

MediChat Newsletter – May 2012

For your Medisoft Patient Accounting Program

5010 UPDATE

CMS has extended the deadline until 6/30/12

Don't Wait!- other payers are still moving forward, you could cause a cash flow issue if you delay.....

Version 17 is the ANSI 5010 Compliant program needed for compliance.

This version provides the numerous missing fields that may be required to generate a 5010-compliant claim.

Thank you for all your patience as we worked diligently to answer all your questions as quickly as possible and get your office trained using Revenue Management. **We appreciate your business!**

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MAY 2012 SUPPORT PROMOTION!

Take advantage of our rollback pricing!

Since many of you have needed support more than in the past, we are offering a \$99.00 per hour special.

Support needs to be in place with us before you call.

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The Service Pack 3 update for Version 17 was just released 4/25/12

Please visit our Downloads page, V17 in the drop down menu for a pdf document on the enhancements

Due to the Large size of this file it is not downloadable from our website;

There will be a \$25.00 fee to mail you a DVD – please contact Lee.

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REVENUE MANAGEMENT - CHECK WEEKLY

Check this at least on a weekly basis in Claim Management: Click on the **List Only Button** Then under **Claim Status** - Choose a status below one at a time:

- Hold
- Rejected
- Challenge
- Alert
- Pending

There might be claims that need to be corrected & resubmitted.

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CLEARINGHOUSE CORNER

BCBS of IL providers

After 5/3/12, only 5010 837 claims will be accepted

After 5/12/12, only 5010 835 ERA files will be sent to you.

Edit your Availity EDI preferences

On the Claim/Payment Advice Tab - Change your Version to 5010A1

NOTE: You may need to update your version of MREP (Medicare Remit Easy Print software) That is running on your computer as well, update to Version 3.2

If needed, you can get the updated version on the CMS Weblink: **www.cms.hhs.gov**

Illinois Medicaid & Availity

If claims between September 2011 thru March 20, 2012 are not on file;
Please rebill- there were issues happening during this timeframe.

HUMANA

Effective April 26, 2012, Humana will begin enforcing edits for diagnosis codes and their pointers. This may result in rejections being returned on your claims.

- If your rejection message is, "Error 3939607 – Value of sub-element HI01-02 cannot be verified because there were no pointers to this code," you can correct this by submitting only the diagnosis codes that are necessary for the claim and ensure they are being pointed to with a diagnosis code pointer from a service line and resubmitting the affected claim(s).
- If your rejection message is, "Error 39395F6 – Value of sub-element SV107-03 is incorrect. Expected value is 1 through 2 inclusive," you can correct this by making sure all diagnosis code pointers for the claim are actually pointing to a diagnosis code and resubmit the affected claim(s).

RELAY HEALTH

5010 known issues interactive map can be found on **www.collaborationcompass.com**

Under 5010 Tools & Resources

- Summary of known 5010 issues by payer name, issue, date and resolution date.
- Hover view with state-by-state and national visibility.

Latest Build of Revenue Management: Look for .172 at the end of the number on the splash screen that opens- stay updated for fixes to defects, bugs and other updates to this program.

**Note this changes as needed from McKesson

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Medisoft Clinical

Medisoft Clinical is a complete practice management/electronic medical record (PM/EMR) solution that works seamlessly together to minimize practice disruption.

Keep your current Medisoft and Office Hours running and clip on Patient Records using Medisoft Clinical.

New price structure to bundle all required software for Meaningful Use along with Medisoft & Office Hours.

Learn more about the stimulus incentives and Medisoft Clinical by visiting our website: www.ihctech.com/Medisoft-Clinical.htm or by calling us directly.

Contact our office for pricing and to schedule a demo.

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Practice Choice - New Product Released!

A web based and McKesson hosted billing and EMR solution. Claims, remittance and eligibility are included in the monthly fee thru the Relay Health Clearinghouse.

Competitive monthly pricing and meets stimulus requirement if needed.

Contact our office if you or someone you know may benefit from this program and need further information.

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ICD10 AND VERSION 18

ICD10 codes will be required on claims for **dates of service** on or after 10/1/13. This means you will be using a dual diagnosis coding system until all your claims prior to 10/1/13 are paid.

Some insurance companies, such as auto carriers, will be exempt from ICD10. This may require you to submit claims using ICD9 to the auto carrier and ICD10 to another insurance company for the same patient.

Version 18 will have a dual code feature allowing coding of ICD9 **and** ICD10.

Version 18 is set to release late 2012 - all other versions below version 18 will not have functionality to code with ICD10.

Paper superbills will not work well using ICD10---a one page superbill becomes 10 pages using the new code set- **ipad superbill for Medisoft is coming!**

Pricing is not available at this time and we will be communicating to you as the sales promotions begin.

START NOW!-

Start learning the ICD10 codes and begin seeing how your practice will be affected.

NOTE: Health & Human Services (HHS) has asked for a 1 year extension to the ICD10 mandate pushing this back to **October 1, 2014 instead of 2013**. We are not sure if this has been approved or not.

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STATEMENTS MADE EASY!

Save time and money!

Eliminate printing, folding, stuffing, sealing, metering, mailing and troubleshooting.
Obtain professional designs, quality processing, advanced features and online controls.

The BillFlash statements feature is now integrated into Version 17
Have past statements at your fingertips in a flash!

To learn more - visit our website, click Bill Flash or call.

Coming Soon - Summer 2012- estatements (emailed) to your patients for .25/statement with the ability to sign up for epay- allowing your patients to pay you electronically via the BillFlash website. Stay tuned for more....

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MD COLLECT

**How much of your patient receivable is 90 days past due?
What can you do to accelerate the flow of cash at your practice?**

Integrated Health Care introduces MD-Collect for Medisoft. A new approach to patient collections that accelerates cash flow, and reduces staff time. An integrated software and service that makes managing past due receivables easy while protecting patient relations.

MD-Collect facilitates consistent dialogue while presenting patients with more opportunities to resolve their balance. Courteous, convenient, and secure electronic payment options are included with every communication. Payments are deposited directly to practice's bank account.

Contact us for information. Our website's home page is also being updated with information.

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This newsletter is from:

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