

**NORTH COUNTRY COMMUNITY MENTAL HEALTH
NORTHERN AFFILIATION
ADMINISTRATIVE MANUAL**

CHAPTER: Affiliation Chapter 7
PROCEDURE NAME: 837 Professional Claims Processing
PROCEDURE NUMBER: 7001

POLICY

It is the policy of North Country Community Mental Health; Northern Affiliation that all claims processed will be HIPAA compliant.

PURPOSE

To establish a process and procedure to ensure consistent steps are taken each time a claim is processed.

APPLICATION

All claims staff of the Northern Affiliation division.

PROCEDURES

I. For all 837 Professional Claims Submitted by Comprehensive Providers:

- A. Claims are stored on the E on "Avatar" Drive, Cashsys Folder and then separated by Board and Funding Source.
- B. From Avatar main menu you will select Avatar MSO, 837 Health Care Claim Professional, Enter the number "1" Test Batch
- C. Select Load File, go to the Cashsys Folder and you will need to load the path and file prior to processing. Copy the file name after the path name you will need to add ".TXT" at the end. It should look something like the example below:
E:\CACHESYS\NC_ELECTRONIC_BILL_DATA\ABW\837PxNCxABWx04262005.TXT.
- D. Click on Process.
- E. If the path is correct you will have a report open that shows you the file. Close the report and then select Compile File. Select T for Today for Date Claims Received Select the file that you just loaded. It gives you a date, time, your name and the name of the File Path/Name.
- F. Click on Process, When the process is complete you will get a display box allowing you to review the report details.
- G. Check the last page for Total Charges/Disbursements for the Batch. It should match the total that was given to you for this batch. If it doesn't match it means there were CRITICAL ERRORS. Critical errors are generated for the following reasons:
 1. System cannot find an ENROLLED MEMBER for the FUNDING SOURCE submitted
 2. INVALID CPT/CODE submitted.
 3. INVALID/MISSING Diagnosis Code.
- H. Run the Crystal Error Reports under Claims Processing 837 Reports. Run the Error Report and the Denied Services Report. If critical errors are found, research the errors and fix them if possible. If you are able to fix the critical errors when you post the file the corrections will be adjusted in the total.
- I. You will receive Denied Services most often if a member is not enrolled in the funding Source submitted. Either Post File or Delete Loaded/Compiled File depending on the types of errors you encountered.
- J. Once the Post File is complete write down the system assigned batch number and review the total reported at the bottom of the report. Select Claims Processing-Close Batch write down the number of services listed on this screen which you will record in the Access Database, once a batch is closed you will not have the ability to make any further corrections to the submitted data.
- K. You are now ready to select 837 Outbound Processing, Select 837-P Version, Select Individual Funding Sources, Select the Funding Source related to the batch you just closed, Select Sort File, Select the Contracting Provider, Select NO for create claims. You need to

- run a test file before creating claims, Select date range that covers the batch, Click on Process. If it says no information found it means you did not close the batch.
- L. Run Report and review for errors if you have errors likely it will have to do with the set-up of Provider and/or Member defaults. Review the default screens and make corrections if necessary. At this stage if your totals do not balance it will most likely be due to missing Q.I. data for a member in the file. Run the Crystal Report "Missing Q.I. Files" in the Claims Processing, 837 Reports table. If you have missing Q.I. files you will need to review the profiles created for each member from the PM product. If no file is found you will need to call the applicable board and have them set up one. You will then be able to submit a record to the department.
 - M. Once all errors have been fixed then the file needs to be deleted.
 - N. Repeat steps "K" through "M" above except you click on YES to create claims.
 - O. Run Report and print the page with claimed amount totals, this page will then get attached to the fax page sent to you by the Board. Attach all critical errors, and denied service reports to this bundle. This will be a hard copy record of all adjustments made to the original file. This bundle is then stored in our Confidential Claims File.
 - P. You can then select Create File on Server.
 - Q. Once the file is created, go to explorer, select "E on Avatar", then MSO, the file should be there it needs to be renamed to identify board, funding source, date and batch number.
 1. Examples -
 - 837PxNCxGFx200505BATCH400x164944.TXT
 - 837PxNCxABWx20050506BATCH 123x122103.TXT
 - NC, AV or NE for board names
 - MA, GF, ABW, MIC for funding sources.
 - The F.Y., and month of services you are processing, add the abbreviation res for inpatient board file and include the batch number.
 - R. Once the file has been created on the server and renamed it needs to be moved into the "Files to SEND" folder. *Caution, if you had to create a Q.I. report to the department, your file cannot be placed on the "Files to Send" folder until the Q.I. report has been sent and received without error by the department.*
 - S. You then need to return to 837 Health Care Claim Professional screen and select Run Report and select the file you were working on click in the Delete radial dial and process to delete the file. You then have a clean slate to start your next 837 transmission.
 - T. You need to move the FILE you were working with from the Cashsys Folder-Applicable Board and Funding Source to the Funding Source-Processed Folder.
 - U. A database rests in Access titled "Electronic Claims Transmitted" complete all applicable fields this database was created as a means of tracking batches created through to completion, we are then able to bounce this database against the MSO "Sent Files" and the "Cashsys Folder" to insure that we do not miss any submitted files.

REFERENCES:

DISTRIBUTION: NCCMH, Northern Affiliation Administrative Manual Holders

REVISED:

APPROVED:

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