Medical Affirmative Claims Process
DECEMBER 2023 WEBINAR

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OVERVIEW ~ MAC TOPIC

• Topic Sections
  ▪ MAC Report (#1)
  ▪ MAC MCRU Request (#2)
  ▪ MAC Profile & Health Plan (#3)
  ▪ MAC Generate Claims (#4)
  ▪ MAC Work Items / Clean-Up (#5)
  ▪ MAC Posting (#6)
OVERVIEW ~ MAC STAGES

1. MAC REPORT
   - Discern Reporting
   - Forward Report Legal
   - Review/Format Report
   - Run Injury Report

2. MAC REQUEST
   - Coding Completed
   - MCRU Sends Request
   - Forward Coding
   - Add to Tracker
   - Gather Data

3. MAC Profile & Health Plan
   - Verify Eligibility
   - Update Tab Data
   - Add Encounter Perspective
   - Add Registration Perspective

4. MAC Generate Claims
   - Update Tracker
   - Encounters Coded
   - Forward Legal
   - Generate Claims
   - patient Account Perspective

5. MAC Work Items Clean-Up
   - Monitor MAC Encounters
   - Patient Account Perspective
   - Resolve Errors
   - Review Tabs

6. MAC Posting
   - Post Adjustments
   - Post Payments
   - patient Account Perspective
   - Monitor MAC Encounters
   - MAC Posting
OVERVIEW ~ MAC REPORT (#1)

- **MAC Report**
  - Discern Reporting Portal - Run
    - Discern Reporting Portal Daily Log of Patients Treated for Injuries
  - Format and Review Report
  - Forward Report to Designated Legal
    - Follow local/service process
MAC REPORT ~ Discern Reporting – Launch #1

- Launch Discern Reporting Portal Application, the application is on the Cerner Citrix Workspace.
Consult with MTF/Service MCRU-Legal first for guidance on running report and formatting data.

Search for report, type “injur” to display report to run.
• Track Dates to ensure all dates are captured, run at least one day prior to avoid duplicates.
• On 11 December
  ▪ Begin Discharge 12/3/2023
  ▪ End Discharge 12/10/2023
• On 18 December
  ▪ Begin Discharge 12/11/2023
  ▪ End Discharge 12/17/2023
MAC REPORT ~ Discern Reporting – Export Report #1

- Export Data icon will create a CSV (Excel’ish) file.
- Select all columns for report, (save), then select Open File to create an Excel/CSV File.
Review the data, and format per MRCU request.

Sample report and PivotTable are located on the DHA UBO SharePoint.

UBO Helpful HandOut
- V2-a UBO Helpful HandOut – EXCEL 3d MAC Injury Report

Forward to MCRU as instructed. Follow Service or MTF guidance to process.
OVERVIEW ~ MAC REQUEST (#2)

• MAC Request
  ▪ Receive request from Legal
  ▪ Add to Internal MAC Tracker
  ▪ Gather Encounter Data
  ▪ Forward to Coding
  ▪ Coding Completed
  ▪ Update Tracker
MCRU LEGAL

BILLING SYSTEM

ENCOUNTERS

CODING

MAC REQUEST

Revenue Cycle

ABACUS

Clinical

RAD/LAB

Pharmacy

Forward Codes

Improving Health and Building Readiness. Anytime, Anywhere — Always
MAC REQUEST ~ Notification Received MCRU #2

- Notification received from MCRU-Legal to create claims. Do not create MAC claims prior, this process changes the financial class.
- Identify billable MAC Encounter, then forward clinical encounter information to coding
- Do not add P&HP to encounter until coding is completed.

- Dates of Service
  - ABACUS
    - DOS prior to Revenue Cycle Implementation
    - All take-home Pharmacy
  - Revenue Cycle
    - DOS as of Revenue Cycle Implementation
    - No take-home pharmacy
MAC REQUEST ~ MAC Tracker Required #2

- **REQUIREMENT**
- All MTF UBO are required to create a MAC Coding Tracker. Columns may be added or rearranged as needed
- Example in HelpFul HandOut
  - V2-a UBO HelpFul HandOut ~ EXCEL 3d MAC Coding Tracker
OVERVIEW ~ MAC PROFILE & HEALTH PLAN (#3)

• MAC Profile & Health Plan
  ▪ Registration Perspective, verify Tricare Eligibility, only Tricare Beneficiaries are eligible for MAC claims. Add the MAC P&HP before or after coding.
  ▪ Patient Account Perspective, review various tabs and update for each encounter.
  ▪ Coding has been completed, update the tracker.
  ▪ Encounter Perspective, add MAC P&HP to coded clinical encounter, RAD/LAB.
MAC P&HP ~ Review Balances Tab #3

- Patient Account Perspective ~ Balances Tab
  - Review line items, are the Health Plans Tricare, are there Adjustments applied that need to be reversed.
  - Example below has adjustments applied, proceed to the Insurance Transactions Tab to review.
MAC P&HP ~ Review Insurance Transactions Tab #3

- Patient Account Perspective ~ Insurance Transactions Tab
  - Reverse Adjustments, review line items, if Adjustments applied is 5100 Tricare, select all line items and Reverse Transactions.
  - Example below has 5100 Tricare adjustment.
MAC P&HP ~ Review Claims Tab #3

- Patient Account Perspective ~ Claims Tab
  - Review claim line items, cancel Tricare claims, now the benefit order status updates to Ready to Bill in Balances Tab.
MAC P&HP ~ Review Balances Tab Again #3

- Patient Account Perspective ~ Balances Tab
  - Review line items, status should be Ready to Bill, and no adjustments. There may be possible insurance payments.
  - Example below is what the data should look like.
• Registration Perspective add Profile and Health Plan
  ▪ Health Plan Selection select MAC CMAC Health Plan. Pending addresses to be added to bedrock.
- Registration Perspective ~ Profile and Health Plan
  - Enter Name and Address of where claims will be sent, pending addition of MCRU addresses in Bedrock, complete plan details.
• Registration Perspective ~ Profile and Health Plan
  ▪ Insurance Tab, add MAC Profile and link MAC Health Plan.
• Encounters Perspective ~ Profile and Health Plan
  - Perform this step after coding is completed, then the MAC claims will have the updated codes if applicable. Proceed to Insurance Tab to change Profile for MAC related encounters.
OVERVIEW ~ MAC GENERATE CLAIMS (#4)

- MAC GENERATE CLAIMS
  - Encounters are Coded
  - Patient Account Perspective Review
  - Generate Claims
  - Generating Claims (#4) and Resolving Errors (#5) may overlap in sequence
  - Forward all Document to MCRU Legal
  - Update Internal MAC Tracker
• Encounter Perspective ~ Encounter Details Tab
  ▪ Add Accident-Related Visit information to encounter, the information will print on claims forms.
- **Patient Account Perspective ~ Review Encounter**
  - Balances Tab at the Encounter Level may display a Status of Voided for a Tricare Health Plan. All columns should be “0.00”. MAC Health Plan should be in Ready to Bill Status with a balance in the Balance column.
GENERATE CLAIMS ~ Review Claims Tab #4

- Review Encounter ~ Patient Account Perspective
  - Tricare Health Plans should be in Voided Status – No Payments and No Adjustments. Resolve if there are any transactions.
  - Example below has an adjustment that needs to be reversed.
• Patient Account Perspective ~ Review Encounter
  - If there is a Voided Benefit Order ‘WI’, Apply Action Code D170 to resolve ‘WI’ if zero balance. ‘WI’ should not occur if balance is already zero.
Patient Account Perspective ~ Timeline Apply Comment

- Apply a comment at the Patient Account Level (Navi-Bar) for MAC, start comment with “MAC…” this will allow a search option for the Comment filter. Remember all comments subject to be disclosed.
GENERATE CLAIMS ~ Generate Claim #4

• Patient Account Perspective ~ Balances Tab
  ▪ Claim status should be **Ready to Bill**, if yes select Generate Claim from list. Repeat this process for every claim within an encounter with the MAC Health Plan, then for all encounters with a MAC P&HP.
On-Demand Claim Preview/Submission will be displayed.

- Claim Type – Select Paper for UB04/CMS1450
- Claim Type – Select CMS 1500 0805 or CMS 1500 0212

✓ Review CMS1500, bottom of form will have the version
• Bill Record Browser
  - Review claim for errors by selecting Validate, resolve any critical errors; claims are printed on paper and not sent electronically.
The Bill Record Browser is displayed after printer icon is selected. Select the print to local printer, still pending a PDF option.
OVERVIEW ~ MAC CLEAN-UP (#5)

- MAC WORK ITEMS / CLEAN-UP
  - Patient Account Perspective
  - Review All Tabs
  - Resolve Work Items
  - Resolve Errors and Encounter Clean-up
  - Generating Claims (#4) and Resolving Errors (#5) may overlap in sequence
  - Monitor and Review all MAC Encounters
CLEAN-UP ~ Encounters Tab (Patient Account) #5

- At the Person > Patient Account level in the Navi-bar, Encounters Tab displays MAC Health Plan encounters to review.
- Example below displays multiple MAC health plans with Pending and Active Status, plus several adjustments applied. Selected 3/1/2023 encounter.
CLEAN-UP ~ Balances Tab #5

• Review Encounter Perspective P&HP to verify correct set-up.
• Review line items:
  ▪ Tricare Plus- two lines Primary with Adjustments applied in Voided status – review Insurance Transaction Tab; two lines Secondary no Transactions.
  ▪ 602 Direct Pharmacy- two lines Secondary with no Transactions applied in Voided status; two lines Tertiary waiting for prior BO... with no Transactions; all 602 health plans have zero balance.
  ▪ MAC- two lines Primary MAC with Balances in Ready to Bill Status and Generated Status.
CLEAN-UP ~ Registration/Encounter Perspective #5

- Registration Perspective ~ Insurance Tab displays correct set-up of MAC P&HP.

- Encounters Perspective ~ Insurance Tab displays incorrect set-up of Tricare and MAC. This is why there are several extra health plans in the Balances tab.
CLEAN-UP ~ Resolving Errors P&HP #5

• Correct P&HP in Encounter Perspective, allowing transactions to update and correct if applicable. Removed all except MAC.

• Reverse Adjustments in Insurance Transaction Tab, verified all were 5100.
CLEAN-UP ~ Resolving Errors P&HP #5

- Review Claims Tab, Tricare have been Canceled already; only 1 MAC claim in Ready to Submit status and missing one claim.

- Review Workflow Tab, there are no Work Items to resolve.
CLEAN-UP ~ Resolving Errors P&HP #5

• Review Balances Tab again, MAC Health Plans need to be billed and printed; old Tricare health plans are now voided with no transactions.

• Repeat for every encounter for the patient to resolve the errors. Goal is to resolve the issues once claims are generated and printed in the future.
OVERVIEW ~ MAC POSTING (#6)

- MAC POSTING
  - Patient Account Perspective
  - Post All Payments
  - Post All Adjustments
    - To include Closed Cases
  - Monitor and Review all MAC Encounters
POSTING – Manual Remittance #6

• Patient Account Perspective ~ Create Manual Remittance Icon
  ▪ Create a Manual Remittance to post payments and adjustments.
  ▪ Payment Alias Revenue Cycle
    ✓ 4600 Insurance Payment for claims
    ✓ 4706 Law Firm Payment for claims
    ✓ PLB TL for Non-Revenue Cycle (Tricare, AirEvac…)
  ▪ Adjustment Alias
    ✓ W50 DOD MAC WO
  ▪ ABACUS claims are posted in ABACUS.
POSTING ~ Create MTF Deposit #6

- Create New Remittance
  - MTF received check in mail
  - Payer is MAC, payors are not set-up
  - Attorney Check 4706 Payment Alias
  - MAC Adjustment is W50
  - Payment Breakdown, Claims $1500 and Non-AR GL for Tricare portion $500
  - Adjustment $1000 W50
POSTING ~ Create MCRU Deposit #6

• Create New Remittance
  - MCRU deposited and created DD1131
    ✓ Payment Method
      – External Collection
    ✓ Payment Description
      – DD1131 Payment MCRU...
Create New Remittance

Remittance Name: "Data Displayed Ins/SP Trend Details Batch Description"
Currency Type: United States Dollar
Payment Control: Total

Deposit Date: 08/01/2023
Payer: MAC
Payment Method: Check
Payment Description: "W50"
Apply Comment: "Does not print anywhere"
Payer ID: MAC
Adjustment Alias: Always W50 MAC

Payment Alias Revenue Cycle:
- 4800 Insurance Payment for claims
- 4706 Law Firm Payment for claims
- PLB TL for Non-Revenue Cycle (Tricare, AirEvac...)

Enter entire deposit amount. Blank if no payment.

Payment Method:
Select External Collection for MCRU DD1131.
Payment Description - (External) Displayed Ins/SP Transaction details.

Payment Alias - See below.
Adjustment Alias - Always W50 MAC.
Apply Comment - Add comments, do not see where this is printed anywhere.
RESOURCES ~ HELPFUL HANDOUT MAC

• Reference DHA UBO SharePoint for current information
• DHA UBO Revenue Cycle Helpful HandOuts:
  • Available on the "MHS GENESIS – UBO Revenue Cycle" page on Launchpad
Discern Reporting will have a MAC Combined Cover Sheet, the form is still in validation phase, use a manual form until then.

If someone has their prior service version in a PDF format, please forward to me; it will be added to UBO SharePoint.
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