|  |
| --- |
| **Immunization Billing Project Work Plan \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County Health Department** |
| **ID** | **Description of Activities** |  | **Include**  | **Assigned To** | **Start Date** | **Due Date** | **Complete Date** | **Notes** |
| Yes | No | NA |
| **BILLING SYSTEM SET UP** |  |  |  |  |  |  |  |  |  |
|  1.10  | **Software Set Up Verifications** |  |  |  |  |  |  |  |  |  |
|  1.11  | Correct CPT codes are used |   |   |   |   |   |   |   |   |   |
|  1.12  | CPT codes are in PMS |   |   |   |   |   |   |   |   |   |
|  1.13  | Correct NDC codes are used |   |   |   |   |   |   |   |   |   |
|  1.14  | NDC's are in the PMS |   |   |   |   |   |   |   |   |   |
|  1.14  | Correct ICD-9 codes are used |   |   |   |   |   |   |   |   |   |
|  1.15  | ICD-9 codes are correct in PMS |   |   |   |   |   |   |   |   |   |
|  1.16  | Fee schedule is correct |   |   |   |   |   |   |   |   |   |
|  1.17  | Fee schedule is in PMS |   |   |   |   |   |   |   |   |   |
|  1.18  | Tax ID in PMS |   |   |   |   |   |   |   |   |   |
| 1.19 | NPIs in PMS: \_\_\_ clinic \_\_\_ provider |   |   |   |   |   |   |   |   |   |
| 1.20 | **Software Set Up Processes** |  |  |  |  |  |  |  |  |  |
| 1.21 | Set up electronic statements |   |   |   |   |   |   |   |   |   |
| 1.22 | Set up superbill/charge in PM system |   |   |   |   |   |   |   |   |   |
| 1.23 | Set up electronic eligibility verification in PM system |   |   |   |   |   |   |   |   |   |
| 1.24 | Set up scanning capabilities in PM system |   |   |   |   |   |   |   |   |   |
| 1.25 | Set up Electronic Remittance Advice (ERA) |   |   |   |   |   |   |   |   |   |
| 1.26 | Set up electronic funds transfer (EFT) |   |   |   |   |   |   |   |   |   |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Description of Activities** |  | **Include**  | **Assigned To** | **Start Date** | **Due Date** | **Complete Date** | **Notes** |
| Yes | No | NA |
| **FRONT END PROCESSES** |  |  |  |  |  |  |  |  |  |
| 2.10 | **Insurance Payer Identification** |  |  |  |  |  |  |  |  |  |
| 2.11 | Educate staff how to process patients with different payment resources | Self-Pay |   |   |   |   |   |   |   |   |
| 2.12 | MA |   |   |   |   |   |   |   |   |
| 2.13 | MCO |   |   |   |   |   |   |   |   |
| 2.14 | Payer |   |   |   |   |   |   |   |   |
| 2.20 | **Eligibility Verifications** |  |  |  |  |  |  |  |  |  |
| 2.21 | EVS | Phone |   |   |   |   |   |   |   |   |
| 2.22 | Web |   |   |   |   |   |   |   |   |
| 2.23 | Electronic |   |   |   |   |   |   |   |   |
| 2.23 | Payers | Phone |   |   |   |   |   |   |   |   |
| 2.24 | Web |   |   |   |   |   |   |   |   |
| 2.25 | Electronic |   |   |   |   |   |   |   |   |
| 2.30 | **Charge Capture (see also Back End Processes)** |  |  |  |  |  |  |  |  |  |
| 2.31 | Educate staff how to correctly determine charges, including correct application of the sliding fee scale |   |   |   |   |   |   |   |   |   |
| 2.32 | Educate staff how to capture all charges |   |   |   |   |   |   |   |   |   |
| 2.33 | Educate staff on charge reconciliation processes |   |   |   |   |   |   |   |   |   |
| 2.34 | Create/review/update charge capture policy and procedures | Calculation |   |   |   |   |   |   |   |   |
| 2.35 | Posting |   |   |   |   |   |   |   |   |
| 2.36 | Reconciliation |   |   |   |   |   |   |   |   |
| 2.40 | **Payments/Collections at Point of Service (see also Back End Processes)** |  |  |  |  |  |  |  |  |  |
| 2.41 | Educate staff on payment collections |   |   |   |   |   |   |   |   |   |
| 2.42 | Educate staff on payment posting into PMS |   |   |   |   |   |   |   |   |   |
| 2.43 | Educate staff on payment reconciliation  |   |   |   |   |   |   |   |   |   |
| 2.44 | Create/review/update payment policy and procedures | Collection |   |   |   |   |   |   |   |   |
| 2.45 | Posting |   |   |   |   |   |   |   |   |
| 2.46 | Reconcile |   |   |   |   |   |   |   |   |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Description of Activities** |  | **Include**  | **Assigned To** | **Start Date** | **Due Date** | **Complete Date** | **Notes** |
| Yes | No | NA |
| **BACK END PROCESSES** |  |  |  |  |  |  |  |  |  |
| 3.10 | **Charge Capture (see also Front End Processes)** |  |  |  |  |  |  |  |  |  |
| 3.11 | Educate staff how to correctly determine charges |   |   |   |   |   |  |   |   |   |
| 3.12 | Educate staff how to capture all charges |   |   |   |   |   |  |   |   |   |
| 3.13 | Educate staff on charge reconciliation processes |   |   |   |   |   |  |   |   |   |
| 3.14 | Create/review/update charge capture policy and procedures | Calculation |   |   |   |   |  |   |   |   |
| 3.15 | Posting |   |   |   |   |  |   |   |   |
| 3.16 | Reconcile |   |   |   |   |  |   |   |   |
| 4.10 | **Payments/Collections at Point of Service (see also Front End Processes)** |  |  |  |  |  |  |  |  |  |
| 4.11 | Educate staff on payment collections |   |   |   |   |   |  |   |   |   |
| 4.12 | Educate staff on payment posting into PMS |   |   |   |   |   |  |   |   |   |
| 4.13 | Educate staff on insurance payment posting |   |   |   |   |   |  |   |   |   |
| 4.14 | Educate staff on payment reconciliation  |   |   |   |   |   |  |   |   |   |
| 4.15 | Create/review/update payment policy and procedures | Collection |   |   |   |   |  |   |   |   |
| 4.16 | Posting |   |   |   |   |  |   |   |   |
| 4.17 | Reconcile |   |   |   |   |  |   |   |   |
| 5.10 | **Claims Submission** |  |  |  |  |  |  |  |  |  |
| 5.11 | Educate staff how to pre-edit claims |   |   |   |   |   |  |   |   |   |
| 5.12 | Train staff how to submit claims | Paper |   |   |   |   |  |   |   |   |
| 5.13 | Electronic |   |   |   |   |  |   |   |   |
| 5.14 | Train staff how to verify electronic claim submissions (clearinghouse) |   |   |   |   |   |   |   |   |   |
| 5.15 | Train staff how to identify and correct electronic claim denials from the clearinghouse and payers |   |   |   |   |   |   |   |   |   |
| 5.16 | Train staff how to process denials that come in the mail |   |   |   |   |   |   |   |   |   |
| 5.17 | Educate staff how to send an appeal to a payer |   |   |   |   |   |   |   |   |   |
| 6.10 | **Account Receivables (A/R) Management** |  |  |  |  |  |  |  |  |  |
| 6.11 | Train billing staff how to manage insurance A/R |   |   |   |   |   |   |   |   |   |
| 6.12 | Train staff how to manage patient A/R  |   |   |   |   |   |   |   |   |   |
| 6.13 | Train staff how to review and print/sent patient statements |   |   |   |   |   |   |   |   |   |
| 6.14 | Train staff on how to obtain PM reports |   |   |   |   |   |   |   |   |   |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **ID** | **Description of Activities** |  | **Include**  | **Assigned To** | **Start Date** | **Due Date** | **Complete Date** | **Notes** |
| Yes | No | NA |  |  |  |  |  |
| **FORMS** |  |  |  |  |  |  |  |  |  |  |
| 7.10 | Create/Modify Charge Capture Form  |   |   |   |   |   |   |   |   |   |
| 7.20 | Create/Modify Registration Form |   |   |   |   |   |   |   |   |   |
| 7.30 | Develop front office cheat sheet to identify payers |   |   |   |   |   |   |   |   |   |
| 7.40 | Create/Modify Daily Reconciliation Sheet |   |   |   |   |   |   |   |   |   |