

# LA Professional Billing Input

**LA Professional Input Billing** is a program that provides a way for the user to claim records that can be filed with Medicaid for reimbursement.

- **Before starting LA Professional Input Billing for the first time:** Be sure to obtain the ability to download monthly Medicaid eligibility files.
- **NOTE** - To have access for Medicaid billing, permissions must be set up by going to **System -> User Management -> select staff member -> Category of Medicaid -> Program of Professional Input Billing**.

Select Required Reporting > Entry > LA Professional Input Billing.

## Setup Options

**Year** - Defaults to the current year. A prior year may be accessed by clicking in the field and making the appropriate selection from the drop-down list.

**District** - Default value is based on the user's security settings. It will be limited to the user's district only.

**School** - Default value is based on the user's security settings. If the user is assigned to a school, the school default value will be the user's school site code. To access the entire district, select site 700.

**Billing Group** - Select the billing group. Click in the field to change the Billing Group number.

- **NOTE:** After creating a "Transmit" file, the program automatically creates the next billing group. **Transmit** is located under the **Action** tab, located in the top right corner of the page.

**Billing Perm** - This field allows for the custom Medicaid billable permission to be set so that the program logic will know which permission code to look for to determine if a student can be billed for. If no permission(s) is chosen only a list of students without permissions will populate.

**Import RN Consultations Only** - This option allows the user to limit the import of consultation records to only those that are given by RN nurses and will exclude consultation records created by nursing aids and assistant nurses.

**Import Supervisor Approved Only** - This option allows the user to limit the Import of Service Log records to only those that are approved by the Supervisor and will exclude Service Log records that have not been approved by a Supervisor.

**OK** - Click to continue.

Professional Input Billing Setup seinputMedicaid 02.09.2021

Year : 2021

District : 026

Schools : 009

Billing Group : 1

Billing Perm. :

Import RN Consultations Only

Import Supervisor Approved Only

OK

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### Initial Items to Complete/Review Before Beginning to Create Claim Records

Click on the **Action** button located in the upper right corner of the screen. The information is loaded on each student but can be changed if necessary, for an individual.

#### 1. Default Submit/Receive Values

**Set Default Submit/Receive Values**

**Submitter Information**

Organization Name : Testing  
Submitter ID# : 65421  
Contact Name : Testing 002  
Contact Phone : (318) 509-7070  
Contact Email :  
Contact Fax :

**Submitter Information**

Organization Name : LOUISIANA MEDICAID  
Receiver Code : LA-DHH-MEDICAID

**Submitter Information**

Provider ID# : 9876543  
NPI# : 1236547890  
Employer ID# : Testing  
Address Line 1 : Testing  
Address Line 2 :  
City : Shreveport  
State : LA  
Zip Code : 71106  
V/H Site Code : 123

Save Clear Cancel

Action

- Default Submit/Receive
- Default Claim Info
- Edit Default Referral Doctors
- Mass Update Default Referral Doctors
- Add Eligibility
- Create SER Export File
- Import Eligibility
- Import Consultation
- Import Vision/Hearing
- Import Vaccinations
- Import Service Provider Logs
- Import Therapy Claims
- Transmit
- Print Billing Summary

#### 2. Default Claim Information

**Set Default Claim Info**

**Claim Information**

Facility Code : 03 School  
Provider Signature on File : Y Yes  
Provider Accept Assignment Code : A Assigned  
Assignment of Benefits Indicator : Y Yes  
Release of Information : Y Yes, Provider has a Signed ...  
Patient Signature Source Code :  
Special Program Code :  
Was an EPSDT referral given to the patient? : Y Yes  
EPSDT Condition Indicator : S2 Under Treatment

**Service Information**

Product / Service ID Qualifier : HC Health Care Financing Ad...  
Unit of Basis for Measurement Code : UN Unit  
EPSDT involvement? : Y Yes

Save Clear Cancel

#### 3. Edit Default Referral Doctors

These are specific to each User and School, so if a new user to the program tries to use the program for the first time in Professional Input Billing, it is recommended that they set up their Default Referral Doctors.

#### 4. Mass Update Referral Doctors

To add a Vision/Hearing doctor to the list, fill in the area that pertains to the doctor. Once that has been done, select the **Save** button. Close the setup box.

#### 5. Add Eligibility

To add eligibility on a single student, click in the Student ID field to select the student. Select the Eligibility Year and Eligibility Month. Then enter the Medicaid Number. Lastly, click the Save Eligibility button.

NOTE: If entering the same student for multiple months, leave the window open and change the Year and Month and then click the Save Eligibility button again. Complete as many times as necessary.

#### 6. Create SER Export File

Select the Year, District, School, and As of Date.

Click OK.

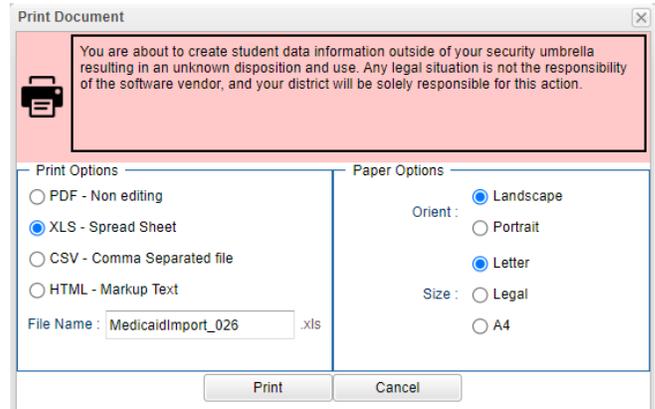
The server is contacted to retrieve the information.

Click the **Print** button to save the file to upload.

	SSN	First Name	Last Name	DOB	Zip	LocalID	LASID
37	901159483	BEVERLY	BENNETT	02/13/2014	71106	9039975	3018789229
38	901170875	BEVERLY	BERGERON	02/12/2008	71106	0486892	7499762208
39	901163794	BEVERLY	BOWERS	06/25/2016	71106	1099930	6397645722
40	901163630	BEVERLY	BROWN	06/06/2016	71106	1099921	7354060334
41	901163659	BEVERLY	DAVILA	06/07/2010	71106	1099972	9747143390
42	901163815	BEVERLY	DUPLESSIS	05/08/2016	71106	1099920	5795608008
43	901163662	BEVERLY	ELLIS	10/22/2010	71106	8000040	2287037087

Change the Print Option to **XLS – Spread Sheet**.

The File Name MUST have the **District Number** as the last 3 digits and must be an xls file. Do not change the file name. After submitting the file you may want to delete the file before the next submission so the system generated (1), (2), etc at the end of the file name is not created. This will cause a problem for the next submission.



Go to SER to upload your file. In SER, click the Tools icon in the upper right corner.

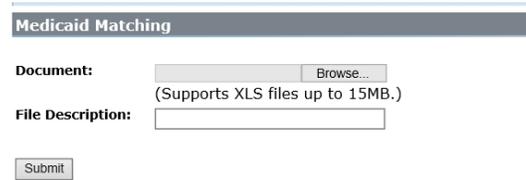


Choose Related Services/Medicaid Matching.

### [Related Services/Medicaid Matching](#)

Click here to see Related Services/Medicaid Matching.

Click Browse, find the xls file you saved, and enter a brief description. You may want to use the month and year. Click Submit.



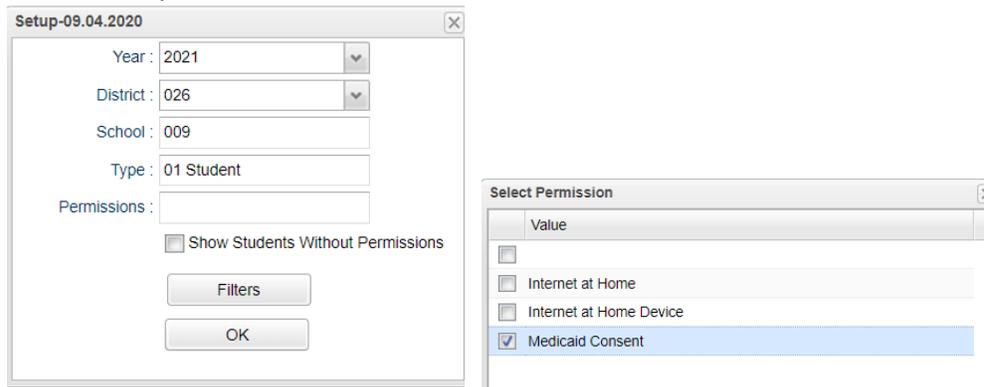
If the file is accepted, the fields will turn gray while it is “thinking” and return a list of processed files. The list is chronological with the newest at the end. Click the file name and save it to your computer.

Open the saved file using Excel and save it as a **csv file**.

If it doesn't accept the file, it will not do anything, including not giving you any error message.

## 7. Student Permission

The student permissions are added under Student Master>Loader> Custom Permission Loader.



Select Type: 01 Student. Select the Permission as district's Medicaid Consent. If only students without permission are needed, select Show Students Without Permissions. Then select any filters that apply. Click OK. The student names appear on the left and the Yes/No appear on the right.

Optional: You may want to place a No on each student and then proceed to change the No to a Yes on the ones that have permission signed by parents.

## 8. HR Master

Your HR Department will need to be sure that each RN is flagged with the proper object/function code for School Nurse which is 118-2134 and their Funding Source is not federally funded. Also each LPN needs to be flagged with the proper object/function code of 119-2134.

## 9. Import Eligibility

Each month, a Medicaid Eligibility file should be downloaded.

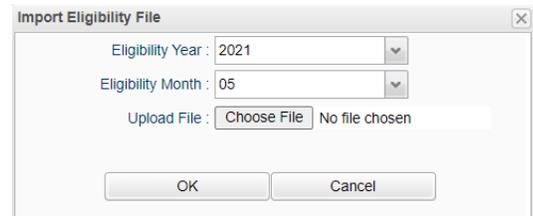
Select the Eligibility Year and the Eligibility Month.

Click on Choose File button, select the csv file to upload the file. Click OK.

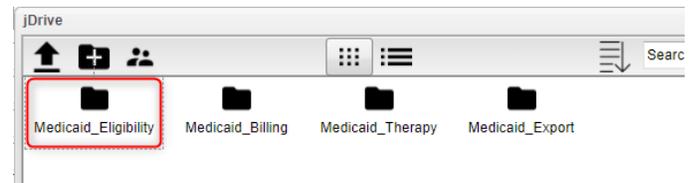
After the import process is completed, there will be a list of those that are not found in Student Master database.

Medicaid Eligibility Import Errors will be displayed with errors – most of these will be where the SSN is not in the database. These can be research by printing and investigating on LAMEDICAID.com, if necessary.

Your Eligibility file will be saved on your jdrive in the Medicaid Eligibility folder for future reference.



The other Medicaid folders will house any other Medicaid files used in all processing.



## 10. Import Consultation

In order to bill for Consultations, the consultation record must have a nurse of record be an RN Nurse in the Human Resource Master with an Object Function code of 118 2134 and is not fully federally funded.

The consultation records must also have a CPT Code and a DX Code. No consultation records will be imported by the LA Professional Input Billing program unless they have an RN Nurse of record that is not fully federally funded, a CPT Code, and a DX Code.

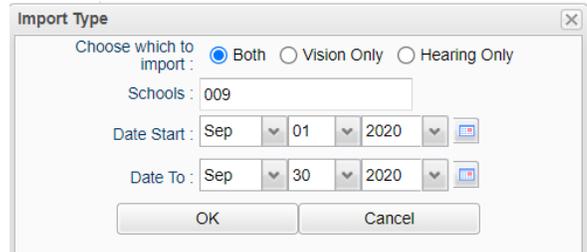
In order to bill for consultation records with the CPT Codes T1018, T1502, and T1002 the student needs to have an IHP that is/was active on the date of the service/consultation and be Medicaid eligible for the year and month that the service/consultation took place in. The IHP`s that the LA Professional Input Billing program`s logic looks at are found almost entirely in the Health System`s IHP tab. The only other place that the LA Professional Input Billing program logic will look for an IHP is the Health Care Plan Date field in the Special Ed Master`s IEP tab.

Even if a student does not have an active IHP on the date of the consultation the LA Professional Input Billing program will still import consultation records with the CPT Codes T1018, T1502, and T1002. The program will give you a warning in the Medicaid Consultation Claim Import Errors dialog letting you know that the user needs to double check that the student has an IHP on file somewhere so that Medicaid does not take back the money received after an audit.

In order to bill for consultation records with the CPT Code T1001 the student only needs to be Medicaid eligible for the year and month that the service/consultation took place in. An IHP is not required. It is important to note the purpose of this code. This does NOT include the assessment that the nurse conducts every time he/she sees a student. This would include any evaluation by the school nurse for which the parent would otherwise take their child to a clinic, etc. For example, a child coming to a school nurse for a possible broken bone. As result of the nurse`s findings, the parent would take the child to seek additional medical attention. This would be an allowable claim, according to Medicaid. A parent is probably not going to take a child with a skinned knee to a clinic/MD. Therefore, the LEA would not claim for this assessment. As such the Import Consultations Action logic will no longer default the CPT Code T1001 on any consultation record that it imports.

### 11. Import Vision / Hearing

Claims for vision/hearing records must have a nurse of record be a RN Nurse in Human Resource Master with an Object Function code of 118 2134 and is not fully federally funded.



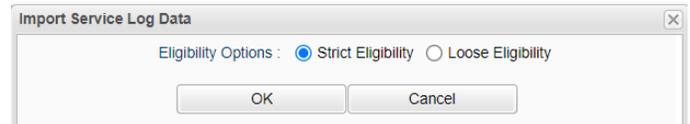
### 12. Import Service Provider Logs

**Strict Eligibility** - By selecting this option will force the logic to only import the Service Log records that occurred in the year and month of the student's Medicaid Eligibility record.

**Loose Eligibility** - By selecting this option will allow the logic to import the Service Log records for student's that have a Medicaid Eligibility record for a prior month.

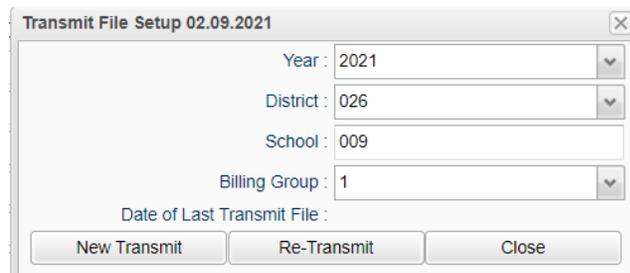
**OK** - Click to continue.

**Cancel** - Click to cancel.



### 13. Transmit

**NOTE:** Before getting started, the user will need to make sure they have RW access to the JDrive.



**Year** - Defaults to the current year. A prior year may be accessed by clicking in the field and making the appropriate selection from the drop-down list.

**District** - Default value is based on your security settings. You will be limited to your district only.

**School** - Default value is based on your security settings. If you are assigned to a school, the school default value will be your school site code. You will not be able to change this value. If you are a supervisor or other district office employee with access to the Student Information System, you will be able to run programs for one school, a small group of schools, or all schools in your district.

**Billing Group** - File build billing group.

**Date of Last Transmit File** - This is the date and time of the last time the file was transmitted.

**New Transmit** - Select this button if this is the first time the group is being transmitted.

**Re-Transmit** - Select this button if the group needs to be transmitted again.

- **NOTE** - After the transmit or re-transmit is complete a list of students with errors will be provided for correction to be made, then process/transmit again. The Transmit file is created and placed on the "JDrive". Next, download the file by clicking on the "JDrive". The file is placed in a folder **Medicaid**, then **Medicaid Billing**. Find the file and right click.

Select **Download**. The file opens in a window. Next right click anywhere on the file contents and select **Save As**. Select where the file will be saved the file on your computer.

**Close** - Select to close the setup box.

#### 14. Print Billing Summary

This is used to print the billing group summary to compare or reference when the remittance advice reports are downloaded from LAMedicaid.com

### Manually Adding Claims

The **Claim Information** tab appears by default when you open the program.

1. Select the Date of Service.
2. Select the Student. The student's name and Medicaid number are returned. If no number is returned you may want to check the LAMedicaid.com site.
3. Select the Service Provider. The provider's SSN is linked but does not display (XXX-XX-XXXX), the provider's name and the Claim Submitter's Identifier are returned.
4. Select the Reference Identification Code:

The screenshot shows a web form titled "Billing Group: 1". It is divided into two main sections: "Student Information" and "Provider Information".

**Student Information:**

- Date of Service: A date picker with three dropdown menus and a calendar icon.
- Student: A text input field.

**Provider Information:**

- Provider SSN: A text input field.
- Reference Identification Code: A dropdown menu.
- Date of Onset: A date picker with three dropdown menus and a calendar icon.
- Provider Org. Name or Last Name: A text input field.
- Provider First Name: A text input field.
- Provider Middle Name: A text input field.
- Provider Suffix: A text input field.

- 231H00000X Audiologist
- 1041C0700X Clinical Social Worker
- 101YP2500X Clinical Prof. Counselor
- 103TC0700X Clinical Psychologist/Psychiatrist
- 226300000X Kinesiotherapist
- 225X00000X Occupational Therapist
- 225100000X Physical Therapist
- 163WS0200X Registered Nurse
- 101YS0200X School Counselor
- 103TS0200X School Psychologist
- 1041S0200X School Social Worker
- 235Z00000X Speech-Language Pathologist

5. Many of the default information is entered.]
6. Enter the **Health Care Diagnosis Code 1**. (2,3,4 if needed)
7. The **Date of Service** is entered as the date at the top of the screen.
8. The **Product / Service ID Qualifier** is entered as default.
9. Enter the **Product / Service ID**. The ID and Submitted Charge Amount are returned.
10. Enter **Product / Device Modifier(s)** if needed. If two services are provided on the same day, a modifier is required.
11. Select one or more **Health Diagnosis Code Reference Number(s)** as applies. They are selected from the Health Care Diagnosis Code(s) entered above.

12. The default **Quantity** is 1. Change as needed.
13. Click the **New Service** button for the first service is entered. If another service is needed for other services reported to you by the provider, most information can be used with some information changed. Then click the **Save Service** button.

As the services are added they appear under **New Services** and **All Services**. Once the service is transmitted, they appear only under **All Services**.

New Services										
D	ID CODE	Prov SSN	PROV LNAME	PROV FNAME	PROV MNAME	PROV SUFFIX	CLAIM ID	Total	F.	

## View all Claims Tab

As the claims are entered, they appear as a summation of all claims within the group.

## Editing a Claim in a Billing Group

1. While on the **Claim Information** tab, enter any date in the **Date of Service** field. Next, click the **Student** field and select the student.

2. Scroll down to the **New Services** section of the screen. The services previously entered will be listed in rows.
3. Click on the row to be edited. This will populate the claim fields above.
4. Go to the field that needs changing, make the change and click the **Save Service** button.
5. A screen appears for (1) **Update Existing**, (2) **New Service** or (3) **Cancel**.
6. Select **Update Existing** to change the existing claim.