Division of Public and Behavioral Health

Policy

Control #	Rev.	Type	Title	Effective Date	Page
			Generating the 837 File *Used for Electronic Billing*	**2016-06-19**	1 of 11

1.0 Policy

It is the Policy of the Division of Public and Behavioral Health (DPBH), Substance Abuse, Prevention, and Treatment Agency (SAPTA) that all providers, in accordance with 505 (a) of the Public Health Service Act (42 US code 290aa-4) which directs the Administrator of the Substance Abuse and Mental Health Services Administration (SAMHSA), to collect items including admission and discharge data.

The electronic billing process starts with creating the 837 file which includes the following forms, in the following order:

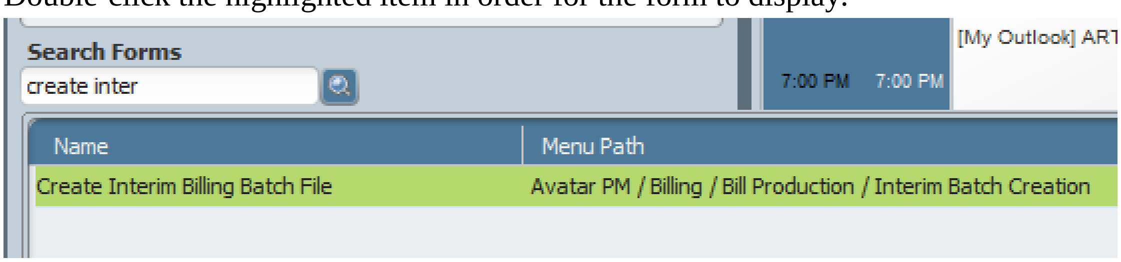
1. **Create Interim Billing Batch File**
2. **Print Bill – to view charges**
3. **Close Charges**
4. **Electronic Billing**
    - Sort – NO CLAIM
    - Run Report – Review/fix Errors
    - Sort – CLAIM
    - Create File

2.0 Procedure

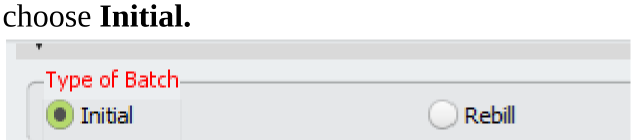
<u>CREATE INTERIM BILLING BATCH FILE</u>

1. The billing process begins with the **Create Interim Billing Batch File** form.

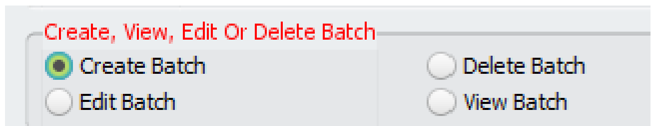
2. From the Avatar Home Screen, search for the **Create Interim Billing Batch File** form in the **Search Forms** widget.
    a. Double-click the highlighted item in order for the form to display.



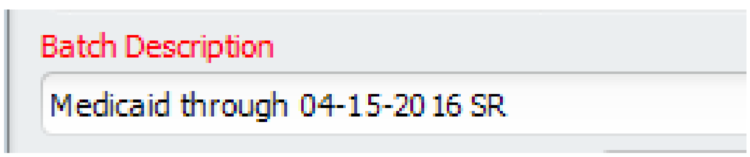
3. In the **Type of Batch** field, choose **Initial.**



4. In the **Create, View, Edit Or Delete Batch** field, choose **Create Batch**:
   a. **Create** – choose this to create a new batch
   b. **View** – choose this to view a previously created batch
   c. **Edit** – choose this to edit the batch if clients need to be taken out (questions contact the Avatar HelpDesk)
   d. **Delete** – choose this to delete a previously created batch (be very careful batches are not deleted if they've been closed and claimed)

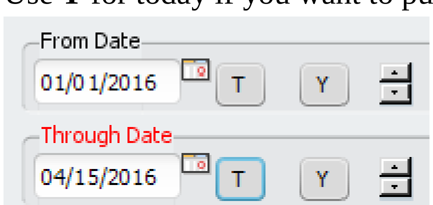


5. In the **Batch Description** field, name your batch.
   a. Include the Guarantor Name, Date (or time period), and your initials. This will help track previous batches.

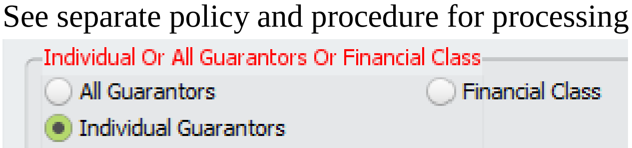


6. Enter the **From Date.**

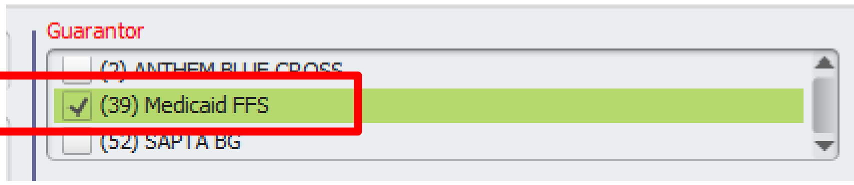
7. Enter the **Through Date.**
   a. <u>**This is the last date of the billing period that you will be batching claims from**</u>.
   b. Use **T** for today if you want to pull all open claims without a strict end date.



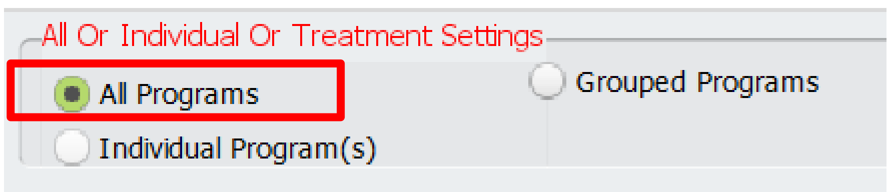
8. Choose **Individual Guarantors** in the **Individual Or All Guarantors Or Financial Class** field.
   a. <u>Always sort the billing batches by guarantor. Never group them together. (Except for SAPTA RFRs)</u>
   b. See separate policy and procedure for processing the SAPTA RFRs.



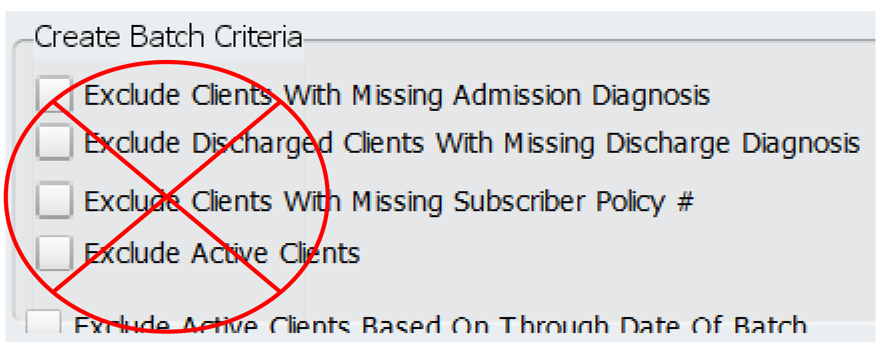
9. Choose the specific guarantor in the **Guarantor** box.
   a. Scroll down as needed.



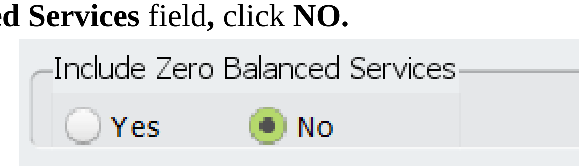
10. Choose **All Programs** in the **All Or Individual Or Treatment Settings** field, unless there is a specific need by the facility to break out the billing by programs.
    a. **All Programs** – choose this



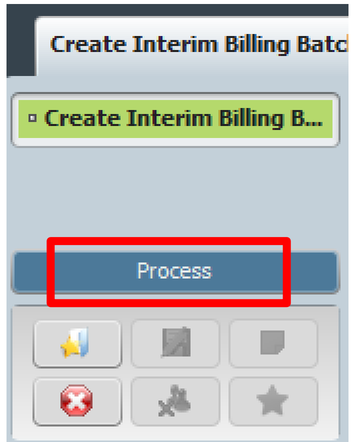
11. In the **Create Batch Criteria** field, do not check any of the choices. LEAVE THEM ALL UN-CHECKED.



12. In the **Include Zero Balanced Services** field**,** click **NO.**



13. Click **Process** on the left hand side.



14. Once the batch has processed, it will generate a report of all pending charges for that specific guarantor for the specific timeframe requested. Report will reflect the following data:
    a. <u>**Batch #** - located in the header of the report. This number will be very important to complete the rest of the billing processes.</u>
    b. **Name of Batch** – located in the header of the report.
    c. **Batch Created For** – this is the **through date** for the batched file
    d. **Guarantor** – based on the guarantor selection in step 6.
    e. **EP # -** episode number for the service
    f. **Program** – level of service
    g. **Client** – client ID and name will display
    h. **First Service Date** – date of service for the charge specified
    i. **# of Days** – number of days that service was billed for

PAGE : 1 | Quest Counseling and Consulting Inc | RUN DATE : 09/22/15

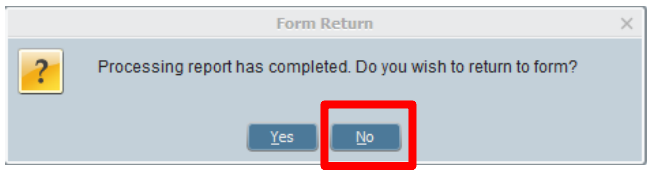
3500 Lakeside Court, Suite 101
Reno , NV 89509-4843
INTERIM GUARANTOR BILLING FILE
BATCH # : 27
Test Medicaid FFS Batch-AUGUST 2015-SR
BATCH CREATED FOR : 08/30/2015

GUARANTOR	EP #	PROGRAM	CLIENT	FIRST SERV DT	# OF DAYS
39 - Nevada M	1	1 - Level 1 - Outpatient S	41 - SMITH,JOHNNIE	07/10/2015	1
39 - Nevada M	2	1 - Level 1 - Outpatient S	42 - BLOW,JOSEPH	08/06/2015	1 D
39 - Nevada M	2	1 - Level 1 - Outpatient S	44 - WILSON,OWEN	08/06/2015	1

15. Print or save as needed.
    a. **File** – save document
    b. **Print** – print document

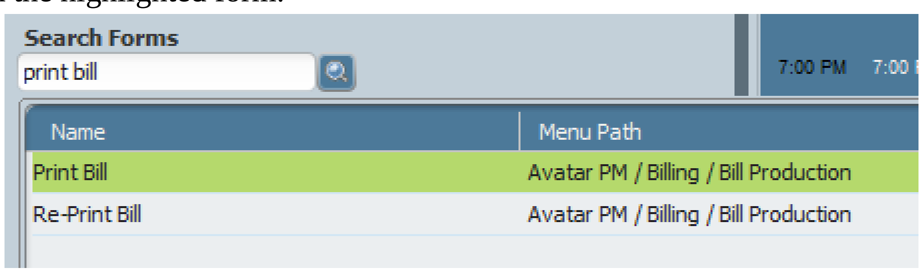
16. When complete, click **Dismiss** at the bottom right hand corner of the screen.

17. The **Form Return** box will appear. Click **NO.**



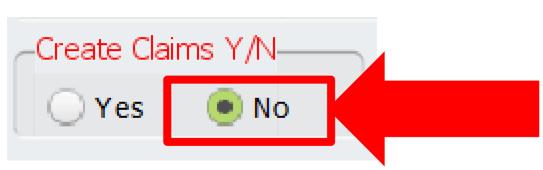
<u>PRINT BILL</u>

18. From the Avatar Home Screen, search for the **Print Bill** form in the **Search Forms** widget.
    a. Double-click the highlighted form.

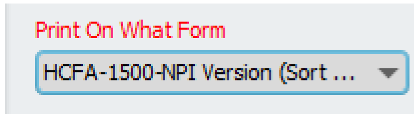


19. The **Print Charges Thru** date must match the date selected on the **Create Interim Billing Batch File** in step 7 above.

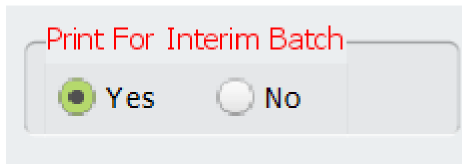
20. In the **Create Claims Y/N** field, choose **NO.**
    a. <u>Claiming the charges will be done in a further step. First, the charges must be viewed. It's crucial that you choose **NO** here.</u>



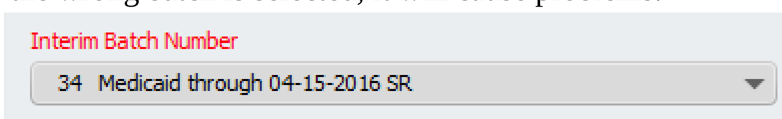
21. In the **Print On What Form** field, always choose **HCFA 1500 – NPI Version (Sort by Practitioner/Service Consolidation).**



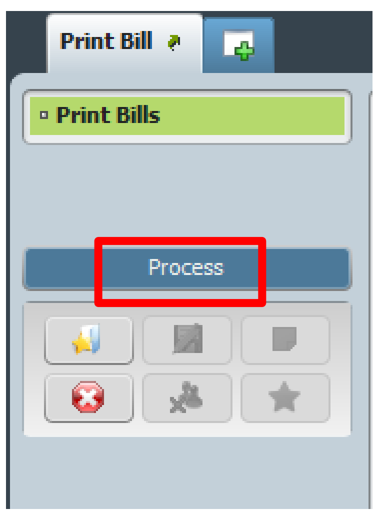
22. In the **Print For Interim Batch** field, choose **YES.**
    a. This will open up the field **Interim Batch Number.**



23. In the **Interim Batch Number** field, choose the interim batch that was created in the previous steps.
    a. Double-check the batch number, batch name, date/timeframe, and initials to ensure you are selecting the correct batch. If the wrong batch is selected, it will cause problems.



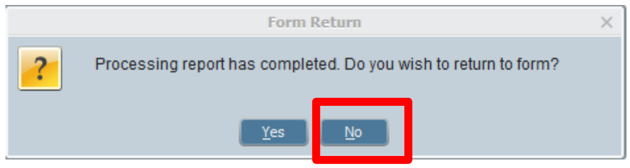
24. Click **Process** on the left hand side.



25. The screen will populate with the HCFA 1500 forms for the various claims.
    a. NOTE: this will not be the exact format that is sent over via the 837 electronic file. Therefore, the layout of the data is not crucial.

26. Click **Dismiss** when complete.

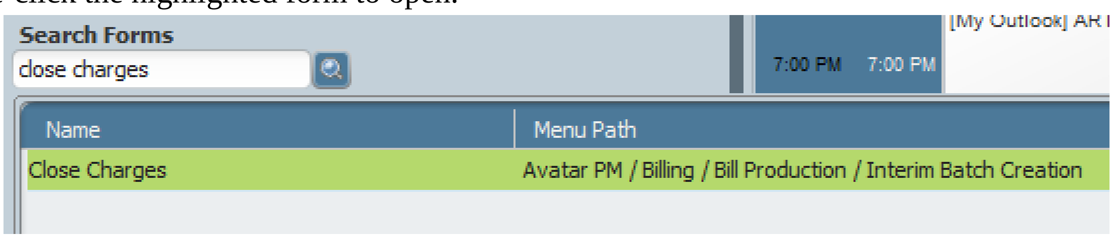
27. The **Form Return** box will appear. Click **NO.**



CLOSE CHARGES

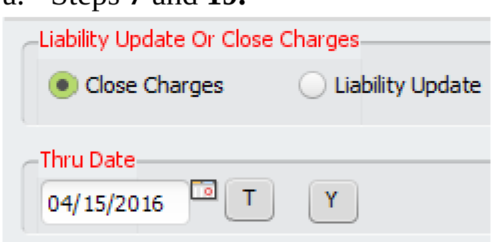
28. Closing charges prepares the services to be claimed.

29. From the Avatar Home Screen, search for the **Close Charges** form in the **Search Forms** widget.
    a. Double-click the highlighted form to open.

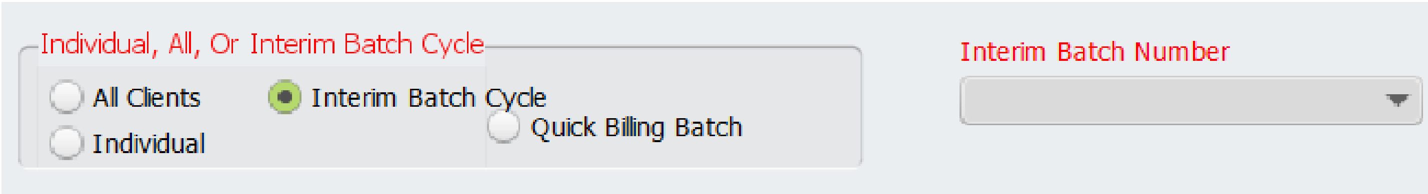


30. In order to close charges, click **Close Charges** in the **Liability Update Or Close Charges** field.

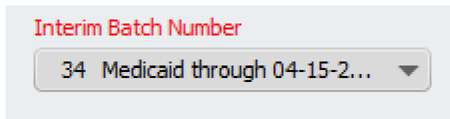
31. Enter the same **Thru Date** that has been entered in the following steps above:
    a. Steps **7** and **19.**



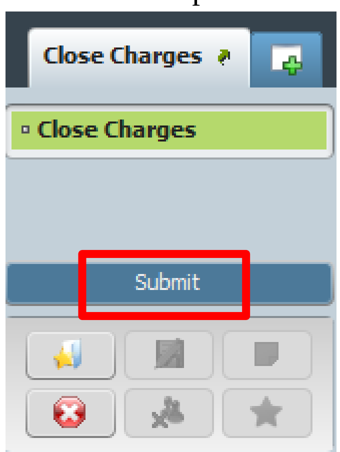
32. Always choose **Interim Batch Cycle** from the **Individual, All, Or Interim Batch Cycle** field.
    a. This will open up the **Interim Batch Number** field.



33. Choose the **Interim Batch Number** from the dropdown menu.
    a. Ensure this is the correct batch that you've been working with on previous steps. Double-check the batch #, batch name, date/time period, and initials.

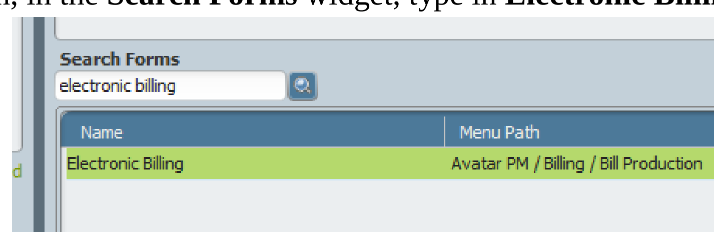


34. Click **Submit** on the left hand side of the form to complete the **Close Charges** form.



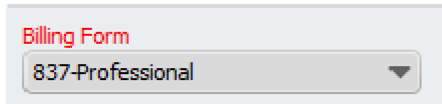
ELECTRONIC BILLING

35. From the **HOME** screen, in the **Search Forms** widget, type in **Electronic Billing.**

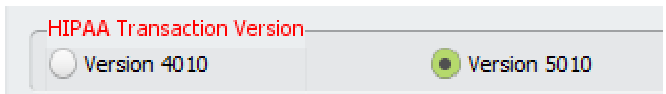


36. The file creation takes place by navigating through this form.

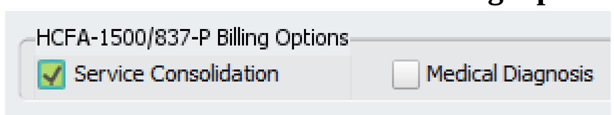
37. First, choose a **Billing Form.**
    a. Always choose **837-Professional.**



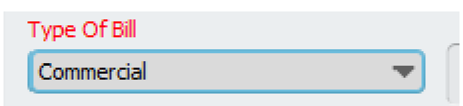
38. Always choose **Version 5010** in the **HIPAA Transaction Version** field.

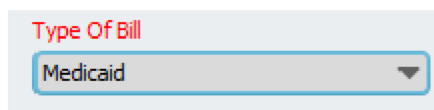


39. Choose **Service Consolidation** from the **HCFA1500/837-P Billing Options.**



40. In the **Type of Bill**, choose from the two most popular choices:
    a. If you are unsure, please contact the Avatar HelpDesk.
        - Commercial
        - Medicaid





41. In the **Individual Or All Guarantors** field, choose **Individual.**

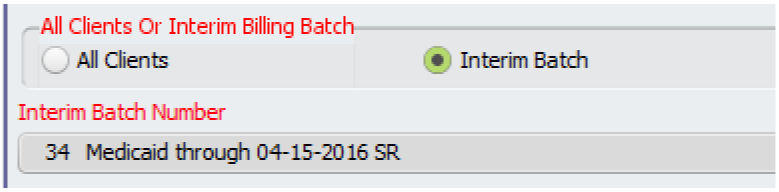
42. The **Guarantor** field will open.
    a. Choose the guarantor that was previously batched.

43. **Billing Type** – always choose **Outpatient.**

44. In the **Billing Options,** choose **Sort File.**
    a. This will open up more fields to the right.

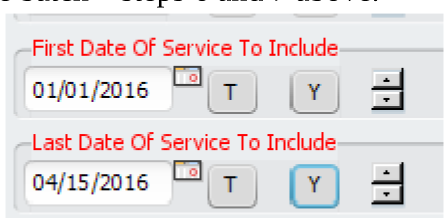
45. Enter in a **File Description** to help keep the descriptions separate from all the 837 files.

46. Choose **Interim Batch** and then select the batch from the **Interim Batch Number** field.



47. **DO NOT CREATE CLAIMS THE FIRST TIME YOU SORT THE FILE.**

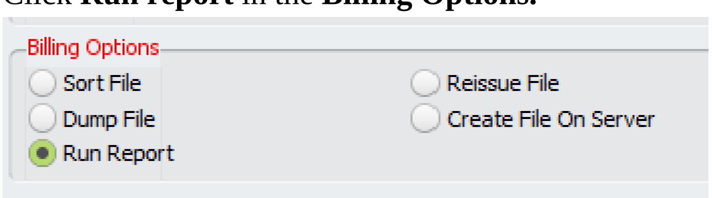
48. Choose the **First Date of Service to Include** and the **Last Date of Service to Include** based on the dates that were entered to create the batch—steps 6 and 7 above.



49. Click **Process** on the left hand side to sort the file.

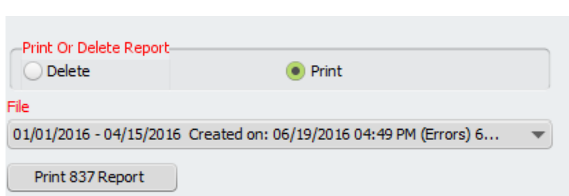
50. The next step is to **Run Report.**

51. Click **Run report** in the **Billing Options.**



52. On the right hand side, click **Print.**

53. Choose the file (easiest way to find is based on the time).
    a. Click **Print 837 Report.**

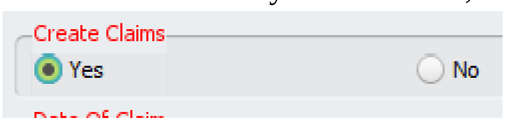


54. This report will display the submission data (at the top) as well as the errors that need to be fixed.

55. Navigate through the errors (contact the HelpDesk if assistance is needed.)

56. If errors are fixed, the **Sort File** step will need to be done again (see step 44 above.)

57. When the file is ready to be claimed, complete steps 44-48, except step 47 you WILL claim them.

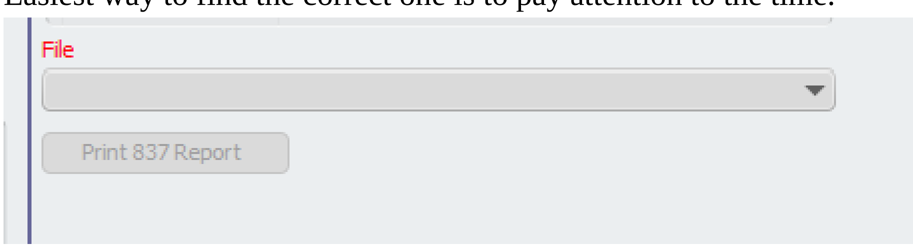


58. The **Date of Claim** will always be the LAST DAY OF THE MONTH OF THE THROUGH DATE.
    a. If the claims are through 04-15-16, the **Date of Claim** will be 04-30-16.
    b. If the claims are through 04-30-16, the **Date of Claim** will be 04-30-16.
    c. If the claims are through 05-02-16, the **Date of Claim** will be 05-31-16.

59. When completed, click **Process** on the left hand side.

60. Now that the file has been sorted and claimed, the next step is **Creating the File on Server.**
    a. Click **Create File on Server.**

61. Choose the file from the **File** field at the bottom right hand side of the screen.
    a. Easiest way to find the correct one is to pay attention to the time.



62. Contact the SAPTA Avatar HelpDesk to retrieve the 837 file from the Netsmart Server.
63. The file will be retrieved and placed on the SFTP site (due to HIPAA practices relating to client data).
64. Notification will be sent to the facility that the file is available.
65. The facility will retrieve the file and submit to their clearinghouse, etc.
66. The next step to this process is receiving the 835 file back with payment.