

## OASIS Alert

### Reimbursement: MISTAKES HAPPEN - HERE'S HOW TO CORRECT 3 OF THEM

**Hint: Sometimes you may not need to do anything.**

A simple typo could mean your claim is returned to you or denied. The faster you find and fix the error, the sooner you'll get paid.

Here are the solutions to three all-too-common mistakes home health agencies make:

**1. Problem:** After the OASIS data set is submitted to the state, you find there was an error in the spelling of a patient's name. Do you need to unlock the OASIS to correct a name?

Solution: Not if the report for that data set was marked "accepted," says billing expert **Rose Kimball** with **Med-Care Administrative Services** in Dallas. But be sure to go back into your database and correct the error so it doesn't happen again when you bill for the episode, she adds.

**2. Problem:** You submit a request for anticipated payment (RAP) using a name that is incorrect, although the Medicare number is correct. Will the fiscal intermediary accept this claim?

Solution: This scenario shows why it is so important to keep checking for claims that have been returned to provider (RTP'd), Kimball warns. Even though the Medicare number is correct, in her experience with Palmetto GBA, the intermediary will not pay the RAP. Instead it will RTP it with the reason code 30715 (wrong name or number), she explains.

The easiest way to correct this problem is to access the Direct Data Entry and make the correction online, Kimball advises. You need to be sure the name is correct on both page one and page five, she says.

If the FI sends the RAP back because of an incorrect number, or the patient has a new Medicare number, you correct it in the same way. The field you're looking for says "New HIC." If you answer "Y" for yes and then hit the tab key, it will take you to the place where you enter the new number. Then you go to page five and enter the correct number there as well, she instructs. And then release it for processing.

**3. Problem:** Your fiscal intermediary paid the RAP, but when you submit the final claim, it is denied with a message saying there is no paid RAP that matches this episode.

Solution: This problem may stem from an incorrect number on the original RAP, Kimball suggests. If you submit a RAP with the name and date of birth correct, but the Medicare number wrong, you may not discover this at first. The intermediary can determine what the correct Medicare number is, and may correct the RAP and pay it, Kimball says.

The problems show up when the final claim goes in. At this point, the FI usually doesn't correct the number and the claim is RTP'd with the reason given that there is a final claim with no paid RAP, she explains.

To solve this problem, research paid RAPs by the date of service on the claim, Kimball says. "The patient will pop up there with a new Medicare number," she predicts.

When you page through the online RTP report, it shows you what you submitted. The intermediary may have corrected the information on page one, but you still need to correct page five -- which reflects what you actually submitted -- before you click on "update," she warns.

