

NC DSS Custom Billing v2.0.27

Released January 5, 2023

Requires EchoVantage Version 3.25+

DOCUMENT HISTORY

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Date	Description	Author	Version
01/05/2023	Addressed reported issue where the pennies adjustments were not being added, EV-5559	Heather Sherwood	2.0.27
	Addressed reported issue where the original charge was updated during reprocessing, EV-5294		

Updates

This release addresses the following issues.

- The DSS Acorn daily amounts were not summing to the exact negotiated rate in some cases. Now a “pennies” adjustment is applied to some DSS charge amounts to ensure the exact negotiated rate is charged, regardless of whether this rate is higher or lower than the Payer’s rate for that service.
- Reprocessing charges, instead of *Reverse Service Transactions*, created with the DSS Acorn could result in changes to the original charge amount which affected the GL balances. Updates were made so that the reprocessing actions could be used in the Claims menu since it is not always clear to the user when a charge is created by the DSS Acorn.

Overview

The NC DSS custom billing Acorn addresses the custom billing requirements for DSS Services and Client negotiated rates for DSS and non-DSS Services. A single, agency-created Client Tab Form stores the Client’s negotiated rate(s), Client Payer(s), and the Services to which these negotiated rates apply. Start and End Dates are used to determine the active Rate record(s) for each Client.

Clients can have multiple valid rows for a given Date range for different Services. However, there is no validation to enforce that the Service Definitions, Client Payer, and Date ranges are distinct. If rows overlap for the same Service Definition, Client Payer, and Dates, one is chosen arbitrarily.

When Services are processed, the Acorn determines how rates and units are calculated based on the following rubric.

Is the Service DSS?	Is there a Negotiated Rate?	Service Processing Outcome
YES	YES	The Negotiated Rate is used as the Monthly Rate for the DSS calculation.
YES	NO	The Service Definition default or Payer override rate is used as the Monthly Rate for the DSS calculation. If the DSS Service is part of a bundle, the bundled Service Definition Rate or Payer override rate is used.
NO	YES	Is the Base Rate greater than the Negotiated Rate?
		YES <ul style="list-style-type: none">• The Base Rate and Charge Calculation Method (Flat or Unit) are used to calculate the correct Charge Amount.• The difference between the Base and Negotiated Rates is reported as a Contractual Adjustment.• The Negotiated Rate and Charge Calculation Method is used to calculate the Balance.
		NO <ul style="list-style-type: none">• The Negotiated Rate and Charge Calculation Method (Flat or Unit) are used to calculate the Base Rate.• And the Negotiated Rate and Charge Calculation Method are used to calculate the Balance.
NO	NO	No special processing – Service Definition default or Payer override rate is used to calculate the Charge and Balance.

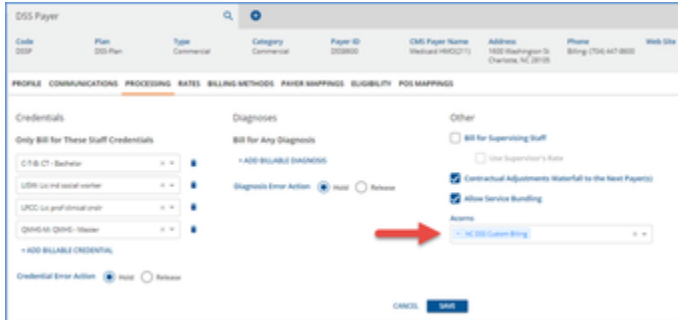
Installing The Acorn

The installation inserts or updates the Acorn Registration, *NC DSS Custom Billing*, to version 2.0.27.RELEASE.

Configuring The Application

Selecting the Acorn for Applicable Payers


Navigate to *Configuration > Services/Payers > Payers > Processing* and select *NC DSS Custom Billing* in the Acorns dropdown listing on the desired Payers. Remember to select *SAVE*. The Acorn must be defined on a Payer's Processing tab for the DSS and Negotiated Rate billing rules to apply during the *Fiscal Overview > Unprocessed Services > Create Charges* process.



The screenshot shows the 'DSS Payer' configuration interface. At the top, there is a table with columns: Code, Plan, Type, Category, Payer ID, CMS Payer Name, Address, Phone, and Web Site. Below this, there are several tabs: PEOPLE, COMMUNICATIONS, PROCESSING (selected), RATES, BILLING METHODS, PAYER MAPPINGS, ELIGIBILITY, and POS MAPPINGS. The 'PROCESSING' tab is active, showing sections for 'Credentials', 'Diagnoses', and 'Other'. In the 'Diagnoses' section, there is a dropdown menu for 'Acorns' with a red arrow pointing to it, which is currently set to 'NC DSS Custom Billing'. There are also buttons for 'ADD BILLABLE DIAGNOSIS' and 'Diagnosis Error Action'.

Configuring the Custom Client Tab

Navigate to *Configuration > Client Chart > Client Tabs* and create the custom tab to hold the Negotiated Rates form. The tab can be added with any name. Then add the agency-created *Negotiated Rates* form to the newly created custom tab. The custom form must have a Form Location of *Client_Tab* Form to select from the **+ ADD FORM**. [Click HERE](#) for more detailed information on creating and maintaining Custom Client Tabs.



The screenshot shows the 'Client Tabs' configuration interface. It displays a list of tabs: 'Enrollments', 'Diagnosis', 'Payers', and 'Negotiated Rates'. The 'Negotiated Rates' tab is selected, and a red arrow points to it. Below the 'Negotiated Rates' tab, there is a list of forms: 'NegotiatedRates (NegotiatedRates)'. A red arrow points to this form. There are also buttons for '+ ADD FORM' and a trash icon.

Grant User Group Access to the Newly Created Client Tab


Navigate to *Configuration > Staff/Users > User Groups* and set the access to the new tab and form in *MENU OPTIONS* for the appropriate User Groups. When a new Client Tab is added, the default menu access is disabled with no form selected for all User Groups. Users responsible for entering and maintaining the Negotiated Rate rate information must be a member of a User Group with *Edit* access to the newly created *DSS* tab. [Click Here](#) for more detailed information on *User Group Menu Options Access*.

Admin 🔍 +

Name	Description
Admin	Administrators

PROFILE | MENU OPTIONS | STAFF

- Placements
- Clients

Timeline	<input type="radio"/> Disabled	<input checked="" type="radio"/> Edit
Schedule	<input type="radio"/> Disabled	<input checked="" type="radio"/> Edit
Profile	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Household	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Contact Info	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Episodes	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Enrollments	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Account	<input type="radio"/> Disabled <input checked="" type="radio"/> Edit	
Payers	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Diagnosis	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	
Documents	<input type="radio"/> Disabled <input checked="" type="radio"/> Edit	
 Negotiated Rates	<input type="radio"/> Disabled <input type="radio"/> Read Only <input checked="" type="radio"/> Edit	

- Groups

Define the DSS Services

The *Other* field in *Configuration > Services/Payers > Service Definitions > Profile* is used to determine if the Service is a DSS Service. The Acorn checks for a value like *DSSACORN* in this field. If a match is found, the Acorn checks for unprocessed Services for the month that match that Service Definition.

PROFILE COMPONENTS RATES PROGRESS NOTES

Service Code * TFC Service Name * Therapeutic Foster Care

Other DSSACORN ?

Start Date 10/01/2020 End Date

Define Client Negotiated Rates


A record must exist in the dbo.NegotiatedRates table for each Client and Service combination that has a negotiated rate. If the appropriate permissions were granted, these could be entered on the *Negotiated Rates Form* on the newly added *Negotiated Rates* custom Client tab.

ClientPayer	StartDate	EndDate	Service	NewRate	isDSS
Acorn Payer	03/17/2021		TFC Therapeutic Foster Care	108.00	Y
Acorn Payer	03/01/2021		RBLVL26-12 RAB Lev II, 6-12 yrs	550.00	Y
Acorn Payer	03/01/2021		TFCTL TFC Therapeutic Lev	108.00	Y

Client Payer: Acorn Payer Start Date: 03/01/2021 End Date:

Negotiated Rate: 108 Service: TFCTL TFC Therapeutic Lev

New Delete Save Cancel

 Clients can have multiple valid rows for a given Date range for different Services. However, there is no validation to enforce that the Service Definitions, Client Payer, and Date ranges are distinct. If rows overlap for the same Service Definition, Client Payer, and Dates, one is chosen arbitrarily.

The Acorn configuration steps are now complete. Services may be entered following the usual workflow.

Processing Services Using the Acorn

Service processing follows the typical workflow in *Vantage Point > Fiscal Overview > Unprocessed Services > Create Charges*. The Acorn logic is triggered when the Client's Payer has *NC DSS Custom Billing* selected in the Payer Processing tab's Acorn field. The Acorn determines if a Service in the *Create Charges* job matches a DSS Service Definition and looks to see if any Services are stored in the Client's Negotiated Rates tab for the Payer and Date Range.

If the Service IS a DSS Service and there IS a matching Negotiated Rate record,

- The Acorn looks for all unprocessed, matching Services in a Calendar month.
- The Daily Rate is calculated for the month by dividing the Client's Negotiated Rate for that Service by the number of days in the month.
- For example, if the negotiated Rate is \$250.00 for April, the daily Rate is \$8.33.
- Each Service then receives a charge equal to the calculated Daily Rate.
- If Services are provided every day of the month, the total charges match the negotiated Rate exactly. If needed, the daily rate charge for the Services at the beginning of the month is adjusted by pennies to ensure the total matches the Negotiated Rate.

- If the DSS Service is a monthly bundled Service, the daily rate is calculated in the same way as non-bundled DSS Services. The units reflect the number of days that Services were received based on the Service Date of the Services included in the bundle.

If the Service IS a DSS Service and there is NO matching Negotiated Rate record,

- The Acorn looks for all unprocessed, matching Services in a Calendar month.
- The daily Rate is calculated for the month by dividing the Service Definition default or override Rate by the number of days in the month.
- If the DSS Service is part of a monthly bundle, the bundled Service Definition Rate or the Payer override rate for that Service Definition is used to determine the daily Rate.
 - The bundled units are the number of days that Services were received. Two Services on the same day count as one day.
 - The full monthly amount bills when a Service was received every day of the month.
- Each Service then receives a charge equal to the calculated daily Rate.
- Again, If Services are provided every day of the month, the total charges match the Service Definition default or override Rate exactly. If needed, the daily rate charge for the Services at the beginning of the month is adjusted by pennies to ensure the total matches the default or override Rate.

If the Service is NOT a DSS Service and there IS a matching negotiated rate record,

- And the Service Definition default Base Rate is NOT greater than the Negotiated Rate,
 - The Negotiated Rate and Charge Calculation Method is used to calculate the Base Rate.
 - The Negotiated Rate and the Charge Calculation Method are also used to calculate the Balance.
 - In the example below, the Negotiated Rate is \$500.00. The Service Definition Base Rate is \$400.00, so the Negotiated Rate is used with the Charge Calculation Method of Unit.

Details							
Service Date	Client	Duration/Units	Payer	Procedure Code	Billed Units	Charge Amount	Balance
05/02/2021	123456 Client, Test	90 min	DSSPAY	90839	6	\$ 3,000.00	\$ 3,000.00
05/01/2021	123456 Client, Test	60 min	DSSPAY	90839	4	\$ 2,000.00	\$ 2,000.00

- And the Service Definition default Base Rate IS greater than the Negotiated Rate,
 - The Base Rate and Charge Calculation Method are used to calculate the correct Charge amount.
 - The difference between the Base and Negotiated Rates is reported as a Contractual Adjustment.
 - The Negotiated Rate and the Charge Calculation Method are used to calculate the Balance.
 - In the example below, the Negotiated Rate is \$52.13 and the Service Definition Base Rate is \$75.00. The Create Charges Details show a 05/04/2021 Charge Amount of \$525.00 (the Base Rate of \$75.00 x 7 Units) and a Balance of \$364.91 (the Negotiated Rate of \$52.13 x 7 Units).

Details							
Service Date	Client	Duration/Units	Payer	Procedure Code	Billed Units	Charge Amount	Balance
05/04/2021	123456 Client, Test	105 min	DSSPAY	HC-TEST - TE	7	\$ 525.00	\$ 364.91
05/03/2021	123456 Client, Test	60 min	DSSPAY	HC-TEST - TE	4	\$ 300.00	\$ 208.52

The Claim Details show the Contractual Adjustment amount, which is the difference between the Base and Negotiated Rates times the number of Units (\$22.87 x 7).

Case Management	HC-TEST	05/04/2021
DSSPAY		
Date	Amount	Reason
05/04/2021	\$ 525.00	CHARGE CREATED
05/04/2021	\$ 160.09	CONTRACT ADJ
Balance:	\$ 364.91	
Total Balance:	\$ 364.91	

If the Service is NOT a DSS Service and there is NO matching negotiated rate record, there is no special processing.

Reprocessing DSS Charges

There may be occasions when DSS Charges require changes after being created. The updates to address the issue reported in EV-5294 make it so the Acorn logic is used in any subsequent Charge creation when reprocessing, allowing any reprocessing Action to be used. The following table gives a brief explanation of each action.

Reprocessing Action	Use When
Rebilling Outgoing, Working, and Denied Charges	<ul style="list-style-type: none"> Nothing about the Charge needs to change. The Outgoing or Denied status is simply updated to Active so it is available when Creating Bills.
Reprocess Active Payer	<ul style="list-style-type: none"> Only the Charge information for the Active Payer needs to be modified. Nothing needs to change for a previous Payer. This will pick up a new rate but cannot include DSS services that were missed during the initial processing.
Reprocess All Payers	<ul style="list-style-type: none"> All Charges for all Payers need to be modified, but nothing needs to change about the Service. Again, this will pick up a new rate but cannot include DSS services that were missed during the initial processing.
Reverse Service Transactions	<ul style="list-style-type: none"> Service information needs to be modified. Select this option when not all DSS Services were included in the same monthly billing job. Charges are reversed and the Services are returned to Ready status, so they may be processed again.

Additional Considerations for DSS Rate and Charge Calculations

It is assumed that,

- All DSS Services have only Base Rates configured or the Expected or Contracted Rates are equal to the Base Rates in *Configuration > Services/Payers > Service Definitions > Rates* or in the *Payers > Rates Payer Override*. A positive Expected or Contractual Adjustment results in an inaccurate Charge Balance for DSS Services.
- There are no Copays configured for the DSS Client Payers. Any amounts due from the Client for DSS Charges should be entered as Patient Responsibility Amounts during Remittance entry.

It is also assumed that all DSS Services are held and run at the end of a given month.

- Additional pennies are only assigned when a Service for every day of the billing month is processed in the same Create Charges job.
- Partial month processing always uses the daily Rate with no pennies adjustments.
- To include the additional pennies, reprocess Claims for the partial month using the *Reverse Service Transactions* Action on the Claims Management screen.
- Then run a Create Charges job with all Services for the month together.

In the event of a mid-month rate change,

- The monthly Rate is prorated for the effective period.
- For example, if the monthly Rate is \$250.00 from 11/01/2020 through 11/15/2020, the monthly Rate for these 15 days is \$125.00.
- There are no pennies adjustments to any of the daily rate charges.

Service Errors

If any DSS Service for a Client has an error during the Create Charges process,

- All Services for that Client are put on hold until the error is corrected.
- All Client's DSS Services must be able to create a charge to process successfully.
- If a job containing errors is Finalized, Charges are only created for Clients with error-free DSS Services.
- The Held DSS Services are returned to Ready status once Finalizing is complete.

The Unprocessed Services > Errors tab provides detailed information on processing job errors.

Bug Fixes

Ticket Number	Case Number	Description
EV-5559	17474	An issue was reported where the acorn was not properly applying the pennies adjustments to the DSS Service daily rate to ensure that the exact negotiated rate was billed in some circumstances. The issue was addressed and now the adjustment procedure works as expected.
EV-5294	16930	An issue was reported where reprocessing active and reprocessing all payers actions in Claims could update the original charge. Updates were made so that any subsequent charge calculations use the Acorn logic when reprocessing a DSS claim.