NSCC Custom Billing Version 2.0.16

Released November 4, 2022   **Minimum Required EchoVantage version 3.42+**

Document History

Date	Description	Author	Version
06/08/2021	Initial Release	Heather Sherwood	1.0.9.RELEASE
04/20/2022	Changes to pull the Carrier Code from a new Client form	Heather Sherwood	2.0.12.RELEASE
10/27/2022	Addressed the issues reported in EV-4949 below. The changes were in oak only, no functional changes to the Acorn.	Heather Sherwood	2.0.12.RELEASE (Updated)
11/04/2022	There are no funcitonal change to the Acorn. Added Echo text to the source code and addressed an issue where the install script was not updating the Acorn version.	Heather Sherwood	2.0.16.RELEASE

Overview

The NSCC custom billing acorn addresses the MassHealth payer requirement of entering carrier codes on all claim submissions when there is other insurance for a MassHealth member, including Medicare.

Installing the Acorn

The installation inserts one Acorn Registration record: *NSCC Custom Billing*. After installation is complete, the Acorn version displays on the Help > About page under the ACORNs section.

- The Acorn installs a new Client form for viewing and maintaining MassHealth Carrier Codes.
- The Acorn also moves any existing values in ClientPayers.PolicyName to the new Carrier Code field on the Client form.
- A custom population script is run to insert the NsccMedicarePayerCategory and adds the default NsccMedicareCarrierCode of 0085000 into the StaticValues table.

Configuring the Application

Assumptions

The Acorn assumes MassHealth is the last commercial Payer in the waterfall. Updates to the Acorn are required to report a subsequent Payer's carrier code.

Select the Acorn for the Applicable Payer

Navigate to *Configuration > Services/Payers > Payers > Billing Methods* for MassHealth*,* select the 837P. Select *NSCC Custom Billing* in the Acorns drop-down listing, and remember to select *SAVE* to record the changes. The Acorn must be defined on the Payer's 837 Professional Billing Method to report the carrier codes for the other Payers correctly.
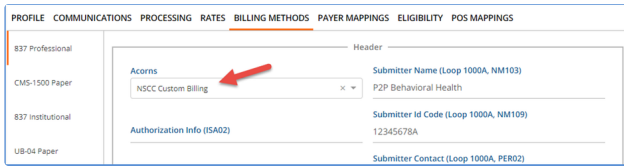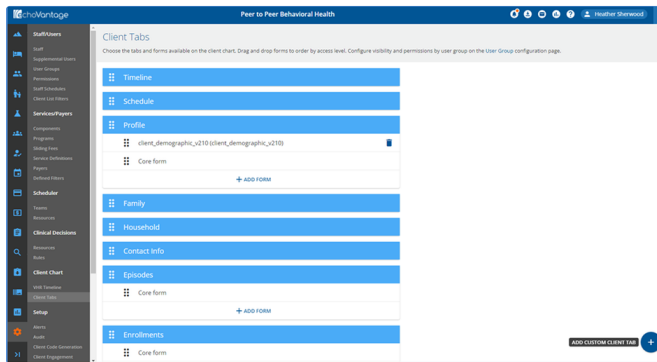
Configure the New Client Tab and Grant Access

The Acorn installs the form used to capture and maintain the MassHealth Carrier Code for the Client's Payer. The following steps outline the process for configuring the form and granting access.
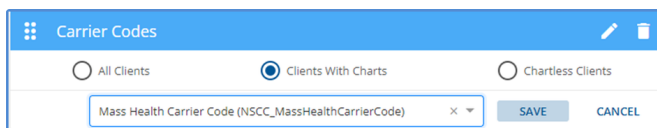
1. Add a new Client tab.
   - Navigate to *Configuration > Client Chart > Client Tabs.*
   - Click on the blue plus "+" to *ADD CUSTOM CLIENT TAB.*

   - Enter a name for the new tab and select *SAVE.*
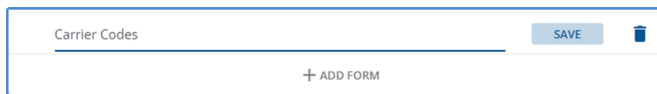
   - Click on the blue *"+" ADD FORM* and select the *Mass Health Carrier Code (NSCC_MassHealthCarrierCode)* option.
   - Click *SAVE* to save the form to the tab.

   - By default, Clients With Charts is selected. Review and update if necessary.

2. Grant User Group Access to the new tab.
   - Navigate to *Configuration > Staff/Users > User Groups.*
   - Select the User Group that requires access to the form.
   - Select Menu Options.
   - Scroll to the Clients section.
   - Locate the new Client Tab and select *Mass health Carrier Code* in the form drop-down.
   - The Edit button is automatically selected after the form drop-down Is populated; update the selection if necessary.

- Remember to scroll to the bottom and select *SAVE* to record your changes.
- Repeat for any other User Groups that require either Read Only or Edit access to the tab.

Configure the Unique Carrier Codes

The Acorn adds a new column to the ClientPayers table called *MassHealthCarrierCode.* When the Acorn is installed, any existing value in a Client Payer's Policy name field is copied to the new *MassHealthCarrierCode* column in the database and displays on the new form.

- Use this form to manage the Mass Health Carrier Code for existing Payers moving forward.
- When a new Payer is added, the list is populated with the Payer Name - the Carrier Code can then be added.
- This form simply stores the carrier code for each Client Payer; Payer Priority and Start and End Dates are still managed on the *Clients > Payers* tab.
- *The green "+" add and red "x" delete buttons on the grid cannot be used; they simply error due to database constraints. The form is already configured to hide these buttons when EchoVantage v3.37 is released, which will prevent triggering these errors in the future.*

Medicare only has one carrier code; it is always 0085000. The Acorn automatically reports 0085000 for Payers with the *Medicare* Payer Category, regardless of what is entered in the MassHealthCarrierCode field for that Client Payer. A Payer's Category is defined in *Configuration > Services/Payers > Payers > Profile* in the Category field.

> ⚠ The Acorn depends on the core Medicare Category and ID (20200514123600157482CCACA2AD149F29A5). While other Payer Categories may be defined in *Configuration > Setup > Defined Lists,* the Medicare category should not be changed or repurposed.

The NSCC Custom Billing Acorn configuration steps are now complete.

Creating Bills Using the Acorn

The Acorn follows the typical billing process in Fiscal Overview of Creating Charges and then Creating Bills. When this Acorn is assigned in the 837P Billing Method configuration, and 837P is selected as the Billing Method in *Unbilled Charges > Create Bills.* This v

- The value reported in Loop 2330B, NM109 is the carrier code assigned to the Client's Payer record on the Mass Health Carrier Code form for the other Non-Medicare Payer begin reported.
- If the other Payer is Medicare, 0085000 is always reported, regardless of the value assigned to the Client Payer on the form.
- If the other Payer is NOT Medicare and the value for the unique carrier code on the Client tab/form is missing, the Charge is put on HOLD with the core error message *Missing 837 Payer ID for an Other Payer*. When billing MassHealth, this indicates that a value **for the** MassHealthCarrierCode is needed for the Payer on the Client tab/form.
- If a multi-payer 837P job is run, the MA Carrier Code check is only performed on the claims associated with the Acorn payer. Claims for the other payers in the job are processed normally and will not trigger the *Missing 837 Payer ID for an Other Payer* error when a MA Carrier Code is not found.

Example 1

The Client has a Commercial Payer 1 and MassHealth for Payer 2 with the MassHealth Carrier Code form populated, shown below.

When the 837P is created, it has the unique carrier code for Anthem in Loop 2330B, NM 109.

```
[L.2000B!L.2010BB]NM1*PR*2*MASSHEALTH*****PI*4077

[L.2000C!L.2300]CLM*000104-6503*220***99:B:1*Y*C*N*I*P

[L.2000C!L.2300]HI*ABK:F0631

[L.2000C!L.2300!L.2310B]NM1*82*1*SHERWOOD*HEATHER****XX*0004191971

[L.2000C!L.2300!L.2310B]PRV*PE*PXC*78789999

[L.2000C!L.2300!L.2320]SBR*P*18*GN******BL

[L.2000C!L.2300!L.2320]CAS*OA*96*145

[L.2000C!L.2300!L.2320]AMT*D*75

[L.2000C!L.2300!L.2320]AMT*EAF*0

[L.2000C!L.2300!L.2320]OI***Y*P**I

[L.2000C!L.2300!L.2320!L.2330A]NM1*IL*1*CLIFF*ROCKY****MI*PN

[L.2000C!L.2300!L.2320!L.2330A]N3*1600 WASHINGTON ST

[L.2000C!L.2300!L.2320!L.2330A]N4*CONWAY*NH*03818

[L.2000C!L.2300!L.2320!L.2330B]NM1*PR*2*ANTHEM BCBS OF NH*****PI*0292003

[L.2000C!L.2300!L.2320!L.2330B]DTP*573*D8*20220320

[L.2000C!L.2300!L.2400]LX*1

[L.2000C!L.2300!L.2400]SV1*HC:90837:J3*220*UN*4***1

[L.2000C!L.2300!L.2400]DTP*472*D8*20220315

[L.2000C!L.2300!L.2400]REF*6R*000104-6503
```

Example 2

Using the same Client and Payers as the example above, the value is removed from the MassHealthCarrierCode field.

When the Create Bills process is run, the Charge is placed on Hold, and the following error is triggered. This error message is a core Error but when processing for MassHealth, adding the unique carrier code to the MassHealthCarrierCode field for the Client and Payer resolves the error. Once corrected, Retry the job from the *History* tab.

Example 3

This Client has Medicare Part B for Payer 1 and MassHealth for Payer 2. The value for the MassHealthCarrierCode is shown below.

When the 837P is created, it has the unique carrier code for Medicare Part B in Loop 2330B, NM 109. The code reported in the 837P is the single Medicare carrier code of 0085000, not the value entered for the MassHealthCarrierCode.

```
[L.2000B!L.2010BB]NM1*PR*2*MASSHEALTH*****PI*4077

[L.2000C!L.2300]CLM*000063-6505*220***99:B:1*Y*C*N*I*P

[L.2000C!L.2300]HI*ABK:F0632

[L.2000C!L.2300!L.2310B]NM1*82*1*SHERWOOD*HEATHER****XX*0004191971

[L.2000C!L.2300!L.2310B]PRV*PE*PXC*78789999

[L.2000C!L.2300!L.2320]SBR*P*18*456******MB

[L.2000C!L.2300!L.2320]CAS*CO*45*62.38

[L.2000C!L.2300!L.2320]CAS*OA*96*107.62

[L.2000C!L.2300!L.2320]AMT*D*50

[L.2000C!L.2300!L.2320]AMT*EAF*0

[L.2000C!L.2300!L.2320]OI***Y*P**I

[L.2000C!L.2300!L.2320!L.2330A]NM1*IL*1*BOBBY SUE*SCOTT****MI*123

[L.2000C!L.2300!L.2320!L.2330A]N3*1600 WASHINGTON ST

[L.2000C!L.2300!L.2320!L.2330A]N4*CONWAY*NH*03818

[L.2000C!L.2300!L.2320!L.2330B]NM1*PR*2*MEDICARE PART B*****PI*0085000

[L.2000C!L.2300!L.2320!L.2330B]DTP*573*D8*20220320

[L.2000C!L.2300!L.2400]LX*1

[L.2000C!L.2300!L.2400]SV1*HC:90837:J3*220*UN*4***1

[L.2000C!L.2300!L.2400]DTP*472*D8*20220315

[L.2000C!L.2300!L.2400]REF*6R*000063-6505
```

Example 4

Using the same Client and Payers in the example above, the MassHealthCarrierCode is removed from Payer 1.

When the 837P is created, it still has the unique carrier code for Medicare Part B in Loop 2330B, NM 109. The code is reported even though there is no value for Medicare Part B in the MassHealthCarrierCode field.

[L.2000B!L.2010BB]NM1*PR*2*MASSHEALTH*****PI*4077

[L.2000C!L.2300]CLM*000063-6505*220***99:B:1*Y*C*N*I*P

[L.2000C!L.2300]HI*ABK:F0632

[L.2000C!L.2300!L.2310B]NM1*82*1*SHERWOOD*HEATHER****XX*0004191971

[L.2000C!L.2300!L.2310B]PRV*PE*PXC*78789999

[L.2000C!L.2300!L.2320]SBR*P*18*456******MB

[L.2000C!L.2300!L.2320]CAS*CO*45*62.38

[L.2000C!L.2300!L.2320]CAS*OA*96*107.62

[L.2000C!L.2300!L.2320]AMT*D*50

[L.2000C!L.2300!L.2320]AMT*EAF*0

[L.2000C!L.2300!L.2320]OI***Y*P**I

[L.2000C!L.2300!L.2320!L.2330A]NM1*IL*1*BOBBY SUE*SCOTT****MI*123

[L.2000C!L.2300!L.2320!L.2330A]N3*1600 WASHINGTON ST

[L.2000C!L.2300!L.2320!L.2330A]N4*CONWAY*NH*03818

[L.2000C!L.2300!L.2320!L.2330B]NM1*PR*2*MEDICARE PART B*****PI*0085000

[L.2000C!L.2300!L.2320!L.2330B]DTP*573*D8*20220320

[L.2000C!L.2300!L.2400]LX*1

[L.2000C!L.2300!L.2400]SV1*HC:90837:J3*220*UN*4***1

[L.2000C!L.2300!L.2400]DTP*472*D8*20220315

[L.2000C!L.2300!L.2400]REF*6R*000063-6505

Bug Fixes

Ticket Number	Case Number	Description
EV-4949	15602	Two issues were reported with the MA 837 Acorn. 1. When a single *Create Bills* job is run for a payer who has the Acorn (MassHealth) defined on the 837P and for payers who do not, the custom carrier code check is run for ALL claims in the job, resulting in invalid errors. 2. When the above problem happens, those claims are sent in the 837 anyway, which is Ok except that those claims are then also placed back in Active as if the error were real. These issues were addressed by ensuring the job processing service (oak) only applies the custom carrier code check to those Claims that are associated with the payer that has the Acorn defined. All other non-Acorn payer claims are processed without the carrier code check, preventing the invalid errors.