

mumms® PAS

Recording Patient Level of Care Changes

The Level of Care screen has been updated and modified.

After clicking to add a new record, you can use the drop down to choose the appropriate Type of Care.

If choosing In-Patient, LOC type 2 or 5, the screen will display with the default billing status of “Billable at the In-Patient Rate”.

There is a new on-screen option to Change the Billing Status.

The POP UP window for billing options for GIP now only appears if user clicks the new Change Billing Status button. That is, the current LOC billing status is displayed and the user has an option to change it.

Demonstration Database-NOLA (binDEMO1) Wchloc 2.2

Patient Level of Care Change

5395 Martin Comstock

Type of Care **2** Inpatient-Contract
Location
Carrier
Authorization#

Begin
End

Change Billing Status

Billing status is set to bill at inpatient rates

Level of Care Type	From	To	Hours	Location	Bill	Q	rate	CoPay	Carrier
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If wanting to change the billing status, click the Change Billing Status button. The pop up box will appear with the available billing options.

Patient Level of Care Change

5395 Martin Comstock

Type of Care 2 Inpatient-Contract

Location

Carrier

Begin

End

Billing status is set to bill at inpatient rates

Bill status of inpatient LOC

Bill at inpatient rates

Bill at routine rates

Do not bill for this day

POPllocBill_1 (V1)

Level of Care Type	From	To	Hours	Location	Bill	Q	rate	CoPay	Carrier

If you change the billing status, the screen will re-display indicating the change.

Patient Level of Care Change

5395 Martin Comstock

Type of Care 2 Inpatient-Contract

Location

Carrier

Authorization#

Begin

End

Billing status is set to bill at routine

ANOTHER NEW FEATURE: If choosing Respite, LOC type 6 or 7, the screen will display with the default billing status of "Billable at the Respite Rate". You can then click the Change Billing Status button, if you want to change it to bill at the Routine rate.

NOTE: This option will only be available if the Bill Respite at Routine Rate option is checked in Extensions-> Setup->Billing.

If choosing Nursing Home, LOC 11, the screen will display with the default billing status of "Bill to Medicaid". You can then click the Change Billing Status button if you want to change it.

Demonstration Database-NOLA | binDEMO1 | Wchloc 2.2

Patient Level of Care Change

5395 | Martin | Comstock

Type of Care: **11** | Nursing Home | Facility is billing Medicare Part A

Location: | Begin: |

Carrier: | End: |

Authorization#:

Billing Rate: | Bill CP to Pat:

CoPay Rate: | CoPay Type:

Billing status is set to bill to Medicaid

Level of Care Type	From	To	Hours	Location	Bill	Q	rate	CoPay	Carrier

You will see the fields to enter the per diem and co-pay amounts only if the room and board is set as billable. If not billable, then those fields will not be displayed.

Demonstration Database-NOLA | binDEMO1 | Wchloc 2.2

Patient Level of Care Change

5395 | Martin | Comstock

Type of Care: **11** | Nursing Home | Facility is billing Medicare Part A

Location: | Begin: |

Carrier: | End: |

Authorization#:

Billing status is set to not bill Medicaid

Also, if the room & board is billable, and there is only a single Medicaid carrier in your Masters->Insurance carrier listing, and that carrier is not already set as a carrier for the patient the program will prompt to confirm it is adding it.

If you have multiple Medicaid carriers, then you need to use the Carrier dropdown to pick the proper carrier for the NH stay being entered.

Demonstration Database-NOLA IbinDEMO1 Wchloc 2.2

Patient Level of Care Change

5395 Martin Comstock

Type of Care	11 Nursing Home	<input type="checkbox"/> Facility is billing Medicare Part A
Location	Piketon Nursing Center	Begin 02/02/09
Carrier	Medicaid	End
Authorization#	Medicaid W D L	
	Medicaid 2 W D	

Change Billing Status

Billing Rate 125.00

CoPay Rate 500.00 CoPay Type T

Billing status is set to bill to Medicaid

DELETE

OK

ANOTHER NEW FEATURE: Additionally, when creating the LOC 11 record there is now a field to indicate whether or not the patient is in the NH under Medicare Part A for the NH. Checking this box will change the QCode on the claims from a Q5003 to a Q5004.

The applicable QCODE information is also displayed in the grid.
 When the Part A option is not checked, the QCode will display as "03"

Level of Care Type	From	To	Hours	Location	Bill	Q	rate	CoPay	Carrier
Nursing Home	02/02/09	*** / ** / **	N.A.	Piketon Nursing Center	Y	03	125.00	500.00	Medicaid

When the Part A option is checked, the QCode will display as "04"

Demonstration Database-NOLA binDEM01 Wchloc 2.2

Patient Level of Care Change

5395 Martin Comstock

Type of Care: **11** Nursing Home Facility is billing Medicare Part A

Location: **Piketon Nursing Center** Begin: **02/02/09**

Carrier: **Medicaid** End: ***** / ** / ****

Authorization#:

DELETE

OK

Change Billing Status

Billing Rate: **125.00**

CoPay Rate: **500.00** CoPay Type: **T**

Billing status is set to bill to Medicaid

Level of Care Type	From	To	Hours	Location	Bill	Q	rate	CoPay	Carrier
Nursing Home	02/02/09	*** / ** / **	N.A.	Piketon Nursing Center	Y	04	125.00	500.00	Medicaid