

Summarizing Revenue Centers

The Grouper Procedure Detail screen will allow a procedure to be associated with a revenue center loaded within the Charge Summary Code table. The Revenue Center field will designate which Revenue Center the procedure is for.

Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Medical Records > Grouper > <u>Procedure</u>



Grouper, Procedure Detail

The Revenue Center field is used to designate the place of service the procedure was performed. An alpha revenue center code from A-Z may be assigned to each summary code in the Rev Center field in the Charge Summary Codes table. HCPCs that are associated with a revenue center will be broken out on a separate detailed line on the Detail Charges screen. If there are no Revenue Center codes loaded on the DRG Grouper screen, the system will look at all charges on the patient's Account Detail until the system reaches the first OR or ER charge. The system will then use the summary code and combine the charges into one line of detail on the Detail Charges screen. If there are several HCPC codes loaded, the system will produce multiple lines on the UB with the same summary code.



Setup

There are several tables that must be set up in order to properly bill procedures to the correct revenue center in which the procedure is being performed.

Insurance Company Table

Select Web Client > Tables > Business Office > Insurance Companies > Select Insurance > Page 2



Insurance Company Table, Page 2

• Combine Bill OR & ER: This field should be answered with a Y for all Financial Classes that require OR and ER charges to be combined or that require Revenue Centers to be summarized.



Select Web Client > Tables > Business Office Tab > Insurance Companies > Select Insurance > Page 6

Г	TruBridge Insurance Company	Table Maintenance 💠 Insurance Company List < Insurance Company 🗙 🏫 🔍 🔲 🕼 💅 👯 🌲 🔐 🗸
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	Insurance Company Information Facility 1 : TruBridge Community Hospital Insurance Company Number:	Print Intermediary: Unassigned Electronic Intermediary: BUAL50 - B/C OF ALABAMA
	Page 1 Page 2 Page 3 Page 4 Page 5 Page 6	Page 7 Page 8 Page 9 Policy Information Detail Benefits
	Semi-Priv Rate: 0.00 Date:	Break out rev cntr:
	Future Rate: 0.00 Date:	Contractual Method: N
	Prior Rate: 0.00	Report Group Code:
	LA Mandated Service Charge:	SOP (ANSI): BL
	D - Day 0.00 Per:	Send Qual/ID:
	Inpatient Rehab PPS?: CMG Summary Code:	EB Misc 1:
	Contract Management Code: WD	EB Misc 2:
	Auto Crossover: Form Code:	NPI Only?:
	Keep EOB Information:	Coverage Form Code:
	Use ERA Reject Codes:	New York Medicaid
	Combine Summary Codes	Locator Code:
	Base Code:	Clinic Specialty:
		Category of Service:
	Combined Codes:	3M All Payor Code:
		Misc
		KidMed:
>	Misc	Revenue Reclassification Code:

Insurance Company Table, Page 6

• Break out rev cntr.: For those insurance companies that reimburse based on CPT, this field will need to be selected. If a Revenue Center has been specified in the Grouper Procedure Detail screen, the system will pull the HCPC from the Grouper to the Detail Charges screen along with the dollar amount associated with that Summary Code. If there are two HCPCs, the dollar amount will pull to the first HCPC and a quantity of 1 with no charges to the second HCPC. If an item is charged that has a CPT code loaded in the Item Master, this will pull to a separate charge line.



Charge Summary Code Table

Select Web Client > Tables > Business Office Tab > Charge Summary Codes > <u>Select Summary Code</u>

- - -	ruBridge Tables Charge Summary Codes List	Table Maintenance 🗴 Charge Summary Codes List 🗡 🏠 🗛 📑 🕼 😰 🖽 🌲 🔐	
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	Charge Level Table		
	Charge Code: 42		
	Page 1 Page 2		
	Description: OR SERVICES	Subject to NY Surcharge:	
	I/P Revenue GL#: 00000000	Insurance Claims: M X B/C Com	
	O/P Revenue GL#: 00000000	Place of Service:	
	E/R Revenue GL#: 00000000	Type of Service:	
	Employee Rev GL#: 00000000	Executive Information Column:	
	Other Revenue GL#: 00000000	Non_Billable F/C:	
	Covered by Ins?		
	UB Revenue Code: 360	Medicare Prov#:	
	Current DRG RCC: 3.53091 as of 01/01/1990	Medicaid Prov#:	
	Previous DRG RCC: as of	B/C Prov#:	
	Summarize O/P Ins? N M X B C W S	Misc Use:	
	Include in DRG Rep: Y M X B C	Other Revenue Codes	
	Print Qty on UB? Y	F/C Rcode F/C Rcode	
	Adjustment Charge:		
	Associated Physician Charge		
	Normal Phy#:	Need HCPC Codes: Y v Rev Center: O	
>	Normal Phy Charge:		Ŧ

Charge Summary Code Table

• Need HCPC Codes: Rev Center: Select a Y from the drop-down to allow the HCPC's loaded in the Grouper screen to pull to the UB when the Combine Bill OR & ER field from the Insurance Company table page 2 is answered Y. Enter N to not allow the HCPC from Grouper screen to pull to the UB; however; the CPT code, if loaded, from an item will pull. Enter S to allow charge items without CPT code(s) loaded to pull to a separate line of detail on the UB and not combine with any other summary code. The Rev Center field will allow any summary code to be assigned a revenue center.



Example 1

In this example, the HCPC's listed will break into three separate summary codes in the Detail Charges screen. The first HCPC will pull to the OR summary code. The second HCPC listed will pull to the Other Surgery Summary code. The third HCPC listed will pull to the ER summary code.

Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Medical Records > Grouper > <u>Procedures</u>

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Grouper, Procedures

The first three lines on the Detail Charges screen reflect the HCPC codes loaded in the Grouper Procedures screen. The HCPC code pulls to the Description field. The dollar amounts associated with each summary code will pull to the correct lines. If the summary code also has an item charged with a CPT code loaded in the item master, the charge and associated dollar amount will pull to a separate line. In this example, 27786 is the HCPC for summary code 42 and 99281 is the CPT code for summary code 42. The pound sign (#) in the description field represents there is a CPT code present on the item.

Revenue Centers



Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Insurance > Claim > <u>Detail</u> <u>Charges</u>

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	ОТ	27355 OTHER	10/04/19] [5		1.00	1		500.00	
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Insurance System - Detail Charges



Example 2

In this example, a revenue center was not specified on the HCPC codes entered. When the insurance claim is generated, the system will look at all charges on the patient's Account Detail and use the first Summary Code listed.

Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Medical Records > Grouper > <u>Procedures</u>

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REED GRACI	E ELLEN	Account: 358174	Birth Sex: F	Admin Gender:	Female	DOB: 06	5/19/1943	Age: 4	81 MR	#: 0003	12 At	tending Ph	y: BRO	WN ALICE	с	Total Cha	rges: \$3,5	58.70							
t Type: 3		Service Code: ER	Financial Class	BB					Se	vice Date	es: 10/0	4/2019 - 10	0/04/201	9 Disc	Cd: H	Bill Date:	10/04/20	19							
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Grouper, Procedures

The HCPC's will pull to three different lines of detail, but the summary code associated will be the same. The dollar amount for the OR and ER charge will pull to the first line of detail.

Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Insurance > Claim > <u>Detail</u> <u>Charges</u>

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	32	28090 OPERA		10/04/19			7		1.00				
	32	12001 OPERA		10/04/19			_		1.00				
	78	AZMACORT IN	1	10/04/19					1.00			47.70	
	73	#3600008ANK		10/04/19					1.00			135.00	
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Insurance System - Detail Charges



Example 3

In this example, Break Out Revenue Center on page 6 of the Insurance Company table is selected. There are two emergency room charges with the same Summary Code. One of the charges has a CPT loaded in the item master and the other does not. There is a HCPC coded in the grouper with a revenue center for the emergency room.

Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Medical Records > Grouper > <u>Procedures</u>

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Grouper, Procedure

The first line in Detail Charges shows the system pulled the HCPC from the Grouper along with the dollar amount associated with that Summary Code. If there had been two HCPCs coded, then the dollar amount would pull to the first HCPC with a quantity of 1 with no charges to the second HCPC. The second line shows the emergency room charge with the CPT that was loaded in the Item Master and its associated dollar amount.

Revenue Centers



Select Web Client > System Menu > Hospital Base Menu > Patient Account # > Insurance > Claim > <u>Detail</u> <u>Charges</u>

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Patient: 35	59067	REED GRACE ELLEN		Insurance:	BB	BLUE CROSS OF	ALA-O/P			
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Insurance System - Detail Charges