

“Partnership in Vision and Decision”

12th ANNUAL Business Office and Health Information
Management I/T/U Partnership Conference

Point of Sale Working Rejections

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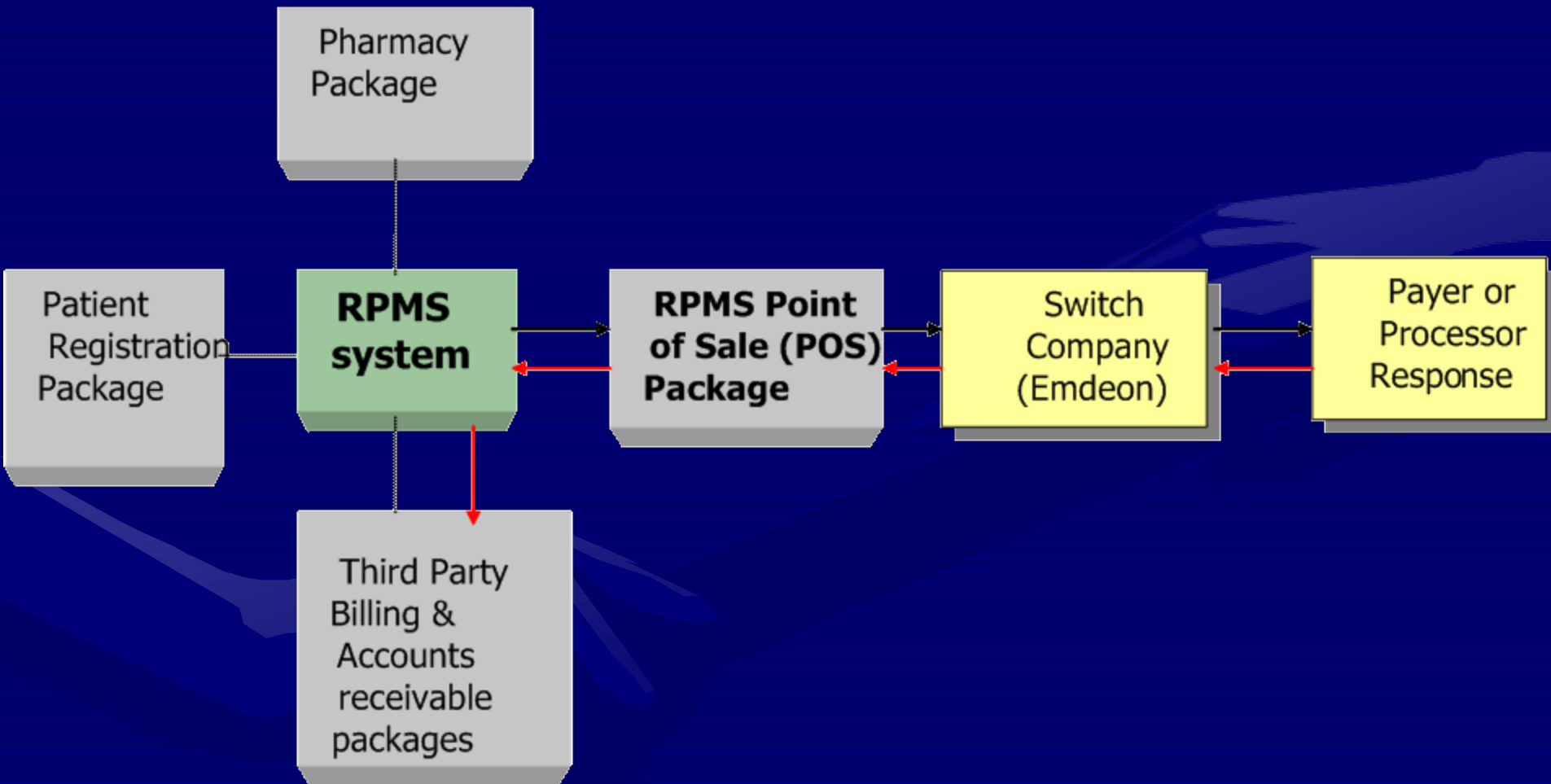
Office of Information Technology

CNI Technology - Contractor

Agenda

- Point of Sale Overview
- Manual submission of Point of Sale Claims
- Recovering rejected Point of Sale Claims
- Keys to Point of Sale Success
- Question & Answer Session

Point of Sale Overview



Manual submission of Point of Sale Claims

- Manual claims are sent through the POS claims data entry screen POS/U/U/NEW – Send new claims
- Enter internal rx # or F to select a patients name
- To process the claim you will press the 'F1' key and then the 'E' key or enter the next internal rx # or patient name
- If you need to exit the screen without processing the claim you will press the 'F1' key and then the 'Q' key

New claim screen

POS TEST 198.45.4.199 - TNVTPPlus

Session Edit View Commands Script Help

Ask Insurance? NO +-----+ <PF1> E when done, to file claims
Ask Preauth #? NO | PHARMACY | <PF1> Q to quit without filing claims
Ask Qty/Price? NO | POINT OF | <PF3> insert/overstrike modes
Ask Fill Date? NO | SALE | <PF4> to go back one field
Ask Overrides? NO | DATA ENTRY | Arrow keys may be used, too

Prescription NDC/CPT/HCPCS - Patient - - - - Drug - - - - - - - - - - Fill Date

1 `90017 11111-1111-11 CRAAD, MARY J ENALAPRIL 10MG TAB JAN 29

2
3
4
5
6
7
8
9

COMMAND: Press <PF1>H for help **Insert**

start Search Desktop 4:02 PM Monday 4/13/2009

Inbox - Micr... Making Ever... Partnership ... POS Plan of... POS Pharma... POS TEST 1... absp0100.2...

Recovering rejected Point of Sale Claims

- Run Update Report Master File report before and after working on rejections POS/RPT/MNT/URM
- Run Rejected claim report for time/date range desired POS/RPT/CLA/REJ
- Make permanent changes in the appropriate RPMS package (patient registration, outpatient pharmacy, etc.) or make one time changes through the POS override screen

Transaction Header Segment

- Ø1 M/I Bin
 - Ø2 M/I Version Number
 - Ø3 M/I Transaction Code
 - Ø4 M/I Processor Control Number
-
- **Problem:** the wrong NCPDP 5.1 format is being used
 - **To solve:** contact the insurer to determine the correct BIN/PCN. Use the POS Format Master List or the FMT report in POS to find the correct format and correct by linking the correct format to your insurer through the MGR menu in POS
 - **Note:** DO NOT OVERRIDE THESE FIELDS IN POS, if you cannot find the correct format notify the RPMS Help Desk for assistance

Patient Segment

- Ø8 M/I Person Code
 - Ø9 M/I Birth Date – **Do not change on pg 1**
 - 1Ø M/I Patient Gender Code
 - 11 M/I Patient Relationship Code
 - 53 Non-Matched Person Code
-
- **Problem:** information in insurer's system is different than what is on page 4 of Patient Registration
 - **To solve:** call processor pharmacy help desk to determine where discrepancy is or verify with the patient
 - **Note:** When overriding a date field in POS the format is YYYYMMDD (no – or / in between dates)

Insurance Segment

- Ø6 M/I Group Number
 - Ø7 M/I Cardholder ID Number
 - 51 Non-Matched Group ID
 - 52 Non-Matched Cardholder ID
-
- **Problem:** there is information missing or invalid in one of the fields on page 4 or there is an eligibility issue
 - **To solve:** check a current card or call the pharmacy help desk to verify cardholder information. The phone number is located at the top of the rejection report. Once correct in Patient Registration (page 4), the claim can be resubmitted in POS or you can override the claim through POS for a temporary fix

Claim Segment

- 21 M/I Product/Service ID
 - 22 M/I Dispense As Written (DAW)
 - 28 M/I Date Prescription Written
 - 54 Non-Matched Product/Service ID Number
 - 55 Non-Matched Product Package Size
 - 77 Discontinued Product/Service ID Number
 - 78 Cost Exceeds Maximum
-
- **Problem:** Pharmacy issue
 - **To solve:** have pharmacy verify the drug is entered correctly in drug file and make corrections as need or make you can override the claim through POS

Prescriber Segment

- 25 M/I Prescriber ID
 - 56 Non-Matched Prescriber ID
 - 71 Prescriber Is Not Covered
-
- **Problem:** Provider number needs to be verified, NPI flag needs verified, or provider is not contracted with insurer
 - **To solve:** View the claim receipt through POS and call processor to verify prescriber ID. Also make sure to verify bin/pcn/cardholder ID/group
 - **Note:** If provider number is correct; refer to RPMS Help Desk for assistance

Processing

- 85 Claim Not Processed
 - 87 Reversal Not Processed
 - 91 Host Response Error
-
- **Problem:** claims did not finish processing through POS
 - **To solve:** View the receipt of the claim in the message and rejected reason fields to verify the claim did not process. If the claim did not process and you are not able to resubmit the claim on your own, notify RPMS Help Desk for assistance
 - **Note:** When contacting the RPMS Help Desk make sure that you have notified your local IT department as well as your area office of the issues you are experiencing

Keys to Point of Sale Success

- Specify each departments responsibility
- Coordinated effort: Pharmacy, Patient Registration and Business Office
- To Have a successful claims management process, everyone in the POS billing process must perform their specific duties accurately, cooperatively and timely
- Provide more training where deemed necessary
- Each department must designate a point of contact
- Must be committed to the point of sale process
- Understand process for working with and contacting the RPMS Help Desk

Patient Registration Responsibilities

- The process of submitting claims electronically demands complete and accurate collection of information to insure timely and accurate billing
- Incomplete and/or inaccurate collection of information and disposition of the patient will adversely affect other departments by delaying various processes and creating more manual interventions (re-works)
- Point of contact in this department is responsible for reworking rejections this person will gather information needed to rework the claim and return email to the pharmacy or business office point of contact in a timely manner so the claim can be resubmitted
- Understanding the different coverages insurance companies offer

Business Office Responsibilities

- Identifying technical problems with the pos system and resolving those issues
- Get network participating agreements in place for point of sale
- Stay current with software patches from area and headquarters inform each department how the patch will affect them
- Stay updated on changes from insurance companies, and inform the appropriate department
- Build an insurance database that is identifiable for our facility
- Provide training to departments when needed

Pharmacy Responsibilities

- Must be adaptable to the pos process
- Use generic drugs
- Refill prescriptions at least 25 days from the last fill date
- Watch for NDC rejects and switch whenever possible especially on older drugs where generics have been around a long time
- Point of contact in pharmacy must work rejects on a daily basis, this person must identify each departments rejects and email those rejects to each departments point of contact, resubmit claims when the claims have been resolved

Continued

- Work on prior authorizations
- Look over current inventory for new ideas to improve point of sale revenue
- Always use 30 or 90 as days supply insurance companies only recognize these as days supply any other number will be rejected
- Update the drug file on regular basis also update awp on regular basis
- Stay updated on what changes insurance companies are making and inform each department

Question & Answer Session

