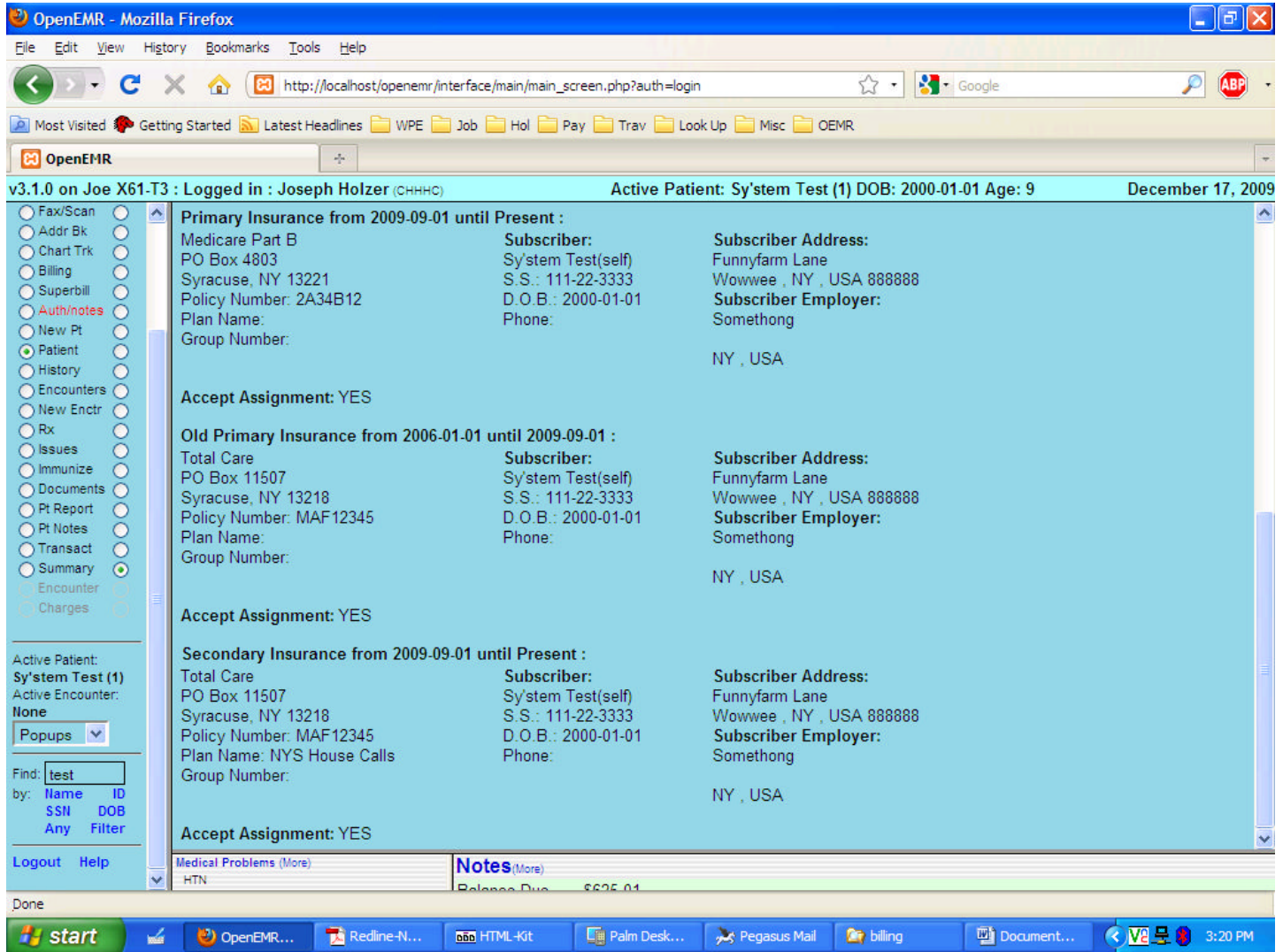


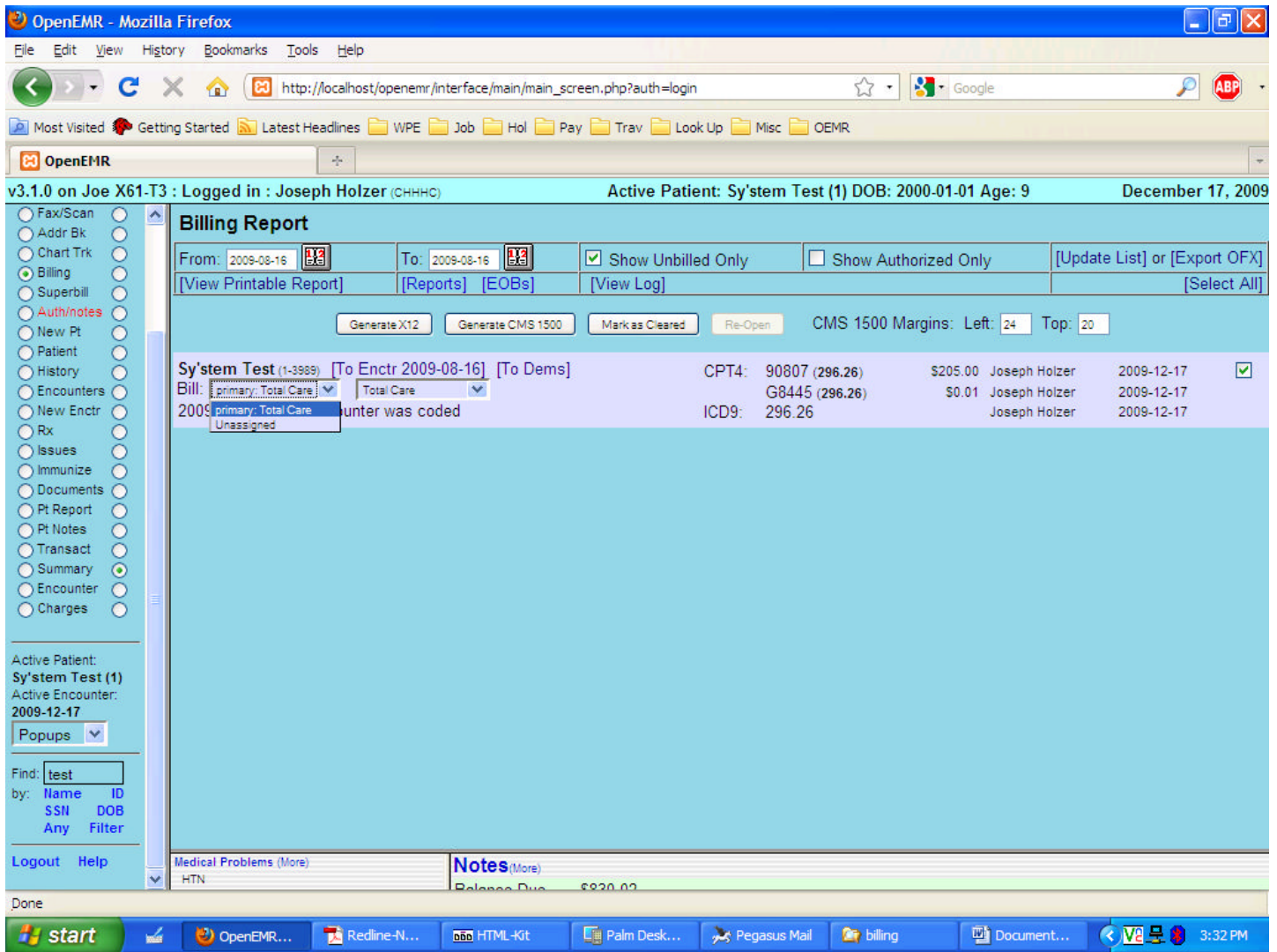
Changing Coverage Periods for Payers Even After Encounters

This is Part 2 of a two-part file of instructions. If you have not yet seen them, please see the Part 1 set before continuing with these. I apologize for the need to do this while I figure how to avoid it. It is caused by the 2MB upload file size limit for Wiki, which makes screenshots hard to use, even while a picture is worth a thousand words. I prefer to provide pictures when I can. I hope you agree. Joe Holzer



The screenshot above is from page 4 of Part 1. If you had previously billed an encounter, you must first “Re-Open” it. Looking at the screenshot below, once you check the box to the far right, that would be one of the choices if the “Unbilled” had been unchecked, in addition to the X12 and CMS 1500 (which better reflects the reality and is now in the CVS for next release, but your copy may still say “HCFA” – they are the same, merely labeled differently). Had you merely selected the date, without removing the checkmark for the “Unbilled”, your list would not have found the previously billed encounter. And once you have re-opened an encounter, the “Unbilled” must have the checkmark (the default) to display that encounter for billing again.

Note that because our service date precedes the effective date for Medicare as Primary, only the Total Care is shown as the default, along with its default X12 Partner in the box to its right. In all cases you will see “Unassigned” as one of the drop-down choices, and if you selected it, any data shown in Demographics under the “Unassigned” would print, but it is meaningless.



If, however, we have an encounter which falls after the effective date which changes who covers what, you can see in the screenshot below the impact that has, which will carry to the bills. When you bill this, the info for both the Primary and Secondary will be shown in the CMS 1500 and X12 outputs. The Secondary bill will also only print once the Primary has been accounted for within the “EOB” section as accessed at the [EOBs] link, or from the “Invoice” section of the Collections Report links column, which you can access from the main left frame “Reports” radio button. The [Reports] link in the Billing module only displays the “Cash Receipts by Provider report. A bunch of changes to the Billing module are anticipated in the next (3.2) release, and this document will be updated then.

OpenEMR - Mozilla Firefox

File Edit View History Bookmarks Tools Help

http://localhost/openemr/interface/main/main_screen.php?auth=login

Most Visited Getting Started Latest Headlines WPE Job Hol Pay Trav Look Up Misc OEMR

OpenEMR

v3.1.0 on Joe X61-T3 : Logged in : Joseph Holzer (CHHHC) Active Patient: Sy'stem Test (1) DOB: 2000-01-01 Age: 9 December 17, 2009

Billing Report

From: 2009-09-13 To: 2009-09-13 Show Unbilled Only Show Authorized Only [Update List] or [Export OFX]

[View Printable Report] [Reports] [EOBs] [View Log] [Select All]

Generate X12 Generate CMS 1500 Mark as Cleared Re-Open CMS 1500 Margins: Left: 24 Top: 20

Bill	Description	CPT4	Amount	Physician	Date	Status
2009-12-17	primary: Medicare Part B	90807 (296.26)	\$205.00	Joseph Holzer	2009-12-17	<input checked="" type="checkbox"/>
2009-12-17	secondary: Total Care	G8445 (296.26)	\$0.01	Joseph Holzer	2009-12-17	
2009-12-17	secondary: Total Care	ICD9: 296.26		Joseph Holzer	2009-12-17	

Active Patient: Sy'stem Test (1)
Active Encounter: 2009-12-17
Popups

Find: test
by: Name ID SSI DOB Any Filter

Logout Help

Medical Problems (More) HTN

Notes (More) Release Due \$820.02

Done

start OpenEMR... Redline-N... HTML-Git Palm Desk... Pegasus Mail billing Document... 3:34 PM

Good Luck. I hope that helps. And thanks for understanding. Joe Holzer