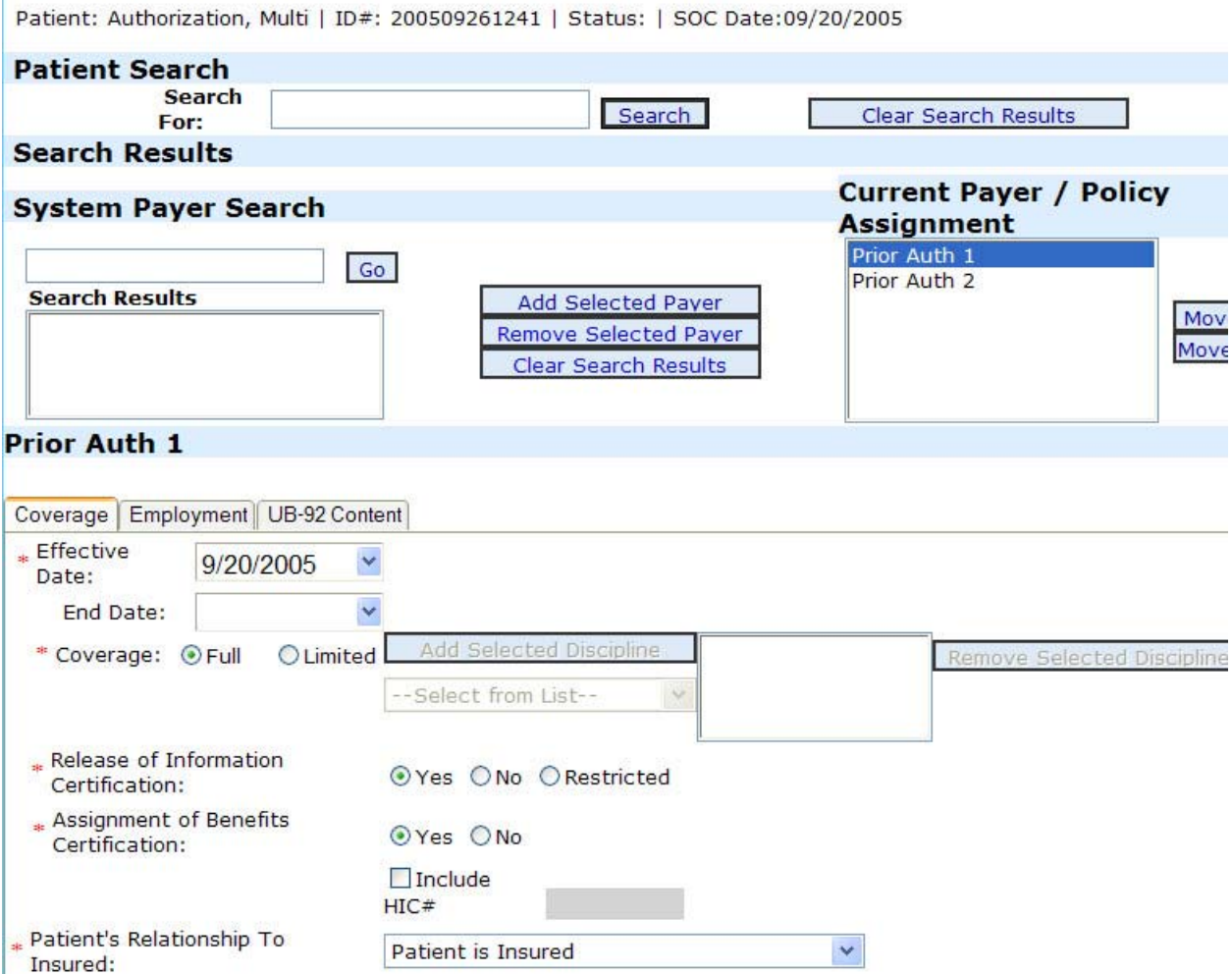# Instructions for multiple payers

Action / Instruction	Screen Shot
Scenario: Patient has two payers, each responsible for different disciplines. In this example, payer1 'Prior Auth 1' is responsible for RN visits and payer2 'Prior Auth 2' is responsible for PCA visits.	
1. FINANCIAL-Billing-Payer/Policy Assignment: search/add payer1.	Patient: Authorization, Multi | ID#: 200509261241 | Status: | SOC Date:09/20/2005 **Patient Search** Search For: [ ] [Search] [Clear Search Results] **Search Results** **System Payer Search** [ ] [Go] Search Results [ ] [Add Selected Payer] [Remove Selected Payer] [Clear Search Results] **Current Payer / Policy Assignment** Prior Auth 1 Prior Auth 2 [Move Up] [Move Dow]

Action / Instruction	Screen Shot

2. Complete the required fields for payer1.	Patient: Authorization, Multi | ID#: 200509261241 | Status: | SOC Date:09/20/2005
	
	Patient Search
	Search For: [_____] [Search] [Clear Search Results]
	Search Results
	System Payer Search **Current Payer / Policy Assignment**
	[_____] [Go]
	Search Results [Add Selected Payer] Prior Auth 1
	   [Remove Selected Payer] Prior Auth 2 Mov
	   [Clear Search Results] Move
	
	Prior Auth 1
	
	Coverage | Employment | UB-92 Content
	* Effective Date: 9/20/2005
	End Date: [____]
	* Coverage: ⊙Full ○Limited [Add Selected Discipline] [____] [Remove Selected Discipline]
	--Select from List--
	* Release of Information Certification: ⊙Yes ○No ○Restricted
	* Assignment of Benefits Certification: ⊙Yes ○No
	☐Include
	HIC# [____]
	* Patient's Relationship To Insured: Patient is Insured

3. Repeat Steps 1 & 2 for payer2.	[N/A]

Action / Instruction	Screen Shot
4. Initially, when the service journals are entered, they have a default status of PENDING (not confirmed). You should 'confirm' the service journals for payer1 (RN visits).	**SJ Transactions** | **View PDF** | [Export to Excel] | [Expand All] | [Collapse All] Drag a column header here to group by that column <table><tr><th>Worker ID</th><th>Worker Name</th><th>Start Date</th><th>Start Time</th><th>End Time</th><th>Duration</th><th>SJ Code</th><th>Patient Name</th><th>Cnf</th><th>Blb</th><th>Pyb</th><th>SJ Status</th><th>Sup</th><th>WrkCst</th><th>WorkerType</th><th>Discipline</th></tr><tr><td>5555509876</td><td>Jones, Michael J</td><td>09/20/2005</td><td>09/20/2005 01:49 PM</td><td>09/20/2005 02:49 PM</td><td>60</td><td>AD</td><td>Authorization, Multi</td><td>N</td><td>Y</td><td>Y</td><td>Pending</td><td>N</td><td>N</td><td>Staff</td><td>RN</td></tr><tr><td>632457340384001020</td><td>Jones, Bob</td><td>09/22/2005</td><td></td><td></td><td>45</td><td>RV</td><td>Authorization, Multi</td><td>N</td><td>Y</td><td>Y</td><td>Pending</td><td>N</td><td>N</td><td>Full-time</td><td>PCA</td></tr></table>

Action / Instruction	Screen Shot
5. FINANCIAL-Invoice Processing: Run billing cycle for payer1.	**Billing Calendar Cycle and System Payer Selection** Billing Cycle: WK - Weekly Payer: Prior Auth 1 Add Selected Payer System Payer(s) To Be Billed Prior Auth 1 **Cycle Options** ☑ Sort Claims By System Payer Sort Claim By: ○ Agency-Assigned ID ⊙ Patient Last Name Cycle To Process: 09/18/2005 - 09/24/2005 Start View / Print Detail Status: Complete **Cycle Results** All System Payers **CLEAN Claims** Claims "Ready To Go": 1 $110.00 Create Electronic File by Pay Print Required Claims by Pay View / Print Detail Print Optional Claims by Pay **PENDED Claims** Plan of Care Needed: 0 $0.00 POC MD Signature Needed: 0 $0.00 View / Print Detail VO MD Signature Needed: 0 $0.00 View / Print Corrective Action R Last Bill Date: Claim Payer Name: Prior Auth 1 Payer NAIC #: Payer NAIC Sub-Code: Billing Calendar Cycle: WK - Weekly Default Billing Output: Electronic Claim File ASC X12N 837 (004010X096A1): Paper Claim Document Claim Form Template: Insurance_UB92 Save / Exit Cancel / Exit

Action / Instruction	Screen Shot
6. [sample UB-92 for payer1 showing RN-SKILLED NURSING visit]	

Action / Instruction	Screen Shot
7. Initially, when the service journals are entered, they have a default status of PENDING (not confirmed). You will now see that the RN visit has a status of BILLED. You should 'confirm' the service journals for payer2 (PCA visits).	SJ Transactions | **View PDF** | [Export to Excel] | [Expand All] | [Collapse All] Drag a column header here to group by that column | Worker ID	Worker Name	Start Date	Start Time	End Time	Duration	SJ Code	Patient Name	Cnf	Blb	Pyb	SJ Status	Sup	WrkCst	WorkerType	Discipline
---	---	---	---	---	---	---	---	---	---	---	---	---	---	---	---
5555509876	Jones, Michael J	09/20/2005	09/20/2005 01:49 PM	09/20/2005 02:49 PM	60	AD	Authorization, Multi	Y	Y	Y	Billed	N	N	Staff	RN
632457340384001020	Jones, Bob	09/22/2005			45	RV	Authorization, Multi	Y	Y	Y	Confirmed	N	N	Full-time	PCA	

Action / Instruction	Screen Shot
8. Repeat Step 5 for payer2.	**Billing Calendar Cycle and System Payer Selection** **System Payer(s) To Be Billed** Prior Auth 2 Billing Cycle: WK - Weekly Payer: Prior Auth 2 — Add Selected Payer **Cycle Options** Sort Claim By: ○ Agency-Assigned ID ⊙ Patient Last Name ☑ Sort Claims By System Payer Cycle To Process: 09/18/2005 - 09/24/2005 Start	View / Print Detail — Status: Complete **Cycle Results** All System Payers **CLEAN Claims** — Create Electronic File by Pay	Print Required Claims by Pay Claims "Ready To Go": 1 — $45.00 — View / Print Detail — Print Optional Claims by Pay **PENDED Claims** Plan of Care Needed: 0 — $0.00 POC MD Signature Needed: 0 — $0.00 — View / Print Detail VO MD Signature Needed: 0 — $0.00 — View / Print Corrective Action R Last Bill Date: — Billing Calendar Cycle: WK - Weekly Claim Payer Name: Prior Auth2 — Default Billing Output: ○ Electronic Claim File Payer NAIC #: — ASC X12N 837 (004010X096A1): Payer NAIC Sub-Code: — ● Paper Claim Document Claim Form Template: Insurance_UB92 Save / Exit — Cancel / Exit

Action / Instruction	Screen Shot
9. [sample UB-92 for payer2 showing PCA-AIDE/HOME HEALTH visit]	