

PC-ACE Quick Reference Guide for Part B Providers



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Section 1 - Getting Started Using PC-ACE

This guide is to be used to assist in setting up PC-ACE for Medicare A/B claim submission to National Government Service (NGS).

Minimum System Requirements

- SVGA monitor resolution (800 x 600)
- Windows 10, Windows 8.1, Windows 7 or Vista operating system
- Adobe Acrobat Reader Version 4.0 or later (for overlaid claim printing)

Note: When the Windows "Large Fonts" display setting is enabled, the screen resolution must be 1024×768 or higher. The CMS-1500 claim form will not display properly at lower screen resolutions.

PC-ACE Part B Full Install Instructions

Note: These instructions are designed for use with Microsoft's Edge, Google Chrome or Firefox. The use of other browsers is not supported by the NGS EDI Help Desk.

Steps 1–7 only need to be completed if you initiate the install from the NGS website home page.

- 1. Open an Internet browser and go to https://www.NGSMedicare.com.
- 2. Select Accept when presented with the Attestation page.
- 3. On the NGS landing page, select your line of business and state then select Enter.
- 4. Select **RESOURCES** dropdown at the top of the web page.
- 5. Select EDI Solutions.
- 6. Select EDI Software PC-ACE then select Download PC-ACE to download the software.
- 7. On the **PC-ACE Download** form, complete all required fields marked with an asterisk (*).
- 8. Under Select Your Download Below, select the radio button option for PC-ACE Full Installation Version X.XX (Institutional and Professional) PC-ACE users.
- 9. Select the Submit Request button.
- 10. Please note the installation password NGSMAC1 at the top of the page.
- 11. Once you have noted the installation password, select the **Download** button to start the download.
- 12. A message will appear: 'What do you want to do with PC-ACE Setup?'. Select Save as.
- 13. On the left side of the 'Save As' dialogue box, select the Desktop button to save the file to your desktop, then select Save.
 Note: If you are using Windows 7 or 8, the buttons on the left may not be present. If this is the case, please select Desktop from the Save As: dropdown box.
 Note: NGS does not support the installation of PC-ACE on a network. The file will begin to download to your desktop.
- 14. A message will appear: 'Download complete'—close the download dialogue box and minimize your Internet browser in preparation for step 17.
- 15. Launch the **setup.zip icon**; your unzip wizard should open. **Note:** Since unzip utilities vary, you are responsible for getting this file unzipped to your desktop. Please follow the instructions for your unzip utility.
- 16. Double Click **setup.exe** icon on your desktop, which will open the file.

- 17. The Wise Installation Wizard will begin.
- 18. Installation code is NGSMAC1.
- 19. At the Welcome window, select Next.
- 20. At the Drive Selection window, select Next.
- 21. At the Start Installation window, select Next.
- 22. Follow the online instructions until **Finish** is selected.
- 23. To access PC-ACE, select the **PCACE icon** and enter the default user ID **SYSADMIN** and the password **SYSADMIN**.
- 24. We recommend downloading additional material to assist you with PC-ACE. After the software is successfully downloaded, revisit the EDI Software web page for available documentation.

PC-ACE Part B Upgrade Instructions

Please Note: Prior to performing this upgrade it is recommended that a backup of your current version of PC-ACE is performed. If the version of PC-ACE currently installed is more than two versions behind the available version with NGS, please upgrade as soon as possible.

Note: These instructions are designed for use with Microsoft's Edge, Google Chrome or Firefox. The use of other browsers is not supported by the NGS EDI Help Desk.

- 1. Open an Internet browser and go to https://www.NGSMedicare.com.
- 2. Select Accept when presented with the Attestation page.
- 3. On the NGS landing page, select your line of business and state then select Enter.
- 4. Select **RESOURCES** dropdown at the top of the web page.
- 5. Select EDI Solutions.
- 6. Select EDI Software PC-ACE then Download PC-ACE to download the software.
- 7. On the **PC-ACE Download** form, complete all required fields marked with an asterisk (*).
- 8. Under Select Your Download Below, select the radio button option for PC-ACE Upgrade (Institutional and Professional) PC-ACE users Version X.XX.
- 9. Select Submit Request button.
- 10. Please note the installation password **NGSMAC1** at the top of the web page.
- 11. Once you have noted the installation code, select the **Download** button to start the download.
- 12. A message will appear: Do you want to open or save this file? Select Save
- 13. On the left side of the Save In dialogue box, select the Desktop button to save the file to your desktop, then select Save. Note: If you are using Windows 7 or 8, the buttons on the left may not be present. If this is the case please select Desktop from the Save in: dropdown box. Note: We do not support the installation of PC-ACE on a network.
- 14. The file will begin to download to your desktop.
- 15. A message will appear: **Download complete**. Close the download dialogue box and **minimize** your Internet browser in preparation for step 16.
- 16. Launch **pcaceup.zip**; your unzip wizard should open. **Note:** Since unzip utilities vary, you are responsible for getting this file unzipped to your desktop. Please follow the instructions for your unzip utility.
- 17. Double Click **pcaceup.exe** icon on your desktop.
- 18. The Wise Installation Wizard will begin.
- 19. Installation code is NGSMAC1, (not case sensitive) and select OK.

- 20. A message will appear asking if a system backup has been performed.
 - a. If the answer is **yes**, select **Yes** to proceed with the update
 - b. If the answer is **No**, make a backup as follows:
 - Select the No button, and then click the OK button in the Update Cancellation Notice window; the installation wizard will close
 - Launch PC-ACE and, on the main toolbar, select the System Utilities button (last button on the right)
 - On the **Backup/Restore** tab, select the **Backup** sub tab
 - If there is a path to your normal backup folder in the Destination Drive or Folder field, select the Start Backup button and proceed as you normally do for a backup, then return to step 4
 - If the Destination Drive or Folder field is empty, select the small button to the right of that field (has 3 dots on it), browse to the folder you wish to save your backup to and select the Open button, then select the Start Backup button
 - In the Confirm window, select the OK button; wait while the backup completes
 - After the backup completes, an **Information** window will appear stating that your backup has completed successfully; select the **OK** button.
 - Close PC-ACE and return to step 12.
- 21. Follow the online instructions until **Finish** is selected.
- 22. The **PC-ACE Backup Reminder** dialogue box will appear advising that the update was completed successfully. It will also recommend that you make a new backup of PC-ACE now that it has been upgraded to the current version (you should perform this backup **after** you have confirmed that you can open a claim and/or a patient file without receiving an error message); select **OK**.
- 23. To access PC-ACE, select the **PCACE** icon and enter the default user ID **SYSADMIN** and the password **SYSADMIN**.
- 24. We recommend downloading additional material to assist you with PC-ACE. After the software has been successfully downloaded, revisit the EDI Software webpage for available documentation.

Logging Into PC-ACE for the First Time

1. Upon installation of the PC-ACE software, from the Desktop click on the **PC-ACE** icon to open the software (Figure 1).



2. Enter **"SYSADMIN"** in the **User ID** and **Password** fields in the **Sign On** box and select **OK** (Figure 2).

Sign On
User ID: SYSADMIN
Password: ******
Cancel

Important: If concerned about controlling User access, the default User's password can be changed under Security and Maintenance. For instructions on changing User access, please use the PC-ACE User's Manual for instructions on setting up individual users. Note: NGS is unable to change, modify or reset any individual passwords once they have been setup in your PC-ACE software.

Online Help Feature

The PC-ACE program has an online help feature that can be accessed from the PC-ACE Claims Processing System main menu.

1. Select Help, and then select Help Topics (Figure 3).



- 2. Select the Index tab (Figure 4).
 - a. To search for a particular subject, type a few letters of the word.
 - b. Select the index entry to be reviewed, and select Display. That portion of the topic will appear. Review or Print the information.



Figure 4

Section 2 - Reference File Maintenance

Reference File Maintenance records must be completed in order to begin utilizing the PC-ACE Software.

1. Select the **Reference File Maintenance** folder (yellow folder) (Figure 5).



Figure 5

Patient Setup

The **Patient** tab allows the addition and maintenance of patient information, including the patient's primary and secondary insured details.

- The setup of the Patient's information is **optional**. The patient information will not be accessible during claim entry or claim import if the patient database is not set up.
- The **complete patient list** will be accessible during **claim entry** using the variable-list lookup feature if the patient record is set up. When a patient is selected from the lookup list during claim entry, all applicable patient information will **auto populate** to the **appropriate claim form fields**.
- Once the patients are added, the Patient tab provides a convenient **Sort By** selection that quickly sorts the patient list by **Patient PCN** or **Patient Name** under the List Filter Options (Figure 6). (Use the F1 function key for more information).

Ē	Reference File Ma	intenance						1
F	ile View Reports							
	Patient Payer Prov	ider (Inst) Provider (Prof)	Codes/Misc					
	PCN	Last Name	First Name	MI	DOB	LOB	▲	
	D0EJN9900000A	DOE	JOHN	L	03/17/1956	MCA/		
	Sort By: 💿 Patient	PCN C Patient Name						
	List Filter Options							
	Show all patients	s (no filter applied)						
	C Filter list to includ	de Patient PCNs starting wi	th					
	C Filter list to includ	de Patient Names starting v	vith	_				
	<u>N</u> ew <u>V</u> i	ew/Update <u>D</u> elete	Plan of Car	е			<u>C</u> lose	
-								Figure 6

- A number of fields on the Patient/Insured Information tabs support data entry via **fixedlist** or **variable-list lookups**. These **lookup lists** are accessed by **right-clicking** the mouse in the field or pressing the **F2** key in the field.
- Helpful fly hover-over hints are also available for many fields by left-clicking in a field or hover the mouse over the field.
- 1. To add a new patient record, click the **New** button (Figure 7).

Reference File Mai	ntenance							
e View Reports								
Patient Payer Provi	ider (Inst) Provider (Prof)	Codes/Misc						
PCN	Last Name	First Name	MI	DOB	LOB			
SMITHJN99000000A	SMITH	JOHN	L	03/17/1956	СОМ/			
							-	
Sort By: (Patient	PCN C Patient Name							
List Filter Options							II	
List Filter Options	(no filter applied)							
List Filter Options G Show all patients Filter list to include	; (no filter applied) le Patient PCNs starting wit	h						
List Filter Options Show all patients Filter list to includ Eiter list to includ	: (no filter applied) Je Patient PCNs starting wit le Patient Names starting w	h	-					
List Filter Options Show all patients Filter list to includ Filter list to includ	: (no filter applied) Je Patient PCNs starting wit Ie Patient Names starting w	h						
List Filter Options Show all patients Filter list to includ Filter list to includ New	s (no filter applied) Je Patient PCNs starting wit Je Patient Names starting w w/Update Delete	h				C)	ose	

- 2. Enter the Patient Information on the following tabs (Figure 8):
 - **General Information** general patient information such as the patient's name, address, birthdate, and various status flags.
 - **Extended Info** extended patient information such as information on the patient's primary Provider ID.
 - **Primary Insured** payer, insured, and employer information for the primary Institutional payer(s).
 - **Secondary Insured** insured information for the secondary institutional payer(s).

•	Tertiary Insured	- insured	information	for the tertiary	[,] institutional	payer(s)
---	-------------------------	-----------	-------------	------------------	----------------------------	----------

Patient Information		
General Information	Extended Info	ured (Inst Primary Insured (Prof) Secondary Insured
Last Name	First Name	MI Gen Patient Control No (PCN) to
1		
Patient Address		Patient Status
Address		Active Patient Y Discharge Status
		Sex Death Ind
City	State Zip	DOB _/_/_ DOD _/_/
		Marital Status Signature On File
Country Phone		Employment Status Release of Info
		Student Status ROI Date _/_/
Notes		CBSA Code
	-	
		-
<u> </u>		
		<u>S</u> ave <u>C</u> ancel

3. After completing data entry on the Patient Information form, click the **Save** button to save and exit the form (Figure 9).

Patient Information			×	
General Information Exten	ded Info Primary Ins	ured (Inst) Primary Insured (Prof) Secondary Insured	
Last Name SMITH	First Name JOHN	MI Gen Patient Cont	rol No (PCN) 10000004	
Patient Address Address THOSPITAL DRIVE	State Zip NY 10535	Patient Status Active Patient Y Sex M DOB 03/17/1956 Marital Status Employment Status Student Status CBSA Code	Discharge Status Death Ind DDD Signature On File Release of Info ROI Date ROI Date	
	2			Figure
			Save Cancel	,

4. During the patient save operation, an edit validation process is performed on all

patient record fields. If no edit validation errors occur, no further correction is needed and the patient record will be saved.

When edit validation errors occur, double-click the first error message to jump to the corresponding field. Several **Save** attempts may be required when there are multiple errors to correct and save a "clean" patient record (Figure 10).

Patient Informatio	n			×	
General Information	Extended Info Primary Ins	ured (Inst) Primary Insure	d (Prof) Secondary Insi	ured 💶	
Last Name SMITH	First Name JOHN	MI Gen Patier	nt Control No (PCN) HJN99000000A	- 🔟	
Patient Address Address 1 HOSPITAL DRI	VE	Patient Status Active Patient Sex	Y Discharge Status		
City Edit Val	idation Errors List atient Sex Code Is Req	uired	/ie ie //		
	Double-click error to jump to X Indicates that error must I	the corresponding field. be corrected before saving		<u>C</u> ancel	Figure 1

Payer Setup

The payer information for Medicare is already present in the PC-ACE software by default. Add **additional** Payer records for **other** lines of business to include these payers on newly entered claims.

- 1. To set up additional payers, select the **Payer** tab. (Figure 11).
- 2. Select **New** to open the payer information screen.

🖽 R	eference	File Ma	intenance				
File	View Repo	orts					
Pati	ent Payer	Provid	er (Inst) Provider (Prof) Codes/Misc				
Pa	yer ID	LOB	Description	State	Usage		<u> </u>
00	320	MCA	MEDICARE PART A - MN (LEGACY)		Inst Only		
00	951	MCB	MEDICARE PART B - WI (LEGACY)		Prof Only		
00	952	MCB	MEDICARE PART B - IL (LEGACY)		Prof Only		
00	954	MCB	MEDICARE PART B - MN (LEGACY)		Prof Only		
06	DO1	MCA	MEDICARE PART A - WI & HHH-A		Inst Only		
06	D14	MCA	MEDICARE HHH-A - CA		Inst Only		
							✓
<u>S</u> c	ort By: 💿 F	Payer ID	C Payer Description C Payer LOB C Payer	State			
E L	ist Filter Opti	ons					
(Show all p	payers (n	o filter applied)				
0	Filter list to	o include	Payer IDs starting with				
() Filter list to	o include	Payer Names starting with or contain	ng 🗌		Apply	
	<u>N</u> ew	⊻iev	v/Update Copy Delete				

Figure 11

3. Enter the new payer's information taking advantage of the built-in lookups where possible by pressing the **F2** key or right-clicking the mouse in the fields highlighted below (Figure 12).

Payer Information Payer ID LOB Receiver ID	ISA08 Override
Full Description Address & Contact Information Address	Flags Source Media
City State Zip	Usage
PrintLink Matching Descriptions	Save Cancel

Figure 12

4. The **Payer Information** window will be displayed. Enter all the appropriate information in the highlighted in the following fields.

Use the mouse to click into a field or press the **<Tab>** button to progress through the form. Complete the following information (Figure 13):

ayer Information		
Payer ID LOB Receiver ID 06111 COM UID Description	ISA08 Override	*
Address & Contact Information Address City City Contact Name Contact Name	Flags Source Media Usage	CI E B
Phone Ext Fax [] [] []		
PrintLink Matching Descriptions	Save	Cancel

Payer ID	Enter the Other Payers National Identification number. If unknown, enter a value of choice as this is a required field Examples: 9999BSCB for Blue Cross and Blue Shield 8888AETNA for Aetna 7777MC for Medicaid
LOB	F2 or right click in this field and select the LOB for the desired Payer
Full Description	Enter the Company name
Source	F2 or right click in this field and select the corresponding Payer source

- 5. All other fields should remain blank and select Save.
- 6. Repeat the relevant steps to create additional Payer records as needed.
- 7. Click **Close** when finished (Figure 14).

Reference F	ile Maii orts	ntenance				J		
Patient Payer	Provid	der (Inst) Provider (Prof) Codes/Misc						
Payer ID	LOB	Description	State	Usage				
19003	MCB	DME MAC JURISDICTION D		Prof Only				
5555GAP	GAP	MEDIGAP		Prof Only				
6666AARP	СОМ	AARP						
7777MC	MCD	COBCOMMERCIAL		Inst Only				
8888AETNA	СОМ	COMMERICAL						
9999BCBS	BC	BLUE CROSS AND BLUE SHIELD		Inst Only				
Sott By: © Payer ID C Payer Description C Payer LOB C Payer State								
 List Filter Upi Show all C Filter list 	payers (i to includi	no filter applied) le Paver IDs starting with						
C Filter list to include Payer Names starting with or containing Apply Figure 14								
New	⊻ie	w/Update C <u>o</u> py <u>D</u> elete				<u>C</u> lo	se	5

Medicare Solo Provider Setup

To set up an individual provider number electronically, set up must be in a ten-digit format for the NPI.

Note: Instructions for group provider and individual group members set up in the next section.

1. From the **PC-ACE Claims Processing System** main menu select **Reference File Maintenance** (yellow folder) (Figure 15).



2. Select Provider (Prof) tab (Figure 16).

🗰 Refe	rence F	ile Maintenance					
File Vie	w Repo	rts					
Patient	Payer	Provider (Inst) Provider (Prof)	Codes/Misc				
LOB	Туре	Provider/Group Name	Provider ID	Payer ID	Provider NPI	Group Label	Tag Tax 🔨
							-
Sort B	y: CL	OB C Type C Provider/Gro	up Name 🔎 Provi	ider ID 🔿 (Group Label	Tag	
List F	ilter Optio	ins					
• •	show all p	roviders (no filter applied) 🛛 🔿 S	how only providers a	associated wit	h selected provi	der	
C F	ilter list to	include Provider IDs starting with					
C F	ilter list to	include Provider Names starting v	<i>i</i> ith				
	_		1				
<u>L</u>	lew	View/Update Delete					

- 3. Select New.
- 4. Enter the following information: (Figure 17)

Professional P	Provider Inform	ation		×
General Info E	tended Info			
Provider Type:	C Group Practic	e 🔿 Individual in Gro	Solo Practice	<u></u>
Organization			Group Label	
Last/First/MI	GREGORY	HOUSE	NPI	1234567893
Address	1 MAIN STREET		Tax ID/Type	571234567 E
	SUITE 103		UPIN	
City/St/Zip	NEW YORK	NY 10001-1111	Specialty	011 Type Org 001
Phone	(718) 111-1111	Fax (212) 222-2222	Taxonomy/Type	
Contact	MRS HOUSE		Accept Assign?	A Participating?
Provider ID/No.	1234567893	LOB MCB	Signature Ind	Y Date 01/01/2009
Payer ID	13202	Tag	Provider Roles:	Billing Y Rendering N
Remarks		Pr	rovider Associations:	Select None
			.0B Provider ID Pro	ovider/Group Name
		~		
				Save Cancel

Field Name	Action
Provider Type	Select Solo Practice button.
Last/First/MI	Enter practitioner's name.
Address	Enter practitioner's address.
City/St/Zip	Enter practitioner's city, state, and ZIP Code.
Phone	Enter office phone number.
Contact	Enter contact name for office.
Provider ID/No.	Use the ten-digit NPI number.
LOB	Press <f2> key to show list, then select MCB.</f2>
Payer ID	Press <f2></f2> key to show list, then select the appropriate payer ID.
NPI	Enter ten-digit NPI number.
Tax ID	Enter Social Security Number (SSN) or Employer Identification
	Number (EIN)
Туре	Enter "S" for SSN or "E" for EIN.
Specialty	Press <f2></f2> key to show list, then select the appropriate specialty.
Type Org	Press <f2></f2> key to show list, then select the appropriate Org.
Accept Assign?	Press <f2></f2> key to show list, then select the appropriate assign
	code.
Participating?	Press <f2></f2> key to show list, then select Y or N .
Signature Ind	Press <f2></f2> key to show list, then select Y or N .
Signature Date	Enter EDI agreement was signed for electronic billing.

5. Select the Extended Info tab (Figure 18)

rofessional Provider Information
General Info Extended Info
CLIA No. Provider Name Match Mammography No. Force Legacy ID HMD Contract No. E-Mail Address
Provider ID/No Type XX Provider ID/No Type XX Provider Name Suffix ID/Type #1 ID/Type #2 ID/Type #2
Pay-To Provider Information (specify only if different) Organization Last/First/MI Fed Tax ID/Type Address Prov. ID/No./Type Sec ID/Type #1
City/St/Zip Sec ID/Type #2 Country Name Suffix
<u>Gave</u>

6. Select Close to exit the Reference File Maintenance box (Figure 19).

New View/Update Delete Close F	Figure 19
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Group Record Setup for Medicare

1. Select **Reference File Maintenance** (yellow folder) from the **PC-ACE Claims Processing System** main menu. (Figure 20).



- 2. Select the Provider (Prof) tab (Figure 21).
- 3. Select New.

🇰 Re	ference	File Maintena	ince						
File 1	iew Repo	orts							
Patie	nt Payer	Provider (Inst)	Provider (Prof)	Codes/Misc					
LOE	Туре	Provider/Group	o Name	Provider ID	Payer ID	Provider NPI	Group Label	Tag	T axo 🔨
MC	Solo	GREGORY, H	DUSE	1234567893	13202	1234567893			
									~
Sor	By: C L	.OB C Type	C Provider/Gro	up Name 🔎 Prov	vider ID 🔘	Group Label C	Tag		
– Lis	t Filter Opti	ons					-		
	Show all	providers (no filter	applied) 🔿 S	how only providers	associated wi	h selected provid	der		
0	Filter list to	o include Provide	r IDs starting with						
	Filter list h	n include Provide	r Names starting w	ith	-				
	r mor not o	5 molado 1 10 9100	r realise statulig w						
	New	View/Update	e Delete	1				c	lose

- 4. New Provider Options box appears with Create a completely new provider (all fields blank) button selected.
- 5. Select OK (Figure 22).



6. Enter the following information (Figure 23).

Professional P	Provider Information			
General Info E	xtended Info			
Provider Type:	Group Practice C Individual in Gro	up 🔿 Solo Practice	<u></u>	
Group Name	GROUP OFFICE	Group Label	GO	
Last/First/MI		NPI	1234567893	
Address	1 MAIN STREET	Tax ID/Type	571234567 E	
	SUITE 101	UPIN		
City/St/Zip	STAMFORD CT 06901-1111	Specialty	011 Type Org 001	
Phone	(212) 111-1111 Fax (212) 222-2222	Taxonomy		
Contact	MRS SMITH	Accept Assign?	A Participating? Y	
Group ID/No.	1234567893 LOB MCB	Signature Ind	Y Date 01/01/2008	
Payer ID	13102 Tag	Provider Roles:	Billing Y Rendering N	
Remarks	P	rovider Associations:	Select None	
		.0B Provider ID Pr	ovider/Group Name	
	~			
,				
			Save Cancel	Figure 23
				i i igole 23

Field Name	Action
Provider Type	Select Group Practice button.
Group Name	Enter group name.
Address	Enter group service location.
City/St/Zip	Enter group city, state, and ZIP Code.
Phone	Enter office phone number.
Fax	Optional field
Contact	Enter office contact name.
Group ID/No.	Enter ten-digit group NPI number.
LOB Payer ID Group Label	Press <f2> key to show list, then and select MCB. Press <f2> key to show list, then select the appropriate payer ID. Enter an abbreviation of choice to link the group to individual records. Note: The group label is very important. A user-assigned identifier that is used to link the group and individuals within the group (e.g., "AMD" for American Medical Doctors) group label is assigned by the provider.</f2></f2>
NPI	Enter the group NPI number.
Tax ID/Type	Enter tax identification number and "E" for tax ID.
Specialty	Press <f2></f2> key to show list, then select appropriate specialty.
Type Org	Press <f2></f2> key to show list, then select appropriate Org
Accept Assign?	Press <f2></f2> key to show list, then select appropriate assign code.
Field Name	Action
Participating?	Press <f2></f2> key to show list, then select Y or N
Signature Ind	Press <f2></f2> key to show list, then select Y or N
Signature Date	Enter date EDI agreement was signed for electronic billing.

- 7. Select the **Extended Info** tab (Figure 24).
- 8. Enter CLIA No./Mammography No. if appropriate.
- 9. Enter "XX" for the NPI in the Provider ID/No Type field.
- 10. Select Save.

Professional Provider Information	×
General Info Extended Info	
CLIA No. Provider Name Match	
Mammography No. Force Legacy ID	
HMO Contract No. E-Mail Address	
Dental Provider?	
Provider ID/No Type 🔀 🖂 Secondary Provider IDs (ANSI us:	e only)
Provider Name Suffix ID/Type #1	
Provider Country ID/Type #2	
Pau-To Provider Information (specifu onlu if different)	
Last Cast Cast D Turns	
Address Prov. ID/No./Type	
Sec ID/1 ype #1	
City/St/Zip Sec ID/Type #2	
Country Name Suffix	
<u>Save</u>	Cancel

Individual Group Member Record Setup for Medicare

- 1. Highlight group record and select **New** (Figure 25).
- 2. Select Inherit name/address information from the selected provider
- 3. Select OK



- Figure 25
- 4. Change Group Practice to 'Individual in Group' (Figure 26).

Professional P	Provider Inform	ation		×
General Info E	tended Info			
Provider Type:	C Group Practic	e 💽 Individual in Group	🔿 🔿 Solo Practice	<u>```</u>
Organization			Group Label	GO
Last/First/MI	HOUSE	GREGORY	NPI	1234567893
Address	1 MAIN STREET		Tax ID/Type	571234567 E
	SUITE 101		UPIN	
City/St/Zip	STAMFORD	CT 06901-1111	Specialty	011 Type Org 001
Phone	(212) 111-1111	Fax (212) 222-2222	Taxonomy	
Contact	MRS SMITH		Accept Assign?	A Participating?
Provider ID/No.	1234567893	LOB MCB	Signature Ind	Y Date 01/01/2008
Payer ID	13102	Tag	Provider Roles:	Billing N Rendering Y
Remarks		Prov	vider Associations:	Select None
			B Provider ID Pro	vider/Group Name
1				
				Save Cancel

Field Name Action Select Individual in Group button. Provider Type Last/First/MI Enter name of provider. Provider ID/No. Remove group NPI and enter ten-digit NPI number of individual. LOB Press <F2> key to show list, then select MCB. Press **<F2>** key to show list, then select appropriate payer ID. Payer ID Press **<F2>** key to show the Provider/Group Selection list, click on Group Label the Group Record and click **Select**. NPI Remove the group NPI, and enter the individual NPI number. Specialty Press **<F2>** key to show list, then select the appropriate specialty ID.

- 5. Select the Extended Info tab (Figure 27).
- 6. Enter CLIA No./Mammography No. if appropriate.
- 7. Enter "XX" for the NPI in the **Provider ID/No Type** field.
- 8. Select Save.
- 9. Select Close to exit the Reference File Maintenance.

eneral Info	
LIA No.	Provider Name Match
ammography No.	Force Legacy ID
MO Contract No.	E-Mail Address
ental Provider?	
rovider ID/No Type 🛛 🕅	Secondary Provider IDs (ANSI use only)
rovider Name Suffix	ID/Tune #1
rovider Country	ID/Tupe #2
Pay-1 o Provider Information (spec Jrganization	aly only if different) Fed Tax ID/Type Prov. ID/No./Type Sec ID/Type #1 Sec ID/Type #2

Submitter Setup

- 1. Select the tab marked **Codes/Misc** (Figure 28).
- 2. Select **SUBMITTER**.

🗵 Reference File Maintenar	ice			
File View Reports				
Patient Payer Provider (Inst)	Provider (Prof) Codes/Misc			
_ <u>S</u> hared	Institutional	Professional		
SUBMITTER	тов	POS		
DATA COMM	CON/OCC/SP/VAL	CHARGES MASTER		
HCPCS	REVENUE CODE	SPECIALTY		
MODIFIERS				
ICD9				
PHYSICIAN				
FACILITY				
MISC ANSI				
			Close	F :
				Flaure 28

3. The radio button defaults to Institutional. Select **Professional** and **Select View/Update** with the submitter record highlighted (Figure 29).

Submitter Setup			
Claim Type: 🦳 Institu	utional 💽 Profession	nal	
LOB Payer ID	Submitter ID/EIN	Submitter Name	<u>^</u>
ALL << ALL >>	SUBMITTER_ID	SUBMITTER NAME	
			-
			~
New	Undate Conu	Delete	Close
		Delete	

General Tab

- 4. Enter submitter number (e.g., NYBXXXX, CHXXXXXXX) in the ID field (Figure 30).
- 5. Enter name and address of submitter.
- 6. Enter phone number and contact.
- 7. Select **Save**.

Profession	nal Submitter Information	
General P	repare ANSI Info ANSI Info (2) ANSI Info (4)	
LOB	Payer ID Pager ID	
ID	NYBXXXX EIN	
Name	GREGORY HOUSE	
Address	1 MAIN STREET	
City	NEW YORK State NY Zip 10010	
Phone	(212) 111-1111 Fax (212) 222-2222 Country	
Contact	MRS HOUSE	
E-Mail	<u> </u>	
	<u>S</u> ave <u>C</u> ancel	Eiguro 3

Referring Physician Setup

Referring physician National Provider Identifier (NPI) record should be created for all doctors ordering diagnostic tests and consultations.

1. Select **PHYSICIAN** on the **Provider (Prof)** tab (Figure 31).

Reference File Maintenanc	e		
ile View Reports			
Patient Payer Provider (Inst) Pr	rovider (Prof) Codes/Misc		
Shared	Institutional	Professional	
SUBMITTER	TOB	POS	
DATA COMM	CON/OCC/SP/VAL	CHARGES MASTER	
HCPCS	REVENUE CODE	SPECIALTY	
MODIFIERS			
ICD9			
PHYSICIAN			
FACILITY			
MISC ANSI			
			Close

2. Select New (found on bottom left of screen) (Figure 32).

New	View/Update	Delete	Close	
		_	-	Figure 32
				119010 02

- 3. Enter physician's last name, first name, and middle initial (Figure 33).
- 4. Enter physician's NPI number.
- 5. Select **Save**.

Physician Informatio	n 🔀	
Physician ID / Type		
Physician's Last Name HOUSE	First Name MI Suffix GREGORY	
Address		
City	State Zip Phone	
Federal Tax ID / Type	NPI Taxonomy 1234567893	
	Save <u>C</u> ancel	Figure 33

6. Select <u>Close</u> to exit Physician Information box (Figure 34).



Facility Setup

A facility record must be created for all places of service other than home and office. If a modifier QU is utilized for a health professional shortage area (HPSA) location or if there is a second provider location within the same pricing jurisdiction, a facility record will need to be created.

1. Select FACILITY (Figure 35).

Reference File Maintenance			
jile Vie <u>w R</u> eports			
Patient Payer Provider (Inst) Pro	ovider (Prof) Codes/Misc		
Shared	_ <u>I</u> nstitutional	Professional	
SUBMITTER	ТОВ	POS	
DATA COMM	CON/OCC/SP/VAL	CHARGES MASTER	
HCPCS	REVENUE CODE	SPECIALTY	
MODIFIERS			
ICD9			
PHYSICIAN			
FACILITY			
MISC ANSI			
			<u>C</u> lose

2. Select New (Figure 36).

New	View/Update	Delete	Close	1	
<u> I</u> on		<u></u> 0000		Figure 3	36

- 3. Enter in the following fields:
 - Facility Name
 - Address
 - City/St/Zip
 - NPI number for facility (only needed for purchased services and laboratory)
- 4. Select **Save**. (Figure 37)

Facility Inform	nation
Facility ID/Type	
Facility Name	HOSPITAL
Address	1 MAIN STREET
City/St/Zip	NEW YORK NY 10001
Facility Type	
Tax ID/Type	NPI NPI
	Save Cancel

5. Select **Close** to exit the **Facility Information** box (Figure 38).



Charges Master Setup (Optional)

To have charges automatically populate in charge field, the charges master must be set up.

1. Select CHARGES MASTER (Figure 39).

Reference File Maintenan	ce		
le Vie <u>w R</u> eports			
Patient Payer Provider (Inst) I	Provider (Prof) Codes/Misc		
Shared	Institutional	Professional	
SUBMITTER	ТОВ	POS	
DATA COMM	CON/OCC/SP/VAL	CHARGES MASTER	-
HCPCS	REVENUE CODE	SPECIALTY	
MODIFIERS			
ICD9			
PHYSICIAN			
FACILITY			
MISC ANSI			
			<u>C</u> lose

2. Select <u>N</u>ew (Figure 40).

🛄 Charge	s Mast	er Setup			×
Code	LOB	Payer ID	Description	Charges	^
00103			ANESTH, BLEPHAROPLASTY	\$50.00	
95908			MOTOR&/SENS 3-4 NRV CNDJ TST	\$0.00	
95909			MOTOR&/SENS 5-6 NRV CNDJ TST	\$9.00	
95910			MOTOR&SENS 7-8 NRV CNDJ TEST	\$11.00	-
99215			OFFICE/OUTPATIENT VISIT EST	\$100.00	-9
V5363			LANGUAGE SCREENING	\$1.00	
List Filter	Options - all code	s (no filter appli	ed)		
C Filter I	list to inc	lude codes sta	ting with		
C Filter	list to inc	lude descriptior	ns starting with (up to first 5 chara	icters)	
C Filter list to include descriptions containing Apply					
New		⊻iew/Update	Delete	<u>C</u> lose	

Charges Master Information

- 1. Fill in the following: (Figure 41)
 - Enter procedure code in **Code** field. Description will automatically populate after entering procedure code.
 - Enter money amount in **Charges** field.
- 2. Select OK.

Charges Master Information		X
LOB: << All >> 💌 Payer ID:	(blank = all payers)	1
Code: 99215		
Description: OFFICE/OUTPATIENT VISIT EST		
Charges:100.00		
	OK Canc	el

Repeat the above steps for each code to be entered.

3. Select **Close** to close the **Charges Master Information** box (Figure 42).

New	View/Update	Delete	Close
			Figure 4

4. Select <u>Close</u> to exit from the **Reference File Maintenance** box (Figure 43).



To activate the Charges Master list do the following:

1. From the **PC-ACE Claims Processing System** main menu, select <u>File</u> (Figure 44).



Figure 44

2. Select **Preferences** (Figure 45).



- 3. Under the **General** tab, select **Use Charge Master Reference files for Professional procedure code lookups** (Figure 46).
- 4. Select OK.



Section 3 - Claims Entry

Upon completion of the Reference File Maintenance, claims are now ready to be manually entered. When importing claims from another software, the manual entry of claims may be bypassed. Please follow the section on Importing Claims.

1. Select the **PROF** icon from the **PC-ACE Claims Processing System** main menu (Figure

47).



- 2. Enter **SYSADMIN** as both the User ID and Password in the **Sign On** box if it appears (Figure 48).
- 3. Select OK.

Sign On			
User ID:	SYSADMIN		
Password:	*****		
	OK	Cancel	Figuro 4

4. Select Enter Claims to open the Professional Claim Form (Figure 49).



Entering Claim Data

Click on any field to enter data or press the **TAB** key to move from field to field left to right. Use the **UP ARROW** and **DOWN ARROW** keys to move up and down through the claim form fields, respectively.

A number of productivity enhancing features are available during claim entry:

• **Claim Form Topic Help** - Press the **<F1>** key while entering a Professional claim and the software will display the **Professional Claim Form** topic in PC-ACE.

• **Fixed-List Lookups** – Press the **<F2**> key or **right click** in fields containing lookup capability to take advantage of the built in fixed-list lookup lists to select from.

Access the lookup list for a field by positioning the cursor on the field and pressing the F2 function key (or right-clicking the mouse). When an item from the list is selected, its value is automatically entered in the claim form field. For example, Patient Sex typically has three possible values: "M" (male), "F" (female), and "U" (unknown).

Type **<ALT>F2** (press the **<F2>** key while holding the **<ALT>** key down) to identify all fields that support a lookup list. Press the **<ESC>** key to disable the flashing notification (Figure 50).

fessional Claim Form	×
atient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ex	t. Payer/Insured
0B MCB Billing Provider 26 - Patient Control No.	<u></u>
2 - Patient Last Name First Name MI Gen 3 - Birthdate Sex MS ES S	atus Death 12 Legal NPI SS Ind SOF Rep. Exempt
5 · Patient Address 1 Patient Address 2 Patient City State	Patient Zip Country Patient Phone
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date Employment Accident I - /_/ I _/_/ I _/_/ 17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitaliza	16 · UTW//Disability Dates & Type //
19 - Reserved For Local Use 22 - Medicaid Resubr	mission Code & Ref No
25 · Fed. Tax ID SSN/EIN 27 · Provider Accepts Assignment?	PIN No
	<u>Save</u> <u>Cancel</u> Fic

• Variable-List Lookups – Applies primarily to fields whose values are selected from the reference files completed in **Reference File Maintenance** in the 'Getting Started Using PC-ACE' section above.

If any information in the variable-list lookups selected from the reference files is incorrect and cannot be changed within the claim form, exit the Claim Form and make the necessary change(s) directly to the proper reference file.

For example, selection of a patient from the variable-list lookup completes numerous patient- related fields on the claim. Access variable list lookups using the same method described above for fixed-list lookups.

• Right click in the Patient Control No. field (Figure 51).

	26 - Patient Control No.
2 - Patient Last Name First Name	MI Gen 3-Birthdate Sex MS ES SS Ind SOF Rep. Exempt
5 - Patient Address 1 Patient Address 1	ddress 2 Patient City State Patient Zip Country Patient Phone
Patient Condition Related To ROI ROI Date yment Accident Interview Interview	Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW//Disability Dates & Type Image: Control of Current Image: Control of Current 17 - / / _ /
19 · Reserved For Local Use	22 - Medicaid Resubmission Code & Ref No
19 · Reserved For Local Use	22 - Medicaid Resubmission Code & Ret No

• Then select the patient that will be entered on the claim form (Figure 52) from the reference file Patient Selection to auto-populate the values from the Patient Selection record into the claim form (Figure 53).

Reference File Ma	aintenance					
ile View Reports						
Patient Payer Pro	vider (Inst) Provider	(Prof) Codes/Misc				
PCN	Last Name	First Name	MI	DOB	LOB	<u> </u>
D0EJN99000000A	DOE	JOHN	L	03/17/1956	/MCB	
						-
Sort By: Patien	t PCN C Patient M	Name				
List Filter Options -						
Show all patient	ts (no filter applied)					
C Filter list to inclu	ude Patient PCNs star	ting with	-			
C Filter list to inclu	ude Patient Names sta	rting with	-			
			-			
New V	/iew/Update	Delete Plan of Ca	re			Close

ofessional Claim Form
atient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
.08 MCB Billing Provider 26 - Patient Control No. DDEJN99000000A
2 - Patient Last Name First Name MI Gen 3 - Birthdate Sex MS ES SS Ind SOF Rep. Exempt DOE JOHN L 03/17/1956 M N
5 · Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone 1 HOSPITAL DRIVE JEFFERSON VALLEY NY 10535 []
10 · Patient Condition Related To ROI ROI Date Other Ins. 14 · Date/Ind of Current 15 · First Date 16 · UTW/Disability Dates & Type Employment Accident 3 to
17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs V V/N 0.00
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No
25 · Fed. Tax ID SSN/EIN 27 · Provider Accepts Assignment? PIN No.
31 - Provider SOF Date Facility? Dental? COB? Frequency 33 - GRP No.
Save Cancel

Cancel Field Changes - When a change is inadvertently made to the contents of a field, press the **ESC** key to cancel this change and restore the field's original content. This feature

is available for some of the claim form fields.

Enter the appropriate information required for the Professional claim form utilizing the mouse to click into a field or press the **<TAB>** button to progress through the form.

The sections/tabs display fields in the same order as a hardcopy Professional claim form (Figure 54).

The Professional claim form contains six sections (tabs):

- Patient Info & General
- Insured Information
- Billing Line Items
- Extended Patient/General
- Extended Patient/General (2)
- Extended Payer/Insured

Professional Claim Form
Patient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
LOB MCB Billing Provider 26 - Patient Control No.
8 - Pat. Status Death 12 Legal NPI 2 - Patient Last Name First Name MI Gen 3 - Birthdate Sex MS ES SS Ind SOF Rep. Exempt
5 - Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW/Disability Dates & Type Employment Accident
17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs •
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No
25 - Fed. Tax ID SSN/EIN 27 - Provider Accepts Assignment? PIN No.
31 - Provider SOF Date /// Facility? Dental? COB? Frequency 33 - GRP No.
<u>Save</u>

• Patient Info &General Tab

This tab includes fields for general claim and patient information.

1. While the cursor is displayed in the Billing Provider field, press the <F2> key to show list, then select the appropriate provider (Figure 55).

If part of a Group, the Billing Provider field should always be populated with the Group.

If a Solo Practitioner, select the Solo record (Figure 56).

stient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
DB MCB Billing Provider 26 - Patient Control No.
8 - Pet Status Death 12 Legal NPI 2 - Patient Last Name First Name MI Gen 3 - Birthdate Sex MS ES SS Ind SOF Rep. Exempt
5 · Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW/Disability Dates & Type imployment Accident 16 - UTW/Disability Dates & Type
17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs 17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs 18 - Hospitalization Dates 10 - Urticle 10 - Urticle 10 - Urticle 10 - Urticle
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No
5 - Fed. Tax ID SSN/EIN 27 - Provider Accepts Assignment? PIN No.
Provider SOF Date Facility? Dental? COB? Frequency 33 - GRP No.
Save Cancel

Refere	ence Fil	e Maintenance						<u>_ ×</u>
ile View	Repo	rts						
Patient	Payer	Provider (Inst) Provider (Prof)	Codes/Misc					
LOB	Туре	Provider/Group Name	Provider ID	Payer ID	Provider NPI	Group Label	Tag	Тах
MCB	Indiv	INDIVIDUAL, IN GROUP	1234567893	13102	1234567893	ABC		
MCB	Group	BILLING GROUP	1234567893	13102	1234567893	ABC		
MCB	Solo	HOUSE, GREGORY	1234567893	13102	1234567893			
								-
, Sort By	C L	OB C Type C Provider/G	roup Name 💿 Pro	vider ID C	Group Label C) Tag		
— List Fi	ter Ontic	ne						
6 9	now all n	roviders (no filter applied)	Show only providers	associated w	ith selected provi	ider		
	tove dir p	i selede Desider (Destationed)		. 4330014(04 11				
	ter list to	Include Provider ID's starting with	· ۱	_				
🔘 Fil	ter list to	include Provider Names starting	with					
		-	· ·					
		-						
<u>N</u> e	ew						<u>_</u>	lose

2. Enter the patient information manually during claim entry *or* while the cursor is displayed in Form Locator 26 – Patient Control Number, press <F2> or right click to access a list of patients from which to select in reference file maintenance record (Figure 57).

rofessional Claim Form	×
Patient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured	
LOB MCB Billing Provider 26 - Patient Control No.	
8-Pat. Status Death 12 Legal NPI 2-Patient Last Name First Name MI Gen 3-Birthdate Sex MS ES SS Ind SOF Rep. Exempt	
5 - Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone	
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW//Disability Dates & Type Employment Accident	
17 - Referring Phys Name (Last/Drg, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs 20 - Outside Lab/Chgs	
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No	
25 - Fed. Tax ID SSN/EIN 27 - Provider Accepts Assignment? PIN No.	
31 - Provider SOF Date Facility? Dental? COB? Frequency 33 - GRP No.	
Save Cancel	

a. Once the patient is highlighted, click **SELECT** (Figure 58). The **Patient Info &**

General tab will be displayed with data elements populated from the **Patient Selection** record. Press Tab or point and click to make any modifications to a form locator on the **Patient Info & General** tab.

Patient Selection						
PCN	Last Name	First Name	MI	DOB	LOB	_
SMITHJN9990000004	SMITH	JOHN	L	03/17/1919	MCB	
						-
Sort Bur @ Patient	PCN C Patient Na	me				
List Filter Options		inc .				
Show all patients	(no filter applied)					
C Filter list to includ	le Patient PCNs starting	g with	-			
C Filter list to includ	le Patient Names starti	ng with	-			
			_			_
<u>N</u> ew <u>V</u> ie	w/Update <u>D</u> el	lete			Selec	st <u>C</u> ancel

Figure 58

b. If the patient is not in the Patient Selection select New (Figure 59).



c. Enter in the following fields: (Figure 60)



Field Name I ast Name/First Action

Last Name/First Name/MI Enter patient's name.

Patient Control No (PCN)	Enter patient's last name, space, first name Or if preferred use a numbering system.
Address	Enter patient's address.
City/State/Zip	Enter city, state, and ZIP Code.
Phone	Optional
Sex	Enter "M " for male or "F" for female.
DOB (date of birth)	Enter the date in the MM/DD/CCYY format.
SOF (signature on file)	Press <f2></f2> key to show list, then select the appropriate code.
Release of Info (ROI)	Press <f2></f2> key to show list, then select the appropriate code.
ROI Date	Enter date released signed or earliest date billing was made on this claim.

Note: Do not select Save.

Select the **Primary Insured (Prof)** tab (Figure 61).

atient Information
General Information Extended Info Primary Insured (Inst) Primary Insured (Prof) Secondary Insured
Payer ID Payer Name LOB 13102 MEDICARE PART B - CT MCB
Group Name Group Number Claim Office
Insured Information (F7) Employer Information (F8)
Rel Last Name First Name MI Gen Insured ID 18 SMITH JOHN L 9990000000A 9990000000A
Address Sex M Assign of Benefits 1 STATE DRIVE D0B 03/17/1919 Release of Info
City State Zip Employ Status ROI Date 01/01/2010 JEFFERSON VALLEY NY 10535 Retire Date Country Phone Retire Date
[718] 111-1111
Save Cancel

d. Enter the following information: (Figure 62)

Action
Press <f2> key to show list, then select the</f2>
appropriate payer.
Enter "18" for self.
Enter "01" for spouse.
Enter "19" for child.
Enter Medicare Health Insurance or subscriber
number.
Enter "Y" for yes or " N " for no.

- e. Select **Save**.
- 3. The **Professional Claim Form** box will appear (Figure 62).
- 4. In box 10 enter "N" for condition related to employment and "N" for condition related to an accident.
- 5. In box 20 enter "N" for outside lab charges not included in claim or "Y" for outside lab charges included in claim.
- 6. If billing for a place of service other than home, office, enter a "Y" in the Facility? field.

Professional Claim Form
Patient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
LOB MCB Billing Provider 1234567893 26 - Patient Control No. SMITH JOHN
8 · Pat. Status Death 12 Legal NPI 2 · Patient Last Name First Name MI Gen 3 · Birthdate Sex MS ES SS Ind SOF Rep. Exempt SMITH JOHN L 03/17/1956 M B N Image: Sex MS Sex Sex N Image: Sex MS Sex Sex
5 - Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone MAIN STREET NEW YORK NY 10011 (212) 111-1111
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW/Disability Dates & Type Employment N Accident Y 01/01/2010 3 _/_/ _/_/ to _/_/ to _/_/
17 · Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 · Hospitalization Dates 20 · Outside Lab/Chgs • • /_/
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No
25 - Fed. Tax ID 571234567 SSN/EIN E 27 - Provider Accepts Assignment? A PIN No. 1234567893
31 - Provider SDF Y Date 01/01/2009 Facility? Y Dental? CDB? Frequency 33 - GRP No.
Save Cancel

- 7. When the **Facility Information** box appears on the **Ext. Patient/General** tab, press the **<F2>** key for the facility information (Figure 63).
- 8. Select the facility.

Note: Additional facilities may be added by selecting **New**, then adding the facility data, and then selecting **Save**.

rofessional Claim Form		X
Patient Info & General Insured Information Billing Line Items	Ext. Patient/General Ext. Pat/Gen (2)	Ext. Payer/Insured
Patient Legal Representative Information	Miscellaneous Patient & General Informa	tion
Name (L/F)	Date of Death	Special Program Indicator
Address	Accident State/Hour	Medical Rec No
City/St/Zip	Accident Country	IDE Number
Country Phone []	Responsibility Ind	Form Loc 31
, ,	FL-10d	EPSDT Referral
Facility Information	Homebound Ind	Submission Reason Code
Name HOSPITAL	Date Care Assumed	Delay Reason Code
Address 1 MAIN STREET	Date Care Relinquished//	Pregnancy Indicator
	Date Last Seen	Claim Tag
City/St/Zip NEW YORK NY 10001-1234	Date Last Worked	Patient Weight (lbs)
Cntry / IDs	Return To Work Date _/_/	
Fac Type Phone/Ext ()	Prescription Date _/_/	
Contact	First Contact Date _/_/	
	Error List Save	With Fatal Save Cancel

• Billing Line Items Tab

Enter the services/supplies rendered to the patient. Six claim lines are displayed at a time on the window. The user can use the **<Scroll Up>** and **<Scroll Down>** buttons to move up and down within the claim (Figure 64).

Diagnosis Codes (1 - 8)	etails (une 1) Ext De	Kans 2 (Une 1) Ext Decar			- 1	
24a-Service Dates From Thru 1 2 3 4 5 6	24b 24c 24d CPT4 PS EMG /HCPCS	2 244 - Mod 24e 1 2 Diagnosis 	24 24g Charges Units	24h EP PP AT Rendering Phys.		-
		28 · Total Charge . 29 · Patient Amount Paid .	0.00 Recgicul	late0.00		Figur

This tab also includes extended line item fields, and line-level MSP/COB fields. For detailed information on entering Medicare Secondary Payer claims, download the PC-ACE Medicare Secondary Payer (MSP) Reference Guide.

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• Line Item Scrolling - The Billing Line Items tab displays 6 claim lines at a time. For claims that contain more than 6 line items, the user may scroll through the claim line items one line at a time or one page (i.e., 6 lines) at a time using the buttons provided along the right edge of this tab.

The **up/down arrow keys can be utilized** to move from line to line, scrolling when appropriate. Type "**<ALT><PAGE UP>**" (press the "**Page Up**" key while holding the "**ALT**" key down) or "**<ALT><PAGE DOWN>**" to scroll up/down through all claim line items one page at a time.

- Line Item Features The following productivity features are available on the Billing Line Items tab:
- Field Duplication -- Press the "F4" key while positioned on a specific field on a line to copy the value of that single field from the previous line into the current line
- Line Duplication Press the "F5" key while positioned on any field on a line to copy the values in **all** fields of the previous line into the current line.
- Line Deletion Press the "F7" key while positioned on any field on a line to delete the line. A prompt to confirm the deletion. Alternatively, enter the value "*DEL*" (that's an asterisk plus "DEL" plus another asterisk, without the double-quotes) into the HCPCS field on a claim line to delete the line.

Claim lines are automatically re-sequenced by Revenue Code when a claim is saved. As such, there is no need to provide line rearrangement capabilities.

- Advance To Next Line Press the "F8" key while positioned on any field on a line to automatically advance the cursor to the first field of the next line, skipping over any remaining fields on the current line.
- Jump To Narrative Press the "<ALT>N" key combination while positioned on any field on a line to automatically jump to the Ext Details 3 (line X). Enter the desired narrative text and press the "<TAB>" key to return to the original line field.
- Line Item Totals Recalculation The Billing Line Items tab provides a "Recalculate" button located near the bottom of the tab adjacent to the totals fields. Click this button to recalculate and update the "Total Charges" field from the current claim line item charges values. Select the Billing Line Items tab (Figure 65).

ofessional Claim Form
atient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
Line Item Details Extended Details (Line 1) Ext Details 2 (Line 1) Ext Details 3 (Line 1)
Diagnosis Codes (1 - 8): 25000
24a - Service Dates 24b 24c 24d - Modifiers 24e 24f 24g 24h 24j LN From Thru PS EMG Proc 1 2 Diagnosis Charges Units EP FP AT Rendering Phys. 1 04/25/2013 04/25/2013 11 99213 1 75.00 1.00
28 - Total Charge75.00 Recglculate
29 - Patient Amount Paid0.00 30 - Balance Due75.00

2. Enter the following information: (Figure 65)

Field Name Claim Diaanosis Codes	Action Enter up to four diggnosis codes.
Service Dates	Enter dates of service.
PS (place of service)	Press the <f2></f2> key to show list, then select the
	appropriate value.
EMG (Emergency)	Leave field blank.
Proc (procedure code)	Enter procedure code.
Modifiers	If necessary, press the <f2></f2> key to show list for
	appropriate values, then select modifier.
Diagnosis	Enter values 1–4.
Charges	Enter charge. Note: When entering a charge that
	includes cents, a decimal point is required (e.g., \$12.01,
	\$25.24).
Units	Only enter field if more than one unit.
Rendering Phys.	If billing in a group, press the <f2></f2> key to show list of
	rendering providers of service.

- 3. Select **Recalculate** (Figure 65).
- 4. Select **Save** when finished entering the claim.
- 5. During the claims <u>Save</u> operation, an edit validation process is performed on all fields. If no edit validation errors occur, the claim patient record is saved without further correction and a new Professional claim form will appear allowing entry of another claim.
- 6. When edit validation errors occur, double-click the error message to jump to the corresponding field in error. Several "Save" attempts may be required to correct and save a "Clean" claim.

Refer to the "Claim & Reference File Edit Validation" topic for a more complete discussion of the claim edit validation process.

 Once finished entering claims, the claims are now ready to be prepared for transmission (Figure 66). See Prepare Claims Function.
 Note: Use the Help Feature in PC-ACE for more information on "Listing, modifying and maintaining claims."



Section 4 - Additional Claim Features

Copying Claims

Claims for the *same* patient can be copied and then modified instead of creating a new claim each time. Simply copy the previous claim, modify the dates of service and/or any other pertinent information, and then save it.

- 1. In the Professional Claims Menu window, select List Claims.
- 2. In the **Professional Claim List** window, in the bottom left section of the screen, choose the Location of **TR** transmitted only.
- 3. Put a check mark in the box in front of the claim(s) to be copied.
- 4. On the Actions Menu, select Copy All Checked Claims. Select OK in the confirmation window. Note: If only one claim was checked to be copied, the Professional Claim Form will be displayed instead of the Professional Claim List window.
- 5. Change the dates of service and **Save** the claim.
- 6. In the bottom section of the window, select the **Location** of **CL to be transmitted**. The claims will be listed and have a status of **UNP**.
- 7. Double-click each claim in turn, enter new dates of service, and **Save**.

Reactivating Individual Previously Transmitted Claims

To resubmit a transmitted claim, these claims must first be reactivated. Only claims in the **transmitted (TR)** location may be reactivated.

1. Select the **Professional** icon from the **PC-ACE Claims Processing System** main menu (Figure 67).



2. Select List Claims (Figure 68).



- 3. Select Location (Figure 69).
- 4. Select CL (to be transmitted) or TR (transmitted only).



- 5. Check one claim or several claims to be reactivated.
- 6. Select Actions (Figure 70).
- 7. Select either Reactivated Claim (if only one claim) or Reactivate All Checked Claims (for more than one claim).



Figure 70

- 8. The Confirm box appears (Figure 71).
- 9. Select OK to reactivate claim/claims.



Figure 71

10. Change **Location** field to **CL-to be transmitted** (Figure 72).

	ons Reports							
Status LOB	PCN	Patient Last	Bill Provider	Type	Entered	Serv. From	Serv. Thru	Total Chgs. Med
UNP MCB	DOE JOHN	300	1234567893	Solo	09/23/2013	09/14/2013	09/15/2013	\$150.00 E
a lati								
Sort By: (* Pa Claim List Filter	tient Name C Options	PCN C Entry Dat	e C Service D	ate				
Sort By: (* Pa Claim List Filter Location: CL - Checked claim	tient Name C Options to be transmitted count: 0	PCN C Entry Dat	e C Service Di	e L	.08: << Ali >>			

- 11. Reactivated claims will be listed with a status of **UNP**. These must be corrected before sending.
- 12. Either double click the claim to open and make the necessary corrections and select **Save** (Figure 73), or see the **Processing Reactivated or Imported Claims** section to Process a multitude of claims.

Professional Claim Form
Patient Info & General Insured Information Billing Line Items Ext. Patient/General Ext. Pat/Gen (2) Ext. Payer/Insured
LOB MCB Billing Provider 1234567893 26 - Patient Control No. SMITHJN999000000A
2 - Patient Last Name First Name MI Gen 3 - Birthdate Sex MS ES SS Ind SOF Rep. Exempt SMITH JOHN L 03/17/1919 M N N
5 · Patient Address 1 Patient Address 2 Patient City State Patient Zip Country Patient Phone 1 STATE DRIVE JEFFERSON VALLEY NY 10535 Image: Country <
10 - Patient Condition Related To ROI ROI Date Other Ins. 14 - Date/Ind of Current 15 - First Date 16 - UTW/Disability Dates & Type Employment N Accident N
17 - Referring Phys Name (Last/Org, First, Mid, Suffix) Referring Phys IDs/Types 18 - Hospitalization Dates 20 - Outside Lab/Chgs
19 - Reserved For Local Use 22 - Medicaid Resubmission Code & Ref No
25 - Fed. Tax ID 571234567 SSN/EIN E 27 - Provider Accepts Assignment? A PIN No. 1234567893
31 - Provider SOF Y Date 01/01/2009 Facility? Y Dental? COB? N Frequency 33 - GRP No.
<u>Save</u>

13. The claim status will change to **CLN.** These claims are now ready to be prepared and transmitted. See **Prepare Claims** instructions.

Claim Import Function

When entering claims manually in the PC-ACE software and not importing a claims file in an Electronic Media Claims (EMC) format, skip this section entirely.

For more information on the importing of UB92 Version 6.0 formats and Print Image, please review the claim import section in the user manual.

PC-ACE ANSI 837 Claim Import Capability (Importing ANSI 837 Claim Files)

Providers can translate and import claims files in the ANSI 837 version format, for subsequent editing, ANSI 837 formatting and transmission. The ANSI 837 import capability by default is **not** activated in PC-ACE.

The Claim Import function can be utilized for MSP claims that need to be updated or corrected and your claims software is not capable of doing so.

This feature should only be activated if the ANSI 837 files have already been validated as structurally sound and complete. It **should not** be used as an ANSI 837 testing validation tool.

Note: Only those data elements supported in PC-ACE will be imported from the ANSI 837 file. Any unsupported segments and data elements present in the imported ANSI 837 file will be ignored.

To **activate** this feature for importing ANSI 837 4010A1X12 files, perform the following:

1. From the PC-ACE main toolbar select **File, then Preferences** menu items and login when prompted (Figure 74).



- 2. While viewing the Preferences screen, type the ampersand (&) character (i.e., **<SHIFT>7**). An additional tab labeled **System** will appear.
- 3. Select the **System** tab and check the **Enable Professional ANSI 837 claim import function** option.
- 4. Select **OK** to save the changes. These new settings will take effect immediately. (Figure 75)



- 5. Ensure all provider records are set up prior to importing files (See instructions on adding/checking a provider record).
- 6. Name the claim import files with a *dot* DAT (.DAT) file extension and copy them into the C:\WINPCACE\IMP1500 directory (Figure 76).

lame	Date modified	Туре	Size
🍘 ansi_int.tmp	5/9/2022 1:52 PM	TMP File	4 KB
🍓 Ansi837h.ctl	5/27/2009 12:43 PM	CTL File	4 KB
Ansi837h.imp	9/1/2015 6:25 PM	IMP File	77 KB
G CLAIMS.DAT	6/3/2022 10:20 AM	UltraEdit Docume	5 KB
mapcntlh.win	3/14/2007 11:19 AM	WIN File	10 KB
Mapcntlh.wv2	6/17/2019 2:20 AM	WV2 File	11 KB
Mapcntlh.wv3	6/17/2019 2:20 AM	WV3 File	12 KB
Mapoffh.win	1/5/2006 12:33 PM	WIN File	1 KB
Mapoffh.wv2	6/17/2019 2:20 AM	WV2 File	1 KB
Mapoffh.wv3	6/17/2019 2:20 AM	WV3 File	1 KB
plxlater.exe	6/6/2019 10:00 AM	Application	85 KB

Figure 76

7. On the main toolbar select the **Professional Claims Processing Menu** icon (Figure 77).



8. Select the Import Claims button (Figure 78).



9. The Professional Claim Import window will appear. Select Import (Figure 79).

port Progress		
Claim Import Totals	Count	Dollar Value
Imported Claims	0	0.00
Rejected Claims	0	0.00

Figure 79

10. A Confirm window will be

displayed. Select **OK** to continue (Figure 80).

Confirm	×	
2	Ready to start the claim import process?	
	OK Cancel	Figure 80

11. When the import process is complete an **Information** window will be displayed to indicate that the operation was completed successfully. Select **OK** (Figure 81).



- 12. The **Professional Claim Import (EMC File)** window will be displayed. The status bar indicates the operation is complete. The window should contain a count of imported and rejected claims as well as dollar amounts for each area.
- 13. It is possible to print a report of imported claim information. Click on the **View Results** button to view the report (Figure 82).

Claim import operation	complete		
Claim Import Totals Imported Claims Rejected Claims	Count	Dollar Value 25.00 0.00	
<u>V</u> iew Results		Close	Figure 82

14. The PC-ACE Claim Import Detail Report will appear in display mode (Figure 83).

A	BILITY	PC-ACE (LAIM IMPO	ORT DETAIL	REPORT		
	Import D	ate: 04/13/	2016 Sou:	rce: BSTRANS.	DAT		
LOB PROVIDER	PATIEN	T CTRL P	ATIENT NAME	SERVICE	E DATES	CHARGES	
мсв	SMITHJ	M99900000 St	ith, John	02/02/13	02/02/13	\$25.00	
REPORT TOTALS		CLAIMS	BILLE	D CHARGES			
MEDICA	RE CLAIMS	1		\$25.00			
BLUE SHIE	LD CLAIMS	0		\$0.00			
MEDICA	ID CLAIMS	0		\$0.00			
COMMERCI	AL CLAIMS	0		\$0.00			
TRICA	RE CLAIMS	0		\$0.00			
OTH	ER CLAIMS	0		\$0.00			
TOT	AL CLAIMS	1		\$25.00			
		570		200 J. 759 (57)			

15. Select the printer icon to print the report or select the **Close** button at the top of the report page to exit from the report view (Figure 84).

Professional Claim Im	port (EMC	File)	×	
Claim import operation o	complete			
Claim Import Totals – Imported Claims Rejected Claims	Count	Dollar Value 25.00 0.00		
				Figure 84

- 16. Select <u>Close</u> to return to the Professional Menu (EMC File).
- 17. Once a file of claims has been imported the user can then run the Process Claims option and "scrub" all the claims for editing. Claims that are imported must be processed.

Processing Reactivated or Imported Claims

Claims that have been reactivated or imported need to be processed before preparing the claims file. Newly entered claims do not need to be processed before being prepared.

1. On the main toolbar select the **Professional Claims Processing Menu** icon (Figure 85).



2. Select the Process Claims button (Figure 86).

🇰 P	rofessional Cl	aims Menu		X
File	View Roster	Maintain		
	Import Clain	ns	E <u>n</u> ter Claims	
		List Claims		
	Process Cla	ms	Prep <u>a</u> re Claims	

3. The **Automated Claim Processing** window will be displayed. Fill out any fields desired or leave all fields blank and select the **Process** button (Figure 87).



LOB:	The line of business of claims to be processed
TOB:	Constrain the data to process only a certain type of bill
Provider:	Constrain the data to process only the selected provider's claims
Present claim with errors:	Check to present claims with errors for immediate editing if the claims were not cleaned up while in claims list

4. A Confirm window will be displayed. Select OK (Figure 88).



Figure 88

5. When the process claims is complete an Information window will be displayed to

indicate that the operation was completed successfully. Select the OK button (Figure 89).



6. The Automated Claim Processing window will be displayed which gives the user a visual of the total number of claims that were processed clean (no errors), processed with errors and/or unprocessed claims (like duplicates) (Figure 90).

Automated Claim Processing		>	
Claim processing complete.			
Claim Processing Totals	Count	Dollar Value	
Processed Clean (No Errors)	2	4590.00	
Processed With Errors	0	0.00	
Unprocessed Claims	0	0.00	
<u>V</u> iew Results		<u>C</u> lose	 Fie

7. Select the Close button or select the View Results button.

8. When the View Results button is selected, the Adobe Acrobat will display the report, select the printer icon to send the report to the printer or select Close to return to the Professional claims list window (Figure 91).

90



	ABILITY PC-ACE CLAIM PROCESSING DETAIL REPORT Process Date/Time: 04/13/2016 16:56:30							
LOB	PROVIDER	PATIENT	CTRL	PATIENT	NAME	SERVICE	DATES	CHARGES
MCB	1234567893	SMITHJN	99900000	SMITH, J	OHN	02/02/13	02/02/13	25.00
REPO	RT TOTALS:		CLAIMS		BILLED	CHARGES		
	MEDICARE	CLAIMS	1			\$25.00		
	BLUE SHIELD	CLAIMS	0			\$0.00		
	MEDICAID	CLAIMS	0			\$0.00		
	COMMERCIAL	CLAIMS	0			\$0.00		
	TRICARE	CLAIMS	0			\$0.00		
	OTHER	CLAIMS	0			\$0.00		
	TOTAL	CLAIMS	1			\$25.00		

Figure 91

Reactivating an Entire Batch of Claims

Changes cannot be made to a batch of claims that has been reactivated. This operation will restore the batch of claims so that it can be retransmitted. When changes need to be made to claims that have already been transmitted, see the section titled **Reactivating Claims**.

- 1. In the **Professional Claims Menu** window, select the **Maintain Menu and select Transmission Log**. The **Professional Claims Transmission Log** window will be displayed.
- 2. Select the batch of claims to reactivate. When uncertain which batch should be selected, highlight the line, then **select** the **View Details** button to see Transmission Detail report for the batch.
- 3. Once it has been determined which batch of claims to reactivate, **highlight** the line and select the **Reactivate** button. Read each window that pops up, then select **OK** in each.
- 4. Do **not** prepare the claims file when reactivating an entire batch of claims. Simply transmit the claims file as normal.

Section 5 - Prepare Claims Function

Medicare claims must be prepared and transmitted using communication software before another batch can be prepared. Failure to follow these instructions will overwrite the previous claim file. When ready to prepare claims for transmission, do the following:

1. Select **PROF** from the **PC-ACE Claims Processing System** main menu (Figure 92).



2. Select Prepare Claims (Figure 93).

a.



3. The **Professional Claims Prepare for Transmission** box appears Select **Prepare Claims**. (Figure 94).

I OB: CLAIRS Matching		
Payer: << All Payers for	LOB(s)>>	~
Provider: << All Providers	for Payer(s) >>	-
Submission Status	Include Error Claims?	
C Test	No	

4. The **Confirm** box appears and states, "Ready to prepare selected Professional claims for transmission?" Select OK. (Figure 95).



5. The **Information** box appears and states, "The claim operation has completed successfully." Select **OK.** (Figure 96).

Informa	tion	
(į)	The claim prepare operation has completed successfully.	
		Figure 96

- 6. The Claim Prepare for Transmission box appears (Figure 97).
- 7. Select View Results.

a.

Claim Prepare For Transmission	
Claim prepare operation complete	
Prepare Totals Count Dollar Value	
Prepared Clean13150.00	
Rejected00.00	
	Figure 97
View Results	l igore //

8. **PC-ACE Transmission Detail Report** will appear. To print this report, select the Print icon (top of tool bar, to the left of the <u>Close button</u>). This report does not confirm the transmission of claims. (Figure 98)

Operation of the second s		<u>^</u>
ABTI TAY I DO-AOD ADAMOUT COT	N DEMATI DEDODE	
Prepare Date: 04/13/2016 Archive: B516	0413.002 Format: ANS	I (05031)
		- (0000007)
PROV # / NPI PCN	PATIENT NAME	STATUS
SUBSCRIBER ID SERVICE DATES CRAM	UED TREY	JERIAL
LOB: MCB PAYER: 13202 - MEDICARE PART B - NY	(DOWNSTATE)	
1234567893 1234567893 SMITHJN999000000A	SMITH, JOHN	
999000000A 02/02/13 02/02/13	\$25.00 1	000080
PROVIDER TOTAL: 1234567893		
COUNT: 1 CHARGES:	\$25.00	
LOB/PAYER TOTAL: MCB / 13202 - MEDICARE PART B -	NY (DOWNSTATE)	
COUNT: 1 CHARGES:	\$25.00	
REPORT TOTALS:		
	COF 00	

9. The preparation of claims has now been completed. Prepared claims must be transmitted. Continue to the transmission process using the NSV's software.

Section 6 - Transmission Process

Network Service Vendor

All submitters should connect through a NSV and follow their connection/transmission instructions provided by the NSV to send and receive files.

Note: For Part B, the claims file to be transmitted created by PC-ACE will be named **BTRANS.DAT** by default and will be located in the **C:\WINPCACE** directory.

Please see the list of NSVs listed on our website under the **Resources > EDI Enrollment (on right side of page)** if one has not already been selected.

Transmission Reports

Once the claim file has been sent, three reports (TRN, 999 and 277CA) will be available for download.

TRN-Transaction Acknowledgement (available within a few minutes after transmission. **Note:** Some network software vendors do not update or refresh right away. The file may take 15 minutes or so to become available for download).

• Look for "No input validation problems subsequent reports to follow" (Figure 99).

Contact the NGS EDI Help Desk if any errors appear:

- o **J6:** 877-273-4334
- o **JK:** 888-379-9132

TRN.BSTRANS.DAT.TXT - Notepad	
File Edit Format View Help	
Transaction Acknowledgement	
Time Stamp = 20140325144354 File Name = BSTRANS.DAT Trading Partner Id = NYBNNNNNN@NYBNNNNN Original Filesize = 1109	
No input validation problemssubsequent reports to follow***	
1 envelopes processed out of 1 identified	Figure

999 and 277CA Reports:

999 and 277CA files must first be imported into PC-ACE in order to view them in a readable format (available up to two hours following transmission).

Importing and Reading the 999 and 277CA Reports

1. Open PC-ACE and click on File then Preferences (Figure 100).

🛄 ABILITY PC-A	CE Claims Pro	cessi			
<u>File View Secu</u>	urity <u>H</u> elp				
Preferences	←		1	202	
Exit	Alt+X		8.22		
		_			Figure

2. Check the first box highlighted. To view only rejected claims in the 277CA report, check the second highlighted box also. To view both accepted and rejected claims in the 277CA report, leave the second box unchecked (Figure 101).



3. In order for PC-ACE to read 999 or 277CA files, they must be saved into the proper subfolder within the WINPCACE folder (Figure 102):

277CA files need to be saved in the Stat1500 (Part B) subfolder of the ANSI 277 folder. **999** files need to be saved in the Ack1500 (Part B) subfolder of the ANSI 997 Folder.

WINPCACE	
File Edit View Favorites Tools Help	2
🔆 Back 🔹 🕥 - 🏂 🔎 Search 🔊 Folders 🕼 🕼 💓 🗙 🍫 🛄 - 🧏 Folder Sync	
ddress 🛅 C:\WINPCACE	Go
olders	×
	-
🕀 🧰 Ansi271	
🖂 🧰 Ansi277	
E Stat1500 Save the 277CA in the C:\WINPCACE\Ansi277\Stat1500	
🗉 🛅 Statub92	
🖃 🧰 Ansi997	
Ack1500 Save the 999 in the C:\WINPCACE\Ansi997\Ack1500	
E 🗎 Ackub92	-
objects (Disk free space: 2.00 GB) 48.7 MB	

Note: This process can be set to run from a batch command file. See Appendix A at the end of this document for instructions.

4. Once the report files have been moved to the proper folder location, go to the Professional Claims Menu. Select the **Maintain** menu item, then **Acknowledgement File Log** to read the 999 (Figure 103).



5. The following screen will be displayed to read the 999. From the Acknowledgement File Log screen, select the 999 to be displayed and select View Report (Figure 104).

See **Appendix A** for instructions on how to adjust the length of time archived copies are maintained in the system.

Date	Time	Serial No	Status	Sender	Receiver	Trans Set #	Included	Received	Accepted	Arc 🔺
03/15/2014	15:22	000065	A	13202	SUBMITTERID	0001	1	1	1	AH
4										<u> </u>
•										<u> </u>

- Look for (Figure 105): Transaction Set Status (IK501): A - Accepted Functional Group Status (AK901): A - Accepted
- If the 999 is **rejected**, no further editing is done and no further reports are created.
- If the 999 is **accepted** or **accepted with errors**, a third report will be received (the **277CA** report)
- To print the report, select the **Print** icon.



6. To read the 277CA, from the Professional Claim Menu, select **Maintain** and **Claim Acknowledgement Log** (Figure 106).



The following screen will be displayed to read the 277CA. From the Acknowledgement File Log screen, select the 277CA to be displayed and select **View Ack Report** (Figure 107).

1	🛄 Claim Acl	knowle	dgment Log							
ł	Date	Time	Sender	Receiver	# Ack	ISA Ctl. #	Group Ctl #	Trans Set #	Archive File	^
	12/17/2013	04:56	13101	SUBMITTER ID	3	000089617	1	000000001	RU131217.002	
I										
l										
I										a
I										
I										
I										
I										× -
										<u> </u>
	<u>V</u> iew Ack	Report	<u>P</u> ost Re	esponse File	<u>D</u> ele	te	<u>R</u> efresh		<u></u> lo	se

Look for **Total Accepted Quantity.** Any claims that **reject** will need to be **corrected** and **resubmitted** (Figure 108):



Scroll down to the **Claim Acknowledgement** for the patient information on each claim and it will show all the details for each claim submitted (Figure 109).

- Claim number
- Patient name/number
- Provider NPI
- HIC Number
- ICN/DCN
- Total charges



Appendix A: Adjusting Archived Reports Settings

The length of time that archived copies of 999 and 277CA files are kept can be adjusted. From the main menu of PC-ACE, go to **File**, **Preferences**, and click the **Misc** tab (Figure 110).

If desired, adjust the first two fields to indicate how long to keep the archived reports. The duration has been set to 1000 days in the example below.

Preferences
General Claim List Claim Import Printing Data Comm Misc
Miscellaneous Preferences
✓ Purge archived EMC transmission files after 1000 → days
✓ Purge archived ANSI-997/999 acknowledgment files after 1000 ↔ days
Purge archived ANSI-824 acknowledgment files after 90 👘 days
Purge archived ANSI-277 claim status response or ack files after 1000 📩 days
Purge archived ANSI-271 eligibility benefit response files after 180 🖉 days
✓ Purge claim activity log files after 10 → days
✓ Pack database files prior to system backup
Limit initial claim list display of transmitted/paid claims to most recent 24 👘 months
Adobe Acrobat Reader (must be version 4.0 or later):
c:\Program Files\Adobe\Reader 11.0\Reader\AcroRd32.exe
OK Cancel

Appendix B: Setting up Shortcuts for File Locations

To assist in the placement of new reports shortcuts can be created (Figure 111).



Click on Windows symbol and locate Windows Systems then select File **Explore** (Figure 112).



Locate WINPCACE under Windows ©: Double click on the WINPCACE folder (Figure 113).

🛅 Ansi271	
🛅 Ansi277 🔶 🗕	
🚞 Ansi997 👘	Figure 113

Double click on the ANSI 277 folder for a 277 shortcut. If desired, repeat this process for A 999 shortcut in which the 997 folder should be selected (Figure 114).



Figure 114

Right click **Stat1500** folder for Part B (Figure 115).



Select Send To and then Select Desktop (create shortcut)

Right click on the new folder and rename the folder (i.e., 277CA Reports) with the new folder on the desktop, place all 277CA reports into this folder.

To create a shortcut for 999 reports, repeat this process however, instead of selecting the ANIS277 folder select the ANSI997 folder and continue follow this process by renaming the folder (i.e., 999 Reports).

For further assistance please send an e-mail to EDI at ngs_edi_parta@anthem.com or contact the EDI Help Desk:

- **J6**: 877-273-4334
- JK: 888-379-9132

Appendix C: Troubleshooting

When experiencing problems viewing 999 or 277CA reports, once saved in the correct subdirectory in PC-ACE, it is suggested that a system change be made.

Select **Start** from the desktop, then go to the **Control Panel** select **Folder Options**

Select the View tab

Under Hidden Files and Folders click on the Hide extensions for known file and folders check box, in order to remove the selection of that option, then click on the Show hidden files and folders radio button to change settings (Figure 116).

Folder Options
General View File Types Offline Files
Folder views You can apply the view (such as Details or Tiles) that you are using for this folder to all folders. Apply to All Folders
dvanced settings:
 Automatically search for network folders and printers Display file size information in folder tips Display simple folder view in Explorer's Folders list Display the contents of system folders Display the full path in the address bar Display the full path in the title bar Do not cache thumbnails
 Hidden files and folders Do not show hidden files and folders Show hidden files and folders Hide extensions for known file types
Restore <u>D</u> efaults
OK Cancel Apply

This will show any hidden file(s) in the WINPCACE directory.

Section 7 - How to Backup PC-ACE Claims Processing System

Each time the program is exited the following message will appear: "**Perform System Backup?**" An external backup file of the program must be maintained in the event a fatal system crash occurs.

1. To do this, the backup may be placed on the desktop by selecting the **Browse** button and choosing the hard drive (system C) and desktop (Figure 117 and 118).



2. This will put the backup file named PCACEPBK.ZIP on to the desktop (Figure 119).



3. From the desktop, save to a CD-ROM or flash drive. This external device must be maintained to ensure the restore capabilities in the event of a fatal system crash.

4. Select **My Computer** on the desktop and drag the PCACEPK.ZIP file from the desktop to the CD-ROM and then burn it, or drag to the flash drive (Figure 120).



Section 8 - Additional Features

Archiving Claims

Archiving claims in PC-ACE improves performance and helps prevent database corruption.

- 1. Select the **Prof** button on the main toolbar.
- 2. Select the List Claims button.
- 3. Select the File from the Menu at the top of the screen
- 4. Select Maintain Claim Archives
- 5. Select the **New** button and enter a name for the archive, then select **OK**.
- 6. Select the Close button. The Professional Claim List window will appear.
- 7. In the **Claims List Filter Options** section at the bottom of the **Professional Claim List** window, select the drop down arrow and select **TR-transmitted only**.
- Select the Advanced Filter Options button near the bottom of the Professional Claim List window, and enter the filter criteria. Example: If today's date is March 13, 2014, to archive everything except the past three months, do the following:
 - a. Check the box in front of **"Invert filter logic..."** at the bottom of the Advanced Claim List Filter Criteria window.
 - b. Enter **"01/01/2014"** in the first box in the **Transmit Date:** field, then enter **"3/13/2014"** in the second box.
 - c. Select OK.
 - d. The **Professional Claim List** window appears and the only claims displayed are those that were transmitted more than three months ago. These are the claims to be archived.
- 9. Select Filter from the Menu at the top of the screen and select Check All Claims. Each

claim now has a checkmark in the box at the left of the line it is on.

- 10. Select the File Menu and select Open Claim Archive
- 11. Double-click the archive that was created in the steps above. An information window will pop up. Read the contents, then select **OK**.
- 12. Select the Actions Menu and select Archive All Checked Claims (near the bottom of the Actions menu.) Do not select Archive Selected Claim, as that will only archive the claim that is highlighted.
- 13. An information window will appear. Read the contents, and then select **OK**.
- 14. The claims are no longer shown in the list. They are not gone; they have been stored in the archive. To see these claims, select the **File** menu, and then select **View Archived Claims**.

Note: Do the following to view these claims again once PC-ACE has been exited:

- a. **Open** the claims list
- b. Select the File Menu and select Open Claim Archive.
- c. Double-click the archive to view, read the information in the pop-up information window, and select **OK**.
- d. Select the File Menu and select View Archived Claims.
- e. To see current claims, select the File Menu and select View Current Claims.

Transferring PC-ACE to Another Computer

- 1. On the old computer, upgrade PC-ACE to the current version.
- 2. On the new computer, **install** the full installation of the current version from our Web site.
- 3. On the old computer, **open** PC-ACE.
- 4. On the main toolbar, select the **last** button, which has a gear and a wrench on a French flag.
- 5. Sign in. The **System Utilities** window is displayed, the **Backup/Restore** tab should be selected and the **Backup** sub tab displays the text "This utility performs a backup..."
- 6. Select the small button with three dots on it at the right end of the **Destination Drive** or **Folder** field.
- 7. In the Select **Backup Destination Directory** window, select the drop down arrow at the right end of the "Look in" field, select **Desktop** which should be at the very top of the list, then select the **Open** button. The **System Utilities** window will be displayed.
- 8. Select the **Start Backup** button and select the **OK** button in the **Confirm** window.
- After the backup operation completes, the Information window will display. If the text states "The backup operation has completed successfully" then select the OK button.
 Note: If the text indicates that the backup failed, please contact the NGS EDI Help Desk:

J6: 877-273-4334 **JK:** 888-379-9132.

- 10. In the System Utilities window, select the Validate sub tab, browse to the Desktop as in the earlier steps, then select the Start Validate button, select the OK button in the Confirm window. When the validation is complete, the Information window will be displayed with the text "The validation operation has completed successfully:" Note: If the text indicates that the validation failed, please contact the NGS EDI Help Desk.
- 11. Select the **OK** button in the **Information** window and select the **Close** button in the

System Utilities window.

- 12. The backup file on the desktop is named PCACEPBK.ZIP. **Copy** this file to the **Desktop** of the new computer.
- 13. On the new computer, open PC-ACE and on the main toolbar, select the last button, which has a gear and a wrench on a French flag (as directed above).
- 14. Sign in. The **System Utilities** window is displayed, the **Backup/Restore** tab should be selected and the **Backup** sub tab displays the text "This utility performs a backup..."
- 15. Select the **Restore** sub tab, browse to the Desktop, and select the **Open** button. It is not necessary to select the file because the program knows the file name already.
- 16. Continue with the restore, following the prompts. Once it's complete, PC-ACE on the new computer is identical to what was on the old computer.