

Correcting Rev/HCP/PCS

FAQ

Prepared for

myUnity Essentials Financial



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Overview

This FAQ provides instructions on how to setup revenue and HCPCS codes for claim output. It is not necessary to un-bill the claim in this instance. After making corrections, you can recreate the claim using the original selection criteria. You'll need to set the Submitted Type to All Bills instead of Un-Submitted Only if the claim was rejected or denied due to invalid codes.

Insurance Type

Go to **File > File Maintenance > Entity**, press **Change Type** and set the radio button to **Insurance**.

Press **Find** to search for and select the insurance that has the incorrect revenue/HCPCS code(s).

Click on the **Insurance** tab and note the **Insurance Type** selected. Insurances that share the same Revenue & HCPCS for billing will share the same Insurance Type. It's a way of grouping together payers that use the same codes on claim output.

Entity Maintenance: Insurance 060 - Aetna (Auth Req): Browse

Name/Address | Insurance | Ins-Rate | Contact | Notes

Insurance Type: **Commercial Rev Type**

Financial Class: Commercial Class

Bill Type: UB04

Provider #:

Payor/Submitter #: 12345

GL A/R Account #: 001-900

GL Revenue Account #: 002-900

GL Discount Account #: 002-800

PPS Billing: Bill Method: Normal

Payor Type: 8-Private Insurance

Requires EVW: Timely Filing: 120

Billing Unit Overrides:

#	Modality	Units
1	Skilled Nursing	N/A
2	Physical Therapy	N/A
3	Speech Therapy	N/A

* Revenue Based on Calculated Time/Units

Billing Requirements:

Plan of Care HIPPS Code

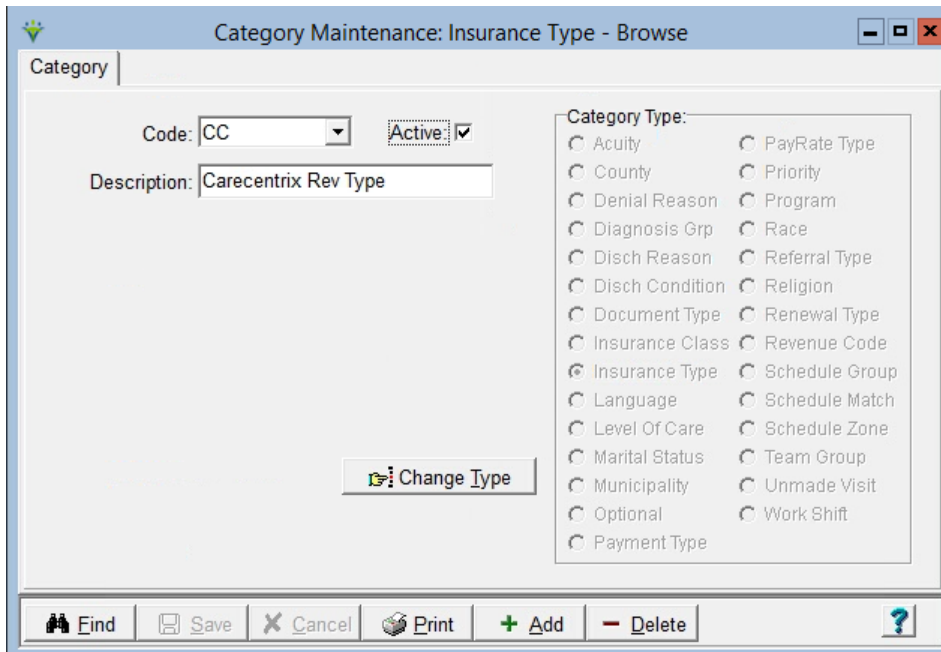
Authorization

Find Save Cancel Print

If you have an insurance that does not use the same Revenue/HCPCS/Modifiers on claims, it will need to belong to its own Insurance Type.

To create a new type, go to **File > File Maintenance > Category**, press **Change Type** and set the radio button to **Insurance Type**. Press **Add** to create a new type. Enter a unique **Code** (up to 12 alphanumeric characters) and **Description**.

Once the new Insurance Type has been created, attach it to the Insurance using previous steps in this section.



Charge Code

Once you've taken note of or created a new Insurance Type, navigate to **File > File Maintenance > Charge Code** and select the charge code that was missing or incorrect on the claim output.

Click on the **Revenue-Codes** tab and press **+Add** to add a new row.

Type: select the **Insurance Type** for the payer in question

Code: enter the 4-digit revenue code, followed by the HCPCS and modifiers need for the payer.

If the code combination isn't present, follow the instructions in the [Revenue Codes](#) section to add them.

Type	Code	Description	Start-Date	End-Date	GL Account
Medicare Rev Type	0551G0154	SN Visit	1/1/2000	12/31/2015	
Medicare Rev Type	0551G0299	RN Visit	1/1/2016	12/31/2099	
Medicaid Rev Type	0551T1003	SN visit	1/1/2000	12/31/2099	
Commercial Rev Type	0551G0299	RN Visit	1/1/2000	12/31/2099	
Self Pay Rev Type	0551G0154	SN Visit	1/1/2015	12/31/2099	
S Code Rev Type	0551T1030TD	Nursing Visit	1/1/2000	12/31/2099	
Carecentrix Rev Type	T1030TD	RN Vst Ccentrix	1/1/2000	12/31/2099	
Medicare Hospice Rev	0551G0154	SN Visit	1/1/2000	12/31/2015	
Medicare Hospice Rev	0551G0299	RN Visit	1/1/2016	12/31/2099	
Medicaid Hospice Rev	0551G0299	RN Visit	1/1/2016	12/31/2099	
Z Code Rev Type	0551Z6900	SN Visit Z	1/1/2000	12/31/2099	
Medicaid Rev Type(IN)	0551G0154	SN Visit	1/1/2000	12/31/2099	
Hospice T-Codes	0551T1003	SN visit	1/1/2016	12/31/2099	

If the payer being billed has changed their coding requirements (ex: G0154 replaced with G0299 or G0300) both the new and old codes for that Insurance Type should be entered with the appropriate Start and End Dates for each.

Revenue Codes

If the Revenue/HCPCS/Modifier you need isn't present, the combination will need to be added.

Go to **File > File Maintenance > Category**, press **Change Type** and set the radio button to **Revenue Code**.

Code: enter the 4-digit revenue code followed by the HCPCS and modifier (if modifier is needed).

Description: Enter a description

CPT/HCPCS Code: Enter the HCPCS followed by any modifiers. Use a colon to separate each value (see example screenshot below).

Other Code: enter the modifier(s) only. Leave spaces between each modifier if multiple are needed (this field is used for paper claims only and for special billing for Wisconsin Medicaid electronic).

The screenshot shows a software window titled "Category Maintenance: Revenue Code - Browse". The window contains the following elements:

- Code:** A dropdown menu showing "0571G0156U2".
- Active:** A checked checkbox.
- Description:** A text box containing "HHA 2nd Visit".
- CPT/HCPCS:** A text box containing "G0156:U2".
- Other Code:** A text box containing "U2".
- Change Type:** A button with a small icon and the text "Change Type".
- Category Type:** A list of radio buttons with "Revenue Code" selected. Other options include Acuity, County, Denial Reason, Diagnosis Grp, Disch Reason, Disch Condition, Document Type, Insurance Class, Insurance Type, Language, Level Of Care, Marital Status, Municipality, Optional, Payment Type, PayRate Type, Priority, Program, Race, Referral Type, Religion, Renewal Type, Schedule Group, Schedule Match, Schedule Zone, Team Group, Unmade Visit, and Work Shift.
- Toolbar:** Buttons for Find, Save, Cancel, Print, Add, Delete, and Help.