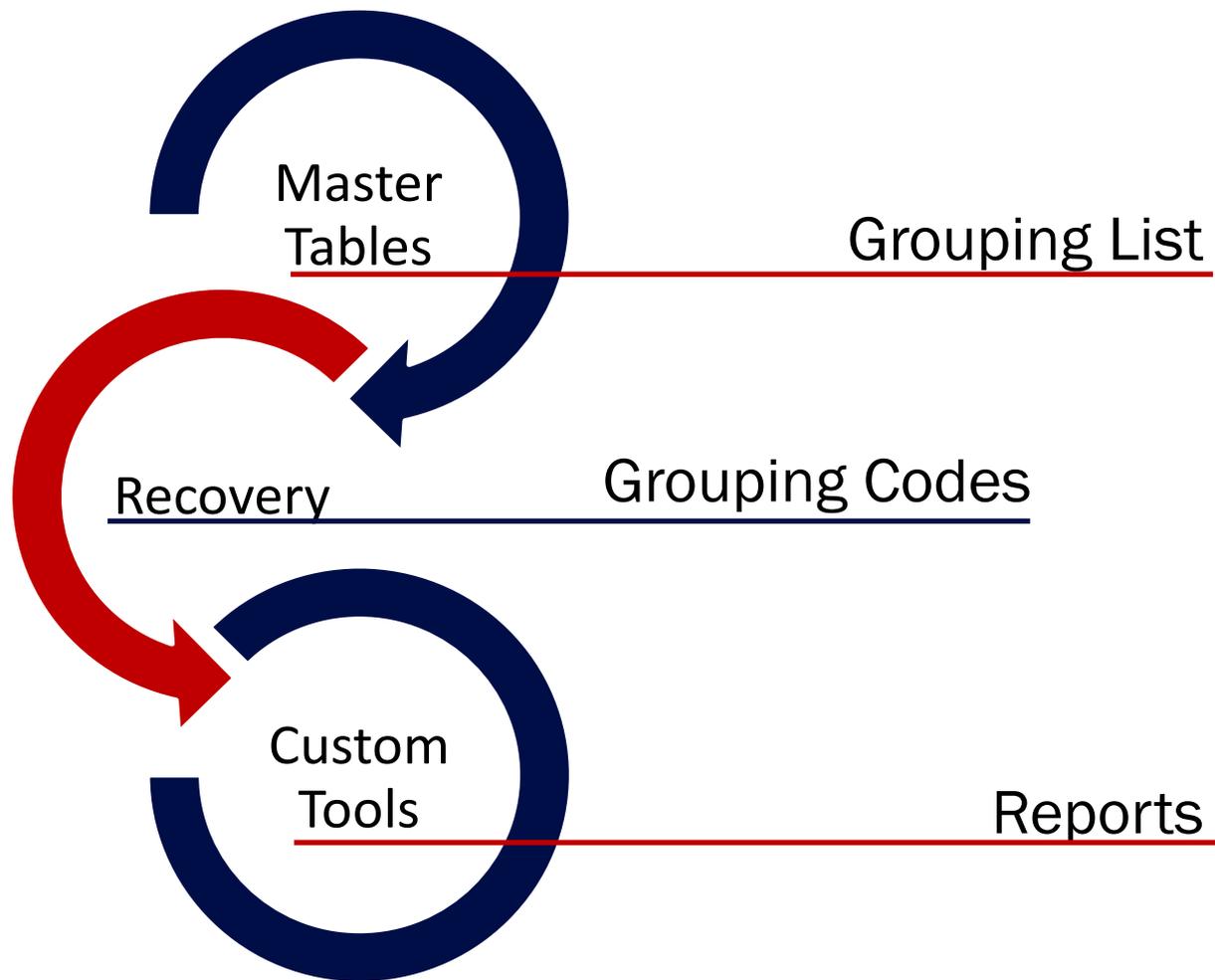
Reporting Program/Subprogram: Credit Gateway:ACH  
 Partner Name: ACH CG EFT

Reporting Program/Subprogram: OTCnet:E-Check Deposit  
 Partner Name: OTCnet Check

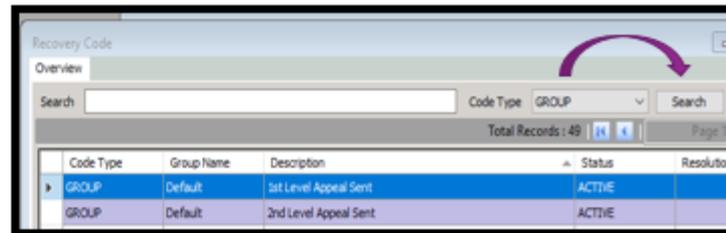
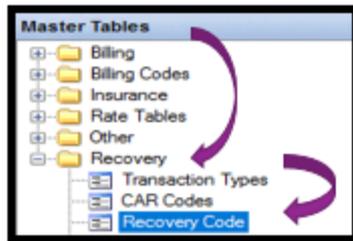


# **ABACUS Account Management**

## **Recovery Grouping Codes**

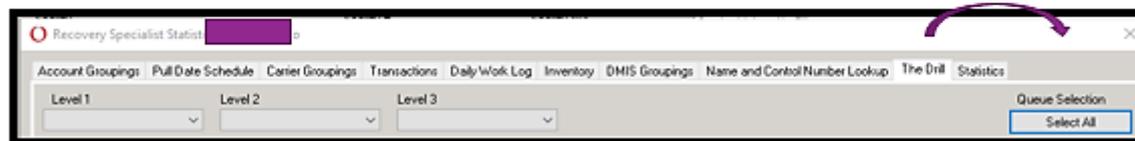


- Log-in to ABACUS
- Master Tables → Recovery → Recovery Codes
  - Select code type “group” from drop-down
  - Click “search”



- Available Recovery Codes are listed with Active Status
  - Prior ARMS-Pro sites will have additional Grouping Codes

- Go to Account Management → Recovery
- Click “Queue Info”
- Click on “The Drill” tab
  - Queue Selection → “Select All” (pulls up open encounters)



- Select Level 1 “Grouping” from drop-down
- Select Level 2 “Carrier Name” from drop-down
- Select Level 3 “Placement Data” from drop-down



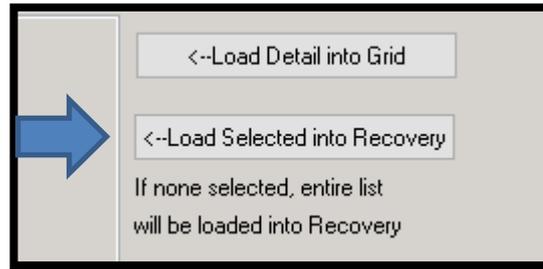
- Select “+” Grouping Code for Electronic Bill Pending, then Payer, then Placement Date

Level 1	Level 2	Level 3	Count	Placed
Grouping	Carrier Name	PlacementDate		
+	Claim Worked		15	\$3,137.88
+	Electronic Bill Pending		47	\$4,668.65
	Carrier Name		Count	Placed
	AETNA US HEALTHCARE		4	\$278.86
	BCBS FEDERAL WASHINGTON		6	\$273.46
	CAREMARK		16	\$2,497.07
	PlacementDate		Count	Placed
	08/07/2020		2	\$20.02
	08/10/2020		1	\$13.70
	08/13/2020		3	\$57.48
	08/17/2020		2	\$93.12
	08/18/2020		1	\$327.50
	08/25/2020		4	\$911.65
	08/26/2020		3	\$1,073.60
	End of Level			
	CIGNA		1	\$13.12
	GOVT EMPLOYEES HOSP ASSOC GEHA		1	\$76.10
	GROUP HEALTH COOPERATIVE		1	\$110.36
	KAISER PERMANENTE WA		1	\$46.20
	OPTIONS HEALTH PLAN		1	\$76.10
	PREMERA BLUE CROSS		7	\$659.01
	End of Level			

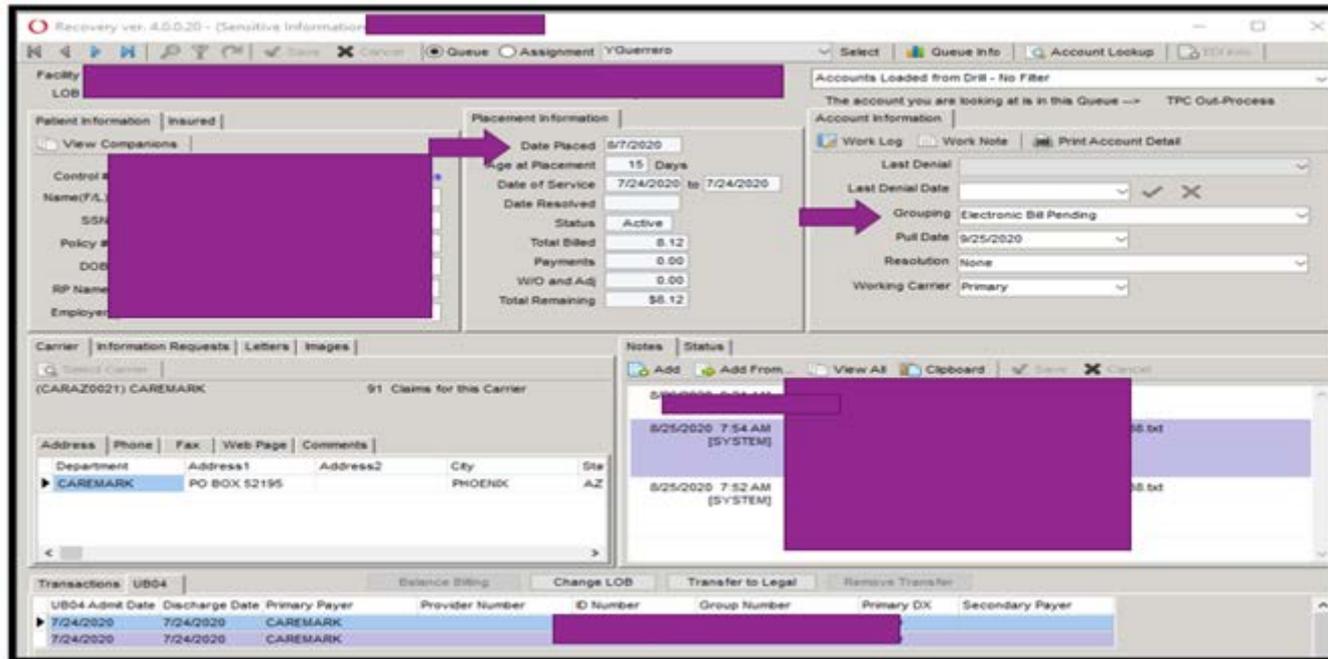
- Select desired row

Carrier Name	Count	Placed
AETNA PHARMACY MANAGEMENT		
AETNA US HEALTHCARE		
BCBS FEDERAL WASHINGTON		
CAREMARK		

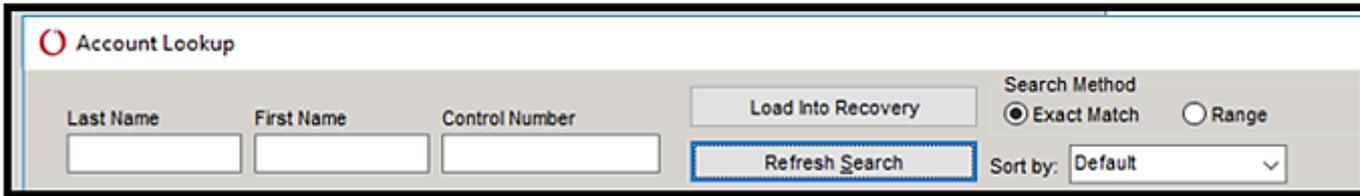
- Click “Load Selected into Recovery”



- Selected encounters are now in Recovery screen



- Encounters may also be pulled up by “Control Number” or “Patient Name”
  - Click on “Account Lookup”
  - Click “Refresh Search” for results
  - Account lookup will open closed encounters



- Working by Carrier
  - Allows pattern finding, research on website, phone calls
- Working by Grouping
  - Allows for identification and working of bill holds in Recovery
  - Displays open encounters

Level 1	Level 2	Level 3	Count	Placed
Carrier Name	Grouping			
+	BLUE CROSS BLUE SHIELD		18	\$12,613.72
▶	BLUE CROSS CALIFORNIA LA CABLC		26	\$12,537.47
	+	Claim in Process	12	\$861.58
	+	Electronic Bill Submitted	10	\$854.49
	+	Payer is Processing Claim	3	\$390.97
	+	Waiting for Check	1	\$10,430.43

Level 1	Level 2	Level 3	Count	Placed
Grouping				
+	1st Level Appeal Sent		1	\$68.90
▶	99199 Review		9	\$25,375.63
+	Anesthesia Review		7	\$6,822.59
+	Bill Correction Needed		228	\$61,505.52
+	Bill Ready to Print		1,263	\$588,042.46
+	Billing Manager Review		22	\$3,111.57
+	Caremark Upload Error Received		18	\$4,940.02
+	CHCS_CONV		2	\$502.28
+	Claim in Process		7,839	\$1,744,038.59
+	CLOSED		312	\$71,631.27
+	Denial Review		110	\$21,343.89
+	Dining Hall		62	\$295.95
+	ECS Review Complete		564	\$2,041.60
+	Electronic Bill Pending		49	\$5,871.64
+	Electronic Bill Submitted		409	\$219,995.76
+	EOB Received		156	\$36,570.81
+	Flag for Review		624	\$234,227.21
+	High Dollar Claim Review		20	\$376,266.06
+	Inpatient Claim Review		12	\$264,944.29
+	Invoice Mailed		214	\$74,746.69
+	MAC Ready to Print		225	\$708,035.94
+	MEPRS HOLD FOR REVIEW		269	\$204,913.21
+	MSA Interagency W/O		1	\$26.52



- “Rx Billing” (March 2020)
- “ABACUS EDI Rx Claims Overview” (October 2018)
- “Electronic Billing” (October 2017)

<https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Learning-Center/Archived-Webinars>

- Contact DHA UBO Helpdesk

[ubo.helpdesk@intellectsolutions.com](mailto:ubo.helpdesk@intellectsolutions.com)

## Questions?



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