



REGISTRATION ALERT

MARCH 2006

FEBRUARY AUDIT SCORES



INSIDE THIS ISSUE:

Medicare Card Information	2
Hurricane Katrina & Rita Registrations	2
United Health Care	2
Qualchoice Prior - Authorization	2
Voicert	3
Name Entry Policy	4
Medicare Services	5
April Training Calendar	6

100%

Evon Ford- ACRC 6

99%-95%

Lisa Sims - ACRC 6

Doug Ritchie - NEUM

Tayae Marks- Admissions

Brandy Jones- Endocrine

94%-90%

Shantell Nelson- Admissions

Kim Tyler- Admissions

Arnetia Brown- Admissions

Sharon Suen- Endocrine

Veta Enoch- HANT

Fonda Childress- HANT

Vivian Bonds- ACRC 7

Betty Bird-ACRC6

FEBRUARY S.T.A.R. STRIVING TOGETHER, ACHIEVING RESULTS



Please join us in recognizing Kim Tyler as our S.T.A.R. Award recipient for February 2006. Kim was nominated for her extraordinary demonstration of being a quality team player. Kim works as a Patient Access Coordinator in the Admissions department. Mary Nellums, Manager of Central Admissions, had this to say about her, "Kim is a solid employee who works well under pressure, she is very flexible, and often picks up the slack when any area of Central Admissions is short staffed." Kim is a very reliable and dependable asset to the Admissions department. This combination of dedication and team spirit have proved worthy of our recognition. Congratulations Kim!



Don't forget to forward your nominations for the STAR AWARD to the RIST Team. Go to the RIST webpage to print a copy of the Nomination form and send it to us at Slot 618!

SPECIAL POINTS OF INTEREST:

- New Medicare Card
- Hurricane Katrina & Rita Patients
- Medicare Advantage
- Voicert
- Name Entry Policy
- Training
- Medicare IVR Line

Medicare Cards

Karen Lamoreaux

What if a patient needs a new Medicare Card?

If the patient needs a replacement card, and their information is the same, they can do it over the telephone by calling 1-800-MEDICARE or going online to <http://www.medicare.gov/>.



However, *if a change needs to be made* to the name, it must be done by mail or in person with the Social Security Office. The Social Security Administration will not change the name over the phone. The patient must complete an application form, Form SS-5, and show proof of identity at the SS office such as driver's license, State ID or marriage certificate. The form may be downloaded from the SS web page and printed in advance. Only original forms of ID are accepted, no photocopies are allowed. This is to protect the identity of the patient a prevent fraud.

Registering Hurricane Katrina & Rita Patients

Patient Business Services and Faculty Group Practice

FEMA Officials have stated that all Arkansas shelters for hurricane victims were closed as of January 7, 2006. UAMS will use that date as the cutoff for designating victims under the HK or HR codes. Care provided after that date is subject to routine billing and collection. Evacuees who have permanently relocated to the state of Arkansas may be eligible for state Medicaid or the Discount Program. Hurricane evacuees with questions about their hospital or physician bills should be directed to Patient Business Services and/or the Faculty Group Practice.

United Healthcare Password....

Revenue Integrity Specialist Team

We have a new password for the United Healthcare Website. This information may be obtained through the Managed Care Contract Information System. Do not change this information, even if prompted. If anyone does not have access to the Managed Care Contract Information Systems, please contact Anita Allaben by email.

Qualchoice Prior Authorization Requirements

Beth Wheeler, MCPG

Two new procedures have been added to the Qualchoice authorization list, **Breast MRI and BRCA Testing**.

For Current information regarding Qualchoice Prior Authorization Requirements please access the following website: <https://www.qcark.com/presence/release/providerforms.asp> or it may be viewed on the Managed Care Contract Information Profile then click on "Prior Authorization Data" in the Qualchoice, Gen profile.



Still unsure about using Voicert?

By Salonica Gray

Voicert has been used in the Hospital Admissions department since January 2005. Since then, Voicert has been directly responsible for overturning at least **\$134,543.61** in denied claims for UAMS! In most cases, insurance companies try to deny the claim, saying that we never called to get a precert. By using Voicert, we were able to refer to the calls where the insurance companies had given us the authorizations, and they paid up.

Check out these average times for Voicert Automated Call:

AFMC

To give demographic info: 2 minutes

To give clinical info: 4 minutes

Length of time between when you hang up and AFMC calls back with the preauth number: 15-20 minutes

Note: You can call AFMC anytime of day and leave the info; they will return calls when their offices open.

You can do other important stuff in the meantime!

To listen to reply with preauth number: 21 seconds

United Healthcare

To give demographic info: 2 minutes 30 seconds

To listen to reply with preauth number: 34 seconds

You can do all of your UHCs in the morning and have your replies back by early afternoon.

QualChoice

To give demographic info: 1 minute 30 seconds

To listen to reply with preauth number: 27 seconds

In addition to the time saved, you can also use Voicert to:

- record calls made on PCP referrals
- record new patient phone interviews
- record financial counseling phone conversations
- prove what you were told about precert requirements for a particular procedure
- double check your CPI notes
- refer someone from another area (like Admissions or Radiology) to the call you already made in case they have questions about it

You determine how to make Voicert work in your favor!

For more information on using Voicert, contact Holly Jones at 526-7794.

Name Entry Policy

From Oscar & Medipac Manual

Name Entry

The following instructions are provided for your assistance when entering a person’s name into the system. The specific format is used to help eliminate the possibility of duplicate entries and CPI Numbers by aiding in the search procedures. The use of this policy will also help in proper billing for the accounts.

Many problems will arise if this procedure is not followed and a duplicate Medical Record number is entered into the system. Not only will the billing system be compromised for the patient; the patient will end up with multiple medical record charts which could compromise the care and ultimately the health of the patient.

Format

Last Name, First Name Middle Initial (Enter Suffix in the Suffix field: JR, SR, etc) If patient does not have a middle name, enter a Comment to document the lack of a middle name in the “CPI Comment” field. *This only needs to be done once for the life of the account.*

Initials Used

Never use initials unless this is the patient’s legal name.

Middle Name Used As First

If the patient uses the middle name, enter last name, legal first name, and full middle name in the NAME FIELD. Enter the last name, and middle name in the ALIAS FIELD.

Nickname

If nickname is used enter legal name in the NAME FIELD and nickname in the ALIAS NAME.

Punctuation Rules

Never use punctuation in NAME FIELD. No periods, apostrophes, or dashes.

EXAMPLES: <u>WRONG</u>	<u>RIGHT</u>
O’MALLY	OMALLY
ST. JOHN	ST JOHN
VANBUREN	VAN BUREN



Hyphenated Names

Hyphenated names must be entered as follows:

Patient Legal Name: Alice P. Johnson-Smith

Name Field: SMITH, ALICE P JOHNSON

Alias Field: JOHNSON, ALICE P and SMITH, ALICE P

Name Alias Entry Names patient may also be known by, such as nicknames or maiden name. Alias names are marked by an * on the search parameter screen. In using this function it will help eliminate the possibility of duplicate entries and CPI numbers by aiding in the search procedures. View existing alias names or add new names by clicking on the Alias button on the **PERSON INFORMATION - I** screen.

Arkansas Medicare Services



Interactive Voice Response (IVR) Line Now Available to verify Medicare Part A & Part B Benefits.

***Note:** The IVR System will tell you if the patient has a Medicare Advantage Plan. However, when verifying through Omnipath; CMS is in the process of updating this information. So be mindful that Medicare Advantage information for Part B may not be provided.

For faster, more efficient service, we now have an Interactive Voice Response (IVR) line available. This feature allows you to obtain beneficiary eligibility, claim status, and check information. The IVR is simple to use and can be accessed from 6:00 a.m. to 6:00 p.m. Monday through Friday at 877-908-8434.

The system provides ongoing instructions to help you with your selections. When you become familiar with the IVR, you can move more quickly through the script and skip some of the recording.

Information provided by the IVR includes the amount submitted, the allowed amount, whether or not deductible was taken and if so, the amount, the paid amount, the paid date and the check number. If a claim was denied, the IVR will provide you with the reason as to why the claim was denied.

More specific information is now available, allowing you to attain the details if more than one charge is submitted on a claim. This specific information includes each submitted charge and the amount allowed, in addition to information about the three most recent Medicare checks on file for your provider number.

Before calling the IVR, please be sure to have the following information:

- Your five-digit or nine-digit Medicare Provider Number (if you are a performing provider in a clinic setting, the nine-digit Medicare Provider Number should be used).
- Patient's Medicare Number (Health Insurance Claim Number).
- Date of service.

For more information and IVR instructions, go to: <http://www.arkmedicare.com> and click on Provider Information.

Insurance Master Group Update

Inactivated Plan Codes

S06 Foster Farms

S50 One Health Plan

*Cross referenced to S51 Great West because all cards should have Great West logo

New Plan Code

P02 Protocol Tertiary Network



Editorial Advisory Committee

Editors

Revenue Integrity Specialist Team

Committee

Holly Hiryak	Carolyn Perrin	Mary Nellums
Holly Jones	Janet Beasley	Sandra Powell
Anita Allaben	Philip Baroni	Paul Rebsamen
Demetri Childs	Lizzie Comic	Richard Starks
Carol Gray	Salonica Gray	Joyce Steen
Martha Hall	Charlotte Nirenberg	Beth Wheeler

Holly Jones, Rev. Int. Mgr 526-7794

LaKeshia Burton	686-6718
Kristy Jones	686-6968
Karen Lamoreaux	686-5102
Donnell Montgomery	686-6274
Angela Taylor	603-1533

Thank you to everyone who contributed to the March issue of the Registration Alert. Ideas, suggestions, and articles are always welcomed.

To submit articles, please email "Revenue Integrity Specialist Team".

Access Personnel Education Calendar

April 2006

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1
2	3	4	5	6	7	8
HAPPY ACCESS WEEK !! April 2-8						
9	10	11	12	13 Strengthening Bridges Day 1	14	15
16  HAPPY EASTER!	17	18	19	20	21 Strengthening Bridges Day 3 & 4	22
23	24	25	26	27 Strengthening Bridges Day 2	28	29
30						

To register for education classes go to the Clinical Computer Training Center (CCTC) webpage on the UAMS Intranet; For Patient Access classes contact RIST; For Billing Forms sign up in Training Tracker.

www.uams.edu/rist www.uams.edu/cctc