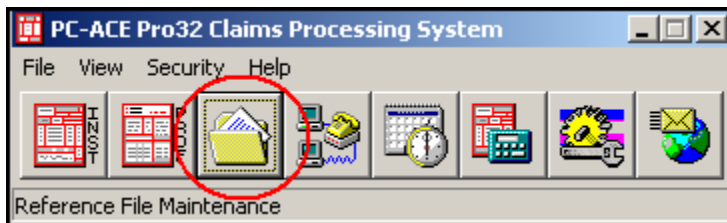


EDI Support Services

Completing Reference File Maintenance

After installing PC-ACE Pro32, EDI Support Services (EDISS) requires users to complete the Codes/Misc, Provider (Inst) or Provider (Prof), Payer, and/or Patient reference files prior to creating claims.

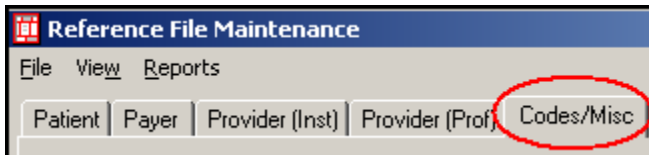
To access any reference file, click on the Reference File Maintenance button from the PC-ACE Pro32 main toolbar.



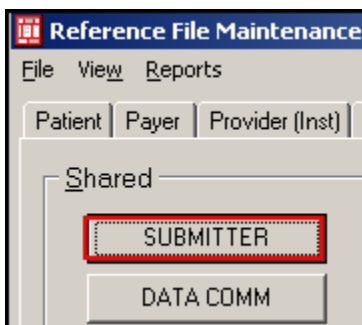
The Reference File Maintenance form appears.

Completing the Codes/Misc Reference Files

1. Select the Codes/Misc tab.



2. Under the Shared column, click on the Submitter button.



The Submitter Setup form appears.

3. Select the appropriate Claim Type (Institutional or Professional) and click on the View/Update button.

In this document:

- Completing the Codes/Misc files.
- Completing the Provider (Inst) and/or Provider (Prof) files.
- Completing the Payer file.
- Completing the Patient file.

Completing Reference File Maintenance

Submitter Setup

Claim Type: Institutional Professional

LOB	Payer ID	Submitter ID/EIN	Submitter Name
<< ALL >>	<< ALL >>	SUBMITTER ID	SUBMITTER NAME HERE

EDISS supplies a pre-loaded example. Make sure this example is highlighted when the View/Update button is selected.

New View/Update Copy Delete Close

The Submitter Information form appears.

4. Complete the fields on the General tab of the Submitter Information form and click on the Save button.
 - A. ID: Although the pre-loaded example states SUBMITTER ID in the ID field, the EDISS assigned Trading Partner ID should be entered in this field. The Trading Partner ID is communicated to providers on the Test Notification fax sent from EDISS. If the testing fax has not been received, enter NORIDIAN in this field. Replace NORIDIAN with the assigned Trading Partner ID when the testing fax is received.
 - B. EIN: Enter the Tax Identification Number for the provider/facility.
 - C. Name: Enter the name of the provider/facility.
 - D. Address: Enter the street address of the provider/facility.
 - E. City: Enter the city where the provider/facility is located.
 - F. State: Enter the state where the provider/facility is located.
 - G. Zip: Enter the zip code of the provider/facility.
 - H. Phone: Enter the phone number of the provider/facility.
 - I. Contact: Enter the name of the contact person for the provider/facility.
 - J. Click on Save.

Completing Reference File Maintenance

The screenshot shows a window titled "Institutional Submitter Information" with a "General" tab selected. The form contains the following fields and callouts:

- General** (tab, circled in red)
- LOB**: dropdown menu
- Payer**: dropdown menu with callout **A.**
- ID**: text field containing "SUBMITTER ID" with callout **B.**
- EIN**: text field with callout **B.**
- Name**: text field containing "SUBMITTER NAME HERE" with callout **C.**
- Address**: text field containing "SUBMITTER ADDRESS" with callout **C.**
- City**: text field containing "ANY TOWN" with callout **D.**
- State**: dropdown menu containing "ND" with callout **E.**
- Zip**: text field containing "58103-____" with callout **F.**
- Phone**: text field containing "(701) 123-4567" with callout **G.**
- Fax**: text field with callout **G.**
- Country**: dropdown menu
- Contact**: text field containing "CONTACT NA" with callout **H.**
- RE**: text field with callout **H.**
- Region**: dropdown menu with callout **J.**
- Save** button (circled in red)
- Close** button

Note: Do not change any information on the other tabs in Submitter Information.

Completing the Provider (Inst) and/or Provider (Prof) Reference Files

1. Select the Provider (Inst) or Provider (Prof) tab.

The screenshot shows a window titled "Reference File Maintenance" with a menu bar containing "File", "View", and "Reports". Below the menu bar are several tabs: "Patient", "Payer", "Provider (Inst)", "Provider (Prof)", and "Codes/Misc". The "Provider (Inst)" tab is circled in red.

2. Click on the New button.

Note: If updating an existing record, click on the View/Update button.

Completing Reference File Maintenance

LOB	Type	Provider/Group Name	Provider ID	Pa
MCB	Solo	AMPLE, JUSTIN X	123456789	

The New Provider Options form appears.

3. Select one of the following options and click OK:

- A. Create a completely new provider (all fields blank).
- B. Inherit name/address information from the selected provider.

Note: Inheriting name/address information lets users avoid re-keying the address for each individual in a group (See Setting up Groups & Individuals in Groups in PC-ACE Pro32).

Completing Reference File Maintenance

New Provider Options

As a convenience, the new provider may inherit the basic name and address information from the currently selected provider. This facilitates the creation of provider records which differ only in the specification of ID, A., and Payer ID fields.

Create a completely new provider (all fields blank)

Inherit name/address information from the selected provider

B. Associate the new provider with the selected provider

Select the desired option and click the 'OK' button to continue.

OK Cancel

The Provider Information form appears.

4. Select the appropriate Provider Type for your facility (i.e., Group Practice, Individual in Group, or Solo Practice).

Professional Provider Information

General Info | Extended Info | Local Fields

Provider Type: Group Practice Individual in Group Solo Practice

5. Complete the fields in the General Info tab and click on Save.
 - A. Last/First/MI: Enter the name of the provider/facility
 - B. Address/City/State/Zip/Phone, and Fax: Enter the address information for the provider/facility.
 - C. Contact: Enter the name of the EDI contact person for the provider/facility.
 - D. Provider ID/No: Enter the NPI.
 - E. LOB: Select the appropriate Line of Business.
 - F. Payer ID: Select the appropriate Payer ID.
 - G. Group Label: If a group situation, select a group identifier.
 - H. NPI: Enter the NPI.
 - I. Tax ID/Type: Enter the appropriate Tax ID and select the appropriate Code Type.
 - J. Specialty: Select the appropriate Specialty Code.
 - K. Type Org: Select the appropriate Organization Type Code.
 - L. Taxonomy Code: Enter the taxonomy code. If unsure of the complete code, select from the list.

Completing Reference File Maintenance

Note: This does not need to be completed for Medicare Part B. If completed, it may cause errors in the file.

M. Accept Assign: Select the appropriate code indicating whether the provider/facility accepts assignment, or not.

N. Participating: Select the appropriate code indicating whether the provider/facility participates in Medicare, or not.

O. Sig Ind: Select the appropriate code to indicate the provider's signature is on file with the specific Line of Business (e.g., Medicare).

P. Date: Enter the date the provider's signature went on file with Medicare.

Q. Click on Save.

The screenshot shows the 'Professional Provider Information' dialog box with the 'General Info' tab selected. The dialog is divided into several sections with various input fields and checkboxes. Red callouts labeled A through Q point to specific fields:

- A: Organization
- B: Address
- C: Last/First/MI
- D: City/St/Zip
- E: Phone
- F: Remarks
- G: Group Label
- H: NPI
- I: Tax ID/Type
- J: UPIN
- K: Specialty
- L: Type Org
- M: Taxonomy
- N: Participating?
- O: Accept Assign?
- P: Date
- Q: Save button

The 'Provider Associations' table at the bottom right is empty:

LOB	Provider ID	Provider/Group Name
-----	-------------	---------------------

6. Complete the fields in the Extended Info tab and click on Save.

Completing Reference File Maintenance

Professional Provider Information

General Info **Extended Info** Local Fields

CLIA No. Provider Name Match

Mammography No. Force Legacy ID

HMD Contract No.

Dental Provider?

Provider ID/No Type

Provider Name Suffix

Provider Country

Secondary Provider IDs (ANSI use only)

ID/Type #1

ID/Type #2

Pay-To Provider Information (specify only if different)

Organization NPI

Last/First/MI Fed Tax ID/Type

Address

City/St/Zip Prov. ID/No./Type

Country Name Suffix Sec ID/Type #1

Sec ID/Type #2

Note: These fields may, or may not, be required depending on the type of services provided by the provider/facility. The Provider ID/No Type must contain XX to indicate an NPI is being used.

7. Enter the EDISS assigned Submitter ID in the Trading Partner ID field of the Local Fields tab and click on Save.

Note: If submitting directly to EDISS, the Submitter ID is the same as the Trading Partner ID. In the case where multiple NPIs were issued to the provider resulting in multiple Submitter IDs, a Billing Group number is assigned and used for the Trading Partner ID. The Submitter ID should always be recorded under the Local Fields tab.

Note: For more information on how to enter a Group and Individuals in a group, see the section called Setting Up Groups and Individuals in Groups in PC-ACE Pro32.

Completing Reference File Maintenance

The screenshot shows a dialog box titled "Professional Provider Information" with three tabs: "General Info", "Extended Info", and "Local Fields". The "Local Fields" tab is selected and circled in red. Below the tabs, there is a label "Trading Partner ID" followed by an empty text input field. A red callout box points to this field with the text: "The Trading Partner ID is the EDISS assigned Submitter ID and is communicated to submitters via the Test Notification Fax." At the bottom right of the dialog box, there are two buttons: "Save" and "Cancel", both of which are highlighted with red boxes.

Note: If there are any errors in any of the setups, an Edit Validation Errors List appears. These errors must be fixed before the setup saves. To correct the errors, either click directly on the error in the list or close the list. Once the list is closed, the boxes flashing in purple or red will need to be corrected. The flashing will stop once the error is fixed.

Setting up Groups and Individuals in Groups in PC-ACE Pro32

To set up a group practice in PC-ACE Pro32, build the group NPI and practice information into the Reference File Maintenance first, and then build the individual providers of that group into the Reference File Maintenance.

1. Complete the General Info, Extended Info, and Local Fields tabs of the Provider Information form with the group information. Include the group NPI in the Group ID/No field, and a value you would like to use to tie individuals in the group together in the Group Label field, and click on Save.

Completing Reference File Maintenance

The screenshot shows the 'Professional Provider Information' window with three tabs: 'General Info', 'Extended Info', and 'Local Fields'. The 'General Info' tab is selected. The form includes fields for 'Provider Type' (radio buttons for Group Practice, Individual in Group, Solo Practice), 'Group Name', 'Last/First/MI', 'Address', 'City/St/Zip', 'Phone', 'Fax', 'Contact', 'Group ID/No.', 'Payer ID', 'Group Label', 'NPI', 'Tax ID/Type', 'UPIN', 'Specialty', 'Type Org', 'Taxonomy', 'Accept Assign?', 'Participating?', 'Signature Ind', 'Date', 'Provider Roles' (Billing, Rendering), 'Remarks', and 'Provider Associations' (a table with columns LOB, Provider ID, Provider/Group Name). Red boxes and callouts highlight specific areas: 'General Info' tab, 'Group Practice' radio button, 'Group Label' field, 'Group ID/No.' field, and the 'Save' button. A callout points to the 'Group Label' field with the text 'Enter any value.' Another callout points to the 'Group ID/No.' field with the text 'Enter the group NPI here.' A larger callout points to the 'Group Name' field with the text 'Complete each tab with the information for the group.'

PC-ACE Pro32 returns to the Provider (Inst) or Provider (Prof) form.

2. Click on the New button.
3. The New Provider Options form appears.

- A. Create a completely new provider (all fields blank).
- B. Inherit name/address information from the selected provider.

Note: Inheriting name/address information lets users avoid re-keying the address for each individual in a group (See Setting up Groups & Individuals in Groups in PC-ACE Pro32).

Completing Reference File Maintenance

New Provider Options

As a convenience, the new provider may inherit the basic name and address information from the currently selected provider. This facilitates the creation of provider records which differ only in the specification of ID, A, and Payer ID fields.

A.

Create a completely new provider (all fields blank)

Inherit name/address information from the selected provider

B. Associate the new provider with the selected provider

Select the desired option and click the 'OK' button to continue.

OK Cancel

- Complete the General Info, Extended Info, and Local Fields tabs of the Provider Information form with the information for the individual, including the individual NPI in the Provider ID/No. field. Right-click in the Group Label field to select the value you created to tie the individuals in the group together and click on Save.

Professional Provider Information

General Info | Extended Info | Local Fields

Provider Type: Group Practice Individual in Group Solo Practice

Organization: _____

Last/First/MI: _____

Address: _____

City/St/Zip: _____

Phone: (____) ____-____ Fax: (____) ____-____

Contact: _____

Provider ID/No.: _____

Payer ID: _____

Remarks: _____

Group Label: _____

NPI: _____

Specialty: _____ Type Org: _____

Taxonomy: _____

Accept Assign?: Participating?:

Signature Ind: Date: ____/____/____

Provider Roles: Billing Rendering

Provider Associations:

LOB	Provider ID	Provider/Group Name

Save Cancel

Complete each tab with the information for the individual.

Right-click and select the value for the group the individual is a part of.

Enter the individual NPI here.

Completing Reference File Maintenance

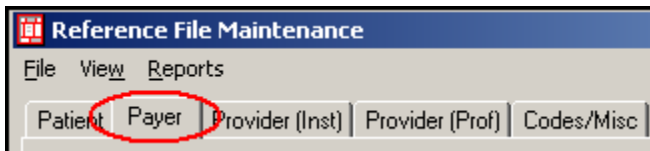
Note: When entering a group for Blue Shield of ND or WY, enter the clinic NPI as the group NPI and the provider NPI(s) as individuals in the group.

Note: The fields in the Extended Info tab may, or may not, be required depending on the type of services provided by the provider/facility. The Provider ID/No Type must contain XX to indicate an NPI is being used.

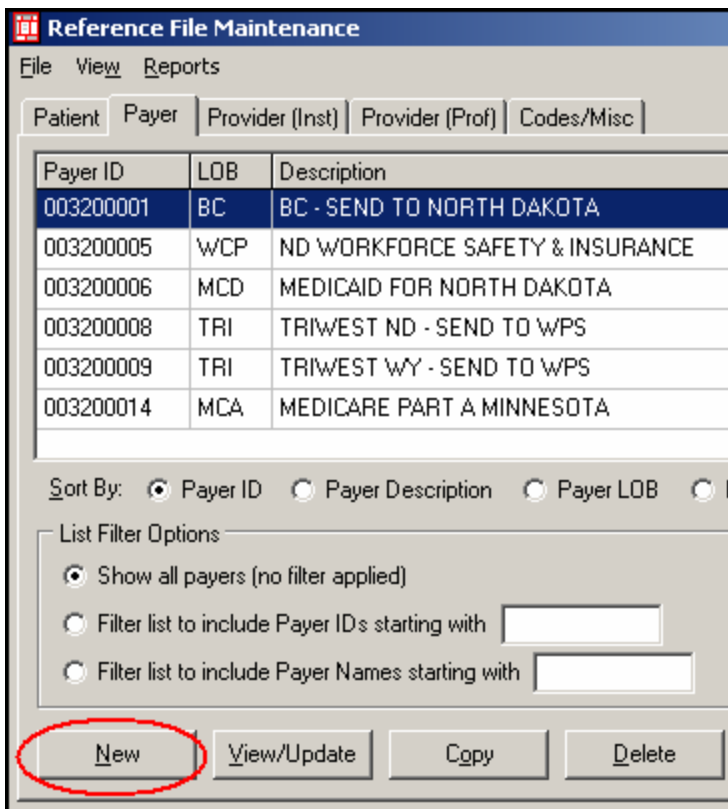
Completing the Payer Reference File

PC-ACE Pro32 is pre-configured with the Payer ID for each line of business supported by EDI Support Services (EDISS), however, a payer record must be created for any Primary or Secondary insurance carrier needing to be billed and is not present.

1. Select the Payer tab.



2. Click on the New button.



Note: If updating an existing record, click on the View/Update button.

Completing Reference File Maintenance

The Payer Information form appears.

1. Complete Payer Information for the Primary or Secondary insurance and click on Save.
 - A. Payer ID: Enter the Payer ID.
Note: If the Payer ID is not known, contact the payer to obtain.
 - B. LOB: Select the Line of Business.
 - C. Full Description: Enter the name of the payer.
 - D. Address\City\State\Zip: Enter the address information for the payer.
 - E. Contact Name, Phone, and Fax: These fields are not required but can be used to indicate the contact name and phone number for the payer.
 - F. Source Flag: Select the appropriate identifier.
 - G. Edit Ind Flag: Select the appropriate identifier.
 - H. Media Flag: Select E.

The screenshot shows a 'Payer Information' dialog box with the following fields and callouts:

- A.** Payer ID
- B.** LOB
- C.** Full Description
- D.** Address (part of the Address & Contact Information section)
- E.** Contact Name (part of the Address & Contact Information section)
- F.** Source flag (part of the Flags section)
- G.** Edit Ind flag (part of the Flags section)
- H.** Media flag (part of the Flags section)
- I.** Save button

The 'Address & Contact Information' section includes fields for Address, City, State, Zip, Contact Name, Phone, Ext, and Fax. The 'Flags' section includes checkboxes for Source, Edit Ind, Media, Card, Address, and Usage. A 'Local Fields' button is located to the right of the Full Description field. A 'PrintLink Matching Descriptions' button is at the bottom left, and a 'Cancel' button is at the bottom right.

Completing the Patient Reference File

Information entered for a patient in the reference files automatically load into the appropriate claim field when selected using the variable-list lookup feature.

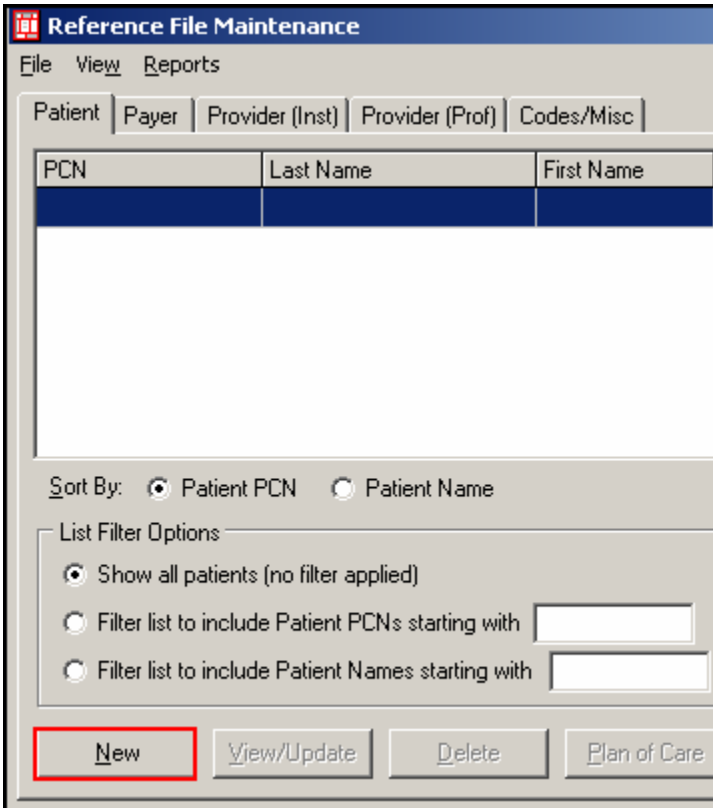
Completing Reference File Maintenance

1. Select the Patient tab.



2. Click on the New button.

Note: If updating an existing record, click on the View/Update button.



3. Complete the General Information tab.

- A. Last Name: Enter the last name of the patient.
- B. First Name: Enter the first name of the patient.
- C. Patient Control No (PCN): Enter a unique identifier for patient.

Note: This identifier is selected by the provider/facility as a way to identify patients in the software.

- D. Patient Address: Enter the address information for the patient.
- E. Active patient: Select Y - Patient is active or N – Patient is inactive.
- F. Sex: Select M – Male, F – Female, or U – Unknown.

Completing Reference File Maintenance

- G. DOB: Enter the patient's date of birth.
- H. Employment Status: Select the code.
- I. Signature on file: The patient's signature must be on file to indicate permission to release the information.
- J. ROI Date: Enter the date the patient signed the ROI.
- K. Click on Save.

The screenshot shows a 'Patient Information' window with several tabs: 'General Information', 'Extended Info', 'Primary Insured (Inst)', 'Primary Insured (Prof)', and 'Secondary Insured'. The 'General Information' tab is active. Callouts A through K point to various fields and controls:

- A. Last Name
- B. First Name
- C. Patient Control No (PCN)
- D. Patient Address (Address field)
- E. Patient Status
- F. Active Patient checkbox
- G. Sex
- H. Employment Status
- I. Signature On File checkbox
- J. ROI Date
- K. Save button

4. Complete the Primary Insured (Inst and/or Prof) tabs to designate the patient's Primary insurer.

A. Payer ID: Right-click in the field and select from the list.

Note: When a Payer ID is selected, the Payer Name and LOB fields automatically populate.

B. Insured Information Options: Select Separate Inst & Prof.

Note: This option is only available on the Primary Insured (Inst) tab.

C. Rel (Insured Information tab): Right-click in the field and select from the list.

Completing Reference File Maintenance

Note: When the Rel code is selected, the Insured Information fields automatically populate based on the information in the General tab.

D. Insured ID: Enter the insurance number of the patient.

E. Click on Save.

The screenshot shows the 'Patient Information' window with the 'Primary Insured (Inst)' tab selected. The form contains the following fields and options:

- General Information:** Payer ID (A.), Payer Name, LOB, Group Name, Group Number, Claim Office.
- Insured Information Options:** Common Inst & Prof, Separate Inst & Prof (B.).
- Insured Information (F7):** Rel (C.), Last Name, First Name, MI, Gen, Insured ID (D.), Address, Sex, Assign of Benefits, DOB, Release of Info, City, State, Zip, Employ Status, ROI Date, Retire Date, Country, Phone.
- Buttons:** Clear All Fields For Insured, Save (E.), Cancel.

5. Complete the Secondary Insured tab if the patient has a Secondary insurance.

Completing Reference File Maintenance

The screenshot shows a software window titled "Patient Information" with a tabbed interface. The tabs are "General Information", "Extended Info", "Primary Insured (Inst)", "Primary Insured (Prof)", and "Secondary Insured". The "Secondary Insured" tab is selected and circled in red. The form contains several input fields and options:

- Payer Information:** Payer ID, Payer Name, LOB, Group Name, Group Number, Claim Office.
- Insured Information Options:** Radio buttons for "Common Inst & Prof" (selected) and "Separate Inst & Prof". A "Clear All Fields For Insured" button is also present.
- Insured Information (F7) / Employer Information (F8):** A section with sub-tabs for "Insured Information (F7)" and "Employer Information (F8)".
- Personal Information:** Rel (checkbox), Last Name, First Name, MI, Gen, Insured ID, Address (two lines), Sex (checkbox), Assign of Benefits (checkbox), DOB (date field), Release of Info (checkbox), City, State, Zip, Employ Status (checkbox), ROI Date (date field), Retire Date (date field), Country, Phone.

At the bottom of the window are "Save" and "Cancel" buttons.

Note: To assign a Secondary insurance to a patient, the Payer must be built into the Payer tab.