

DME Notes



DMEFree Newsletter September 2nd, 2004

Important information for DMEFree & RxDME2000 users 4 page special edition!

New version brings CMN CHANGES to SOFTWARE

The DMERC front end edit **INVALID/ UNNECESSARY CMN SUBMITTED** is a billing issue that came in with Hipaa Ansi 835 claims. This edit prevented our clearinghouse clients from sending the claim, its CMN and accessories all on one 1500 form.

The resolution will occur in version 2.10 of RxDME2000 and version 3.19 of DMEFree. (SEE RIGHT COLUMN)

There will be a check box labeled **CMN Attached?** for each line in a claim. If you have a CMN attached or intend to attach a CMN, then select your item and put a check mark next to it in the check box . Only lines with a check box will get the CMN. Lines without a check box will not get a CMN line.

Note: Remember the basic rule of one CMN per 1500 claim is still in effect. Example: you can't have a Wheelchair item with a wheelchair CMN and a Hospital bed with a hospital bed CMN on the same 1500 claim. Make a separate claim.

Please Update your Software - New versions are Free*

**New versions available NOW for both
RxDME2000 and DMEFree!**

To take advantage of enhancements and reduce claim errors it is very important that you are running the latest versions of DMEFree or RxDME2000.

The current version number may be found by looking at the top line of your main program screen or by clicking on Help and then About.

DMEFree current version is 3.19

RxDME2000 current version is 2.10

Updates are available by clicking on "Check for Updates" in your software programs. Or by sending an email to Support@dmeffree.com with your company name and version number.

*Free upgrades for customers that maintain an active support subscription

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Past newsletters can be found at www.dmeffree.com "Select Existing users, Select What's New"

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Activity Logging Added to Software!

As part of our continuing efforts to comply with CMS Hi-paa regulations we have implemented a new activity logging system!



RxDME2000 and DMEFree both received this capability. Every Addition, Change or Deletion to any data in the system is logged in painful detail!

Examples: If patients address is 12 Any street and you change it to 14 Any street, this change is documented at the field level. If you have a blank Telephone# and you add a telephone# during a change, this will be recorded. Case changes are not logged.

When a record is added the activity log will show Insert in the change field of the activity file. The logging is quite extensive, however logging is the only function, rollback capability was not enabled at this time.

Activity logging is slightly different in the two programs. This was due to the additional complexity of RxDME2000. For example: In DMEFree changes to claims are recorded by the field, in RxDME2000 changes to claims are recorded as a copy of the entire claim record.

PC Solutions support department recommends that you utilize the simple security system in the software. The owner should be the administrator, everyone else should be an operator with limited access to activity log info.

DMERC Allowable Updates

During the remainder of 2004 PC Solutions is offering the DMERC DMEPOS quarterly allowable update service at no charge!

Your software has a file called HCPCS or Medicare allowable file. It contains over 2000 DMERC items, the modifiers, and allowable for all 50 states plus territories.

We obtain this file from **CMS Files for Download for Medicare Payment Systems(formerly PUF Files)** **CMS Files for Download for Medicare Payment Systems(formerly PUF Files)**

The web link is:

<http://www.cms.hhs.gov/providers/pufdownload/default.asp>

Our programmers convert the file for use with the software send this file to you via email. The current file recently shipped was called "Revised for the July 2004 release" The revision includes the changes identified in CR3253, [R171CP](#).

We are preparing the new quarterly file called "Revised for the October 2004 release. The revision includes the changes identified in CR3377, [R272CP](#)." Keep a lookout in your email.

WHY IS THIS INFORMATION IMPORTANT?

The DMEPOS file has two functions in the software, first it gives you a huge reference list of Medicare codes and modifiers used. Plus of course are the allowable.

Second, once the file is installed, you can run a utility called Allowable update to automatically put the DMEPOS allowable for your state into the Allowable field in the Item file (or update it). The allowable field in the Item file is used for CMN printing, Claim tracking, Reconcile reports and more.

Did you know your software has a Security system?



When you enter your login and password you are using the security system. Many of our clients have one login and one password, this provides little or no protection from malicious behavior or viewing.

It is PC Solutions recommendation that at a minimum you have two logins one for the business owner (supervisor) and one for the Employee User (operator).

The whole idea of Hipaa and information protection is to guard valuable health data from prying eyes or from individuals that do not have rights to view privileged information. Why let the stock person see anything other than Items, or why let the part time billers have access to financial information?

DMEFree and RxDME2000 have a simple yet very effective security system. Here's how it works...

The Owner or person assigned as Supervisor goes into the software, selects the Users menu and then selects Maintain User Security. The supervisor adds new user(s) makes them operators and then issues them either ALL (full) ACCESS or NO ACCESS. We suggest you give Operators ALL ACCESS.

The supervisor also assigns them a logon code, and initial password. Once the Operator is in the software they can create their own password.

Now comes the neat part, when you are logged in as supervisor you can go to most any screen or menu and press the CTL-F8 key combination to bring up the SET USERS ACCESS screen. You can turn on or off the functions you wish or do not wish that operator access to. For example: If you bring up the Doctors table, you will see all the doctors listed, press CTRL-F8, on the access screen Click on Access, turn it to No.

Now exit the software and log in using the Operators login and password, go to the Doctors table, you get the message: "Your access to this part of the program has been restricted".

In the security scheme you can prevent access to Menus, Tables, Forms and often times buttons within a screen.

Give it a try, Hipaa will be happier!

QUESTION

CAN SUPPLIMENTAL CLAIMS BE FILED ELECTRONCIALLY?

Good question, but not an easy answer. You already know PC Solutions clearinghouse bills primary claims for DMERC, Medicaid's, Blue cross and almost every commercial payer in the USA.

A supplemental claim is one that the primary portion has been processed and paid(?) and the balance due needs to be billed to the secondary payer.

We have been looking for interest among our clients and have been working with our programmers to come with a way to send secondary supplemental claims electronically.

The ability for insurance companies to accept secondary claims seems to be the big variable. Some payers can read the amount paid and others can't.

If you are interested in sending a few supplemental claims for testing purposes we would be glad to work with you. Perhaps your secondary payer will be one of the easy ones!

Real Time Patient Eligibility Checks now available!

Before you bill expensive equipment do you check to make sure the patient is eligible and qualifies for these benefits? Time on the phone with insurance companies is costly.

PC Solutions offers an Online eligibility verification service, provides instant access to patient eligibility data from participating commercial and government health plans.

Key Advantages

- ⦿ Rapid access to patient eligibility information in a Web browser.
- ⦿ Reduces time-consuming calls to insurance companies.
- ⦿ Improves patient service by helping you select consulting providers and services on your patient's health plan.
- ⦿ Maintains patient confidentiality through a secure network.
- ⦿ Ensures up-to-date demographic and insurer information by pulling data directly from participating health plans.
- ⦿ Over 300 Live Payers with many more on the way!

Payer list available at:

<http://www.dmefree.com/Eligibility.htm>

PC Solutions Real-Time Eligibility product gives providers quick and easy access to eligibility data through any PC with Internet Explorer and a connection to the Internet.

You simply log on through our Hub web site, select a payer from the list, and enter a small amount of request data (provider IDs and types are defaulted from the user configuration).

The response may be viewed in "Real-Time" by waiting for the response, or you may choose to view responses from the "Work List".

Responses are dynamically displayed and show everything that the payer returns. Once a response has been viewed, it can be easily printed for future reference.

Price: \$2.00 US Dollars per Eligibility check

Additional note: We are also working with one of our business partners to offer Address and Credit checks to ensure the patient has the ability to pay the copay.

New York Medicaid

New York Medicaid is being converted to Hipaa Ansi format. NY Medicaid has unique requirements, requiring non standard data responses

We are seeking clients in NY willing to send in test claims.