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POLICY

This policy applies to The Johns Hopkins Health System (JHHS) Patient Financial Services (PFS) Division for Johns Hopkins Bayview Medical Center (JHBMC), using Meditech Client Server.

PURPOSE

To describe the process for correcting or changing insurance information and re-submitting a claim (creating a “re-bill”): **Meditech Client Server**.

RESPONSIBILITY

Once a claim has been submitted—a UB04, ANSI 837, or CMS 1500—it may need to be re-submitted for a variety of reasons. Sometimes claims are not received or registered by the payer; sometimes the patient does not provide current insurance information, or the information may be entered incorrectly at the time of registration. (Refer to the guidelines for Registration Error Reporting.)

The following steps should be taken to correct the information in Meditech Client Server and properly re-bill the claim.

Note: For accounts in “bad-debt” status, refer to **Bad Debt procedures** (Policy FIN094 - Bad Debt Placement).

Summary of “Re-bill” Procedure:

- Add/Change insurance
- Reorder (if appropriate)
- Re-bill (as appropriate)
- For balances greater than \$10,000, send an e-mail to the appropriate person

PROCEDURE


To **add** a new insurance or **change** the insurance or **the sequence of insurance(s)** on an account, the PFS Representative will:

A. Account is Final Billed:

1. To **add** insurance to an account (for example, the account has Blue Cross of MD and the patient calls to correct to Carefirst BlueChoice):

From the claim’s “**Process an Account**” screen:

- >> Select “**B**” (“Process a Bill”) icon;
select and reverse all existing bills (the account will become UB)
- >> Select “**E**” (“Edit Patient Data”) icon

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- >> From the drop-down menu, select **“Insurance Data”**
Enter the new insurance code or spacebar/“F9” for a list of insurance codes
- >> **Yes** to “Not found for this account. New?”
- >> **Yes** to “Add to current insurance order?”
- >> Complete all required information on the **“General”** and **“Subscriber/Policy Information”** screens
- >> **File**
- >> **“Update Demo Recall”**:
If **Yes**, this insurance will pull forward the next time the patient is registered
If **No**, this insurance will **not** pull forward for the next registration (like workers’ comp)
- >> Complete all required information on the **“Insurance Queries”** screen.
- >> **File**
- >> Enter additional insurances, if necessary
- >> **File and Exit**

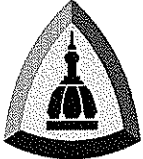
2. To re-order insurances:

From the claim’s **“Process an Account”** screen:

- >> Select **“B”** (“Process a Bill”) icon;
select and reverse all existing bills (the account will become UB)

Note: For all claims that have been previously billed, you **MUST** reverse the original bill in order to re-bill to new insurance (added or re-ordered) or bill to secondary (if secondary was not listed).

- >> Select **“E”** (“Edit Patient Data”) icon
- >> From the drop-down menu, select **“Insurance Reorder”**
- >> Enter the new order for the bill
- >> **Enter through** until **Financial Class** defaults
- >> **File**
- >> If the original primary insurance is now inactive, acknowledge:

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“Insurances(s) (BCBX35) will be inactive.” [OK]

Note: The system will auto-prorate at day-end, allowing the new insurance to go through proration and hit the necessary bill holds. If claim passes all holds, it will become FB and queued.

B. Account is Unbilled:

1. To add an insurance:


From the claim’s **“Process an Account”** screen:

- >> Select **“E”** (“Edit Patient Data”) icon
- >> From the drop-down menu, select **“Insurance Data”**
Enter the new insurance code or spacebar/“F9” for a list of insurance codes
- >> **Yes** to “Not found for this account. New?”
- >> **Yes** to “Add to current insurance order?”
- >> **“Update Demo Recall”:**
If **Yes**, this insurance will pull forward the next time the patient is registered
If **No**, this insurance will **not** pull forward for the next registration (like workers’ comp)
- >> Complete all required information on the **“General”** and **“Subscriber/Policy Information”** screens
- >> **File**
- >> Complete all required information on the **“Insurance Queries”** screen
- >> **File**
- >> Enter additional insurances, if necessary
- >> **File and Exit**

2. To change existing insurance order, or remove or activate insurance previously listed:

From the claim’s **“Process an Account”** screen:

- >> Select **“E”** (“Edit Patient Data”) icon
- >> From the drop-down menu, select **“Insurance Reorder”**
Enter or edit the new order for the bill

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>> **Enter through until Financial Class defaults**

>> **File**

>> **“Update Demo Recall”:**

If **Yes**, this insurance will pull forward the next time the patient is registered

If **No**, this insurance will **not** pull forward for the next registration (like workers’ comp)

Note: Insurance removed from the billing order is still on the account but appears as **NC** (Not Current). Forward the bill to insurance in accordance with new COB order.

The system will auto-prorate at day-end, allowing the new insurance to go through proration and hit the necessary bill holds. If claim passes all holds, it will become FB and queued.

If the insurance order has been correctly updated, the bill will prorate and drop that evening.

Updating Insurance Coverage (*unbilled accounts*)


Add a secondary or tertiary insurance

Current Order	New Order
BC	BC
SP	AETNA
	SP

>> From the **“Process an Account”** screen, select **“E”** (“Edit Patient Data”) icon

>> From the drop-down menu, select **“Insurance Data”**

>> **Add AETNA**, answering **Yes** to “Add to current insurance order?”
 (Added insurance(s) will go to the bottom of the order)

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Add a new insurance as primary

Current Order	New Order
BC	AETNA
SP	BC
	SP

- >> Select “E” (“Edit Patient Data”) icon
- >> From the drop-down menu, select “**Insurance Reorder**”
- >> **Add AETNA**, answering **Yes** to “Add to current insurance order?”
- >> **Change new order** to have AETNA primary, BC secondary

Add a new insurance/remove an existing insurance


Current Order	New Order
BC	AETNA
SP	SP

- >> Select “E” (“Edit Patient Data”) icon
- >> From the drop-down menu, select “**Insurance Reorder**”
- >> **Add AETNA**, answering **Yes** to “Add to current insurance order?”
- >> **Change new order** to have AETNA primary, and leave BC off

Updating Insurance Coverage (*final-billed accounts*)

Add a new primary insurance retroactively


Current Order	New Order
MCR	MCD
SP	MCR
	SP

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Reverse Existing Bill(s)	<p>From the “Process an Account” screen, select “B” (“Process a Bill”) icon. Select bill. Select “R” (“Reverse a Posted Bill”) icon.</p> <p>If more than one bill, repeat process until all are reversed.</p>
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Add New Insurance	<p>From the “Process an Account” screen, select “E” (“Edit Patient Data”) icon From the drop-down menu, select “Insurance Data” Enter the new insurance code or spacebar/“F9” for a list of insurance codes Yes to “Not found for this account. New?” Yes to “Add to current insurance order?” Update Demo Recall: If Yes, this insurance will pull forward the next time the patient is registered If No, this insurance will not pull forward for the next registration (like workers’ comp) Enter thru so Biller/Collector assigned Complete all required information on the “General” and “Subscriber/Policy Information” screens File</p>
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Change Insurance Order	<p>Select “E” (“Edit Patient Data”) icon From the drop-down menu, select “Insurance Reorder” Enter new bill order Update Demo Recall (answering Yes or No, as appropriate) File</p> <p>The system will auto-prorate at day-end, allowing the new insurance to go through proration and hit the necessary bill holds. If claim passes all holds, it will become FB and queued.</p>
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Completely change insurances retroactively

Current Order	New Order
BC	MCR
SP	SP

Reverse Existing Bill(s)	<p>From the “Process an Account” screen, select “B” (“Process a Bill”) icon. Select bill. Select “R” (“Reverse a Posted Bill”) icon</p> <p>If more than one bill, repeat process until all are reversed</p>
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Add New Insurance	<p>From the “Process an Account” screen, select “E” (“Edit Patient Data”) icon</p> <p>From the drop-down menu, select “Insurance Data”</p> <p>Enter the new insurance code or spacebar/“F9” for a list of insurance codes</p> <p>Yes to “Not found for this account. New?”</p> <p>Yes to “Add to current insurance order?”</p> <p>Update Demo Recall:</p> <p style="padding-left: 20px;">If Yes, this insurance will pull forward the next time the patient is registered</p> <p style="padding-left: 20px;">If No, this insurance will not pull forward for the next registration (like workers’ comp)</p> <p>Enter thru so Biller/Collector assigned</p> <p>Complete all required information on the “General” and “Subscriber/Policy Information” screens</p> <p>File</p>
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Change Insurance Order	<p>Select “E” (“Edit Patient Data”) icon</p> <p>From the drop-down menu, select “Insurance Reorder”</p> <p>Enter new bill order by leaving old insurance off listing</p> <p>Update Demo Recall (answering Yes or No, as appropriate)</p> <p>File</p> <p>The system will auto-prorate at day-end, allowing the new insurance to go through proration and hit the necessary bill holds. If claim passes all holds, it will become FB and queued.</p>
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Interim Billed Accounts

Several Bill Orders and Current Order

Bill #1	Bill #2	Bill #3	Bill #4	Current Order
Interim	Interim	Interim	Interim	Final
BC	BC	BC	AETNA	AETNA
AETNA	AETNA	AETNA	SP	SP
SP	SP	SP		

Over the life of a patient's account, insurance eligibility and effective dates may change for a variety of reasons (for example, because of expiration of benefits, marriage or divorce, or a job change). It is important to understand that each bill's insurance order is separate and independent of other bills and the current order. Therefore, bills must be evaluated one-by-one to determine whether or not they need to be reordered.

SPONSOR

Senior Director, Patient Financial Services, JHHS

REVIEW CYCLE

Three (3) years

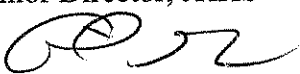
APPROVAL



 Senior Director, JHHS

11/16/09

 Date



 Director, PFS Financial Support, JHHS

11/16/09

 Date