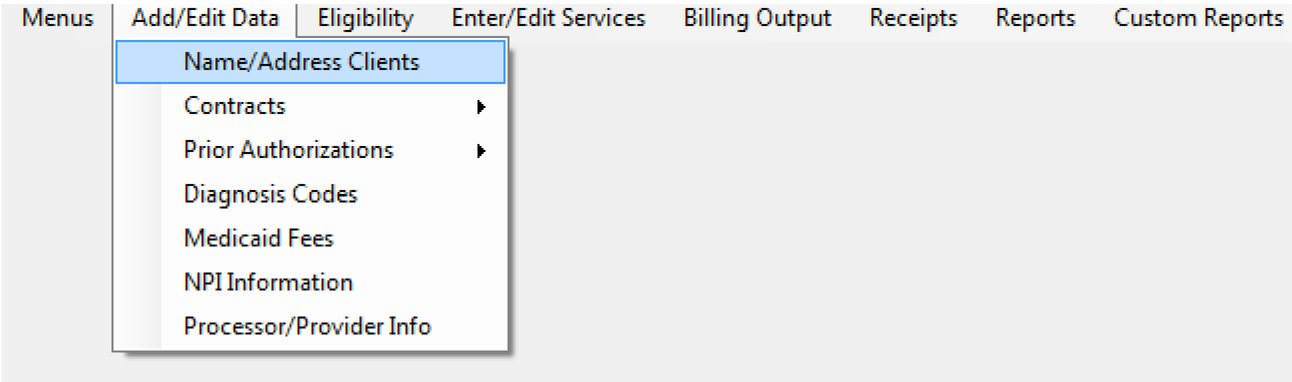
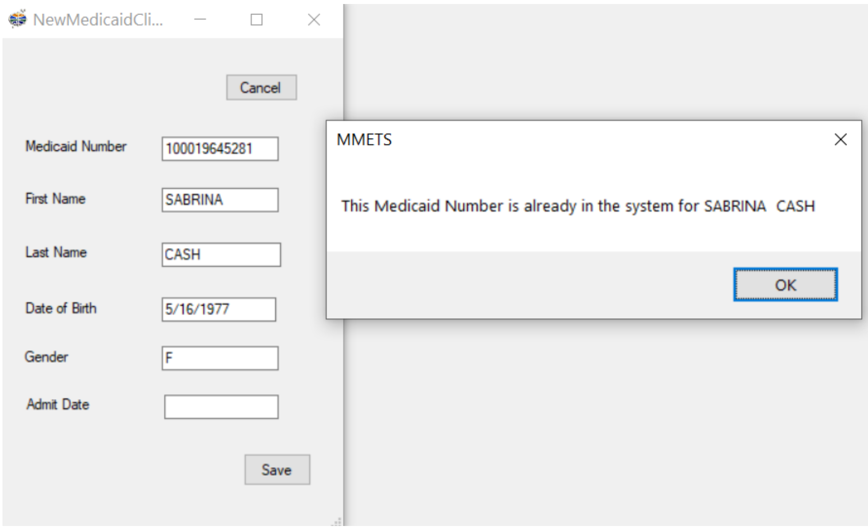
Adding a Consumer

Go to Add/Edit Data and select Name/Address Clients

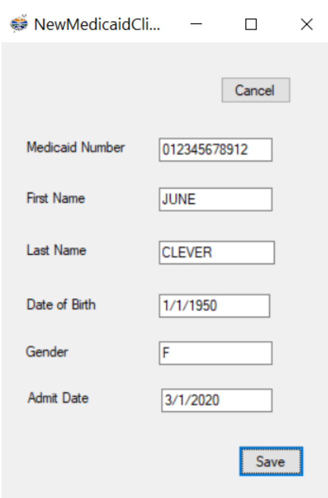


Click on the Add button on the lower left side of the screen. If you select Show All Clients, the list will include both active and inactive clients. Click Add on the bottom left.

The box below will appear. Fill out the requested information. If the consumer that is being added has a prior record in the database (ie: if they have ever been entered in the past) a message will appear to let you know that the Medicaid Number has already been used, indicating that it is a duplicate. To exit out, click OK and cancel or X out of the screen.

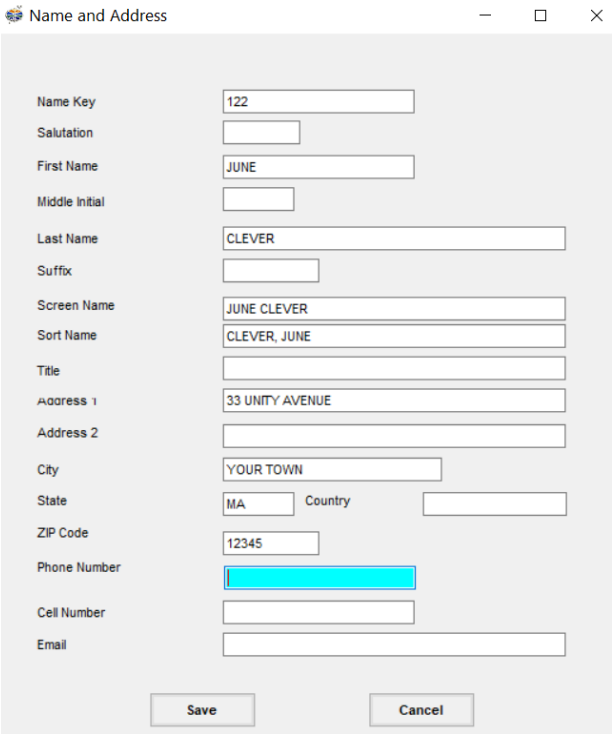


If the consumer being added is NOT a duplicate, then you will be able to add the correct consumer.



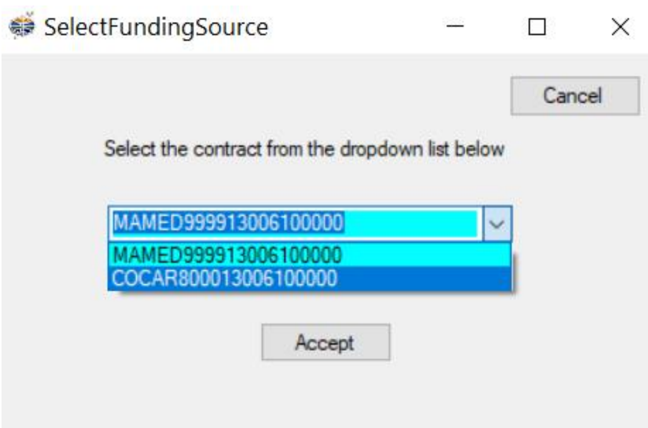
Hit Save to proceed to the next screen.

The software will automatically assign a Name Key (next in the sequence). The first and last name will already be filled out. When you hit enter through the Name Key, First Name and Last Name fields, the Screen Name and Sort Name fields will auto-fill. Fill out the remainder of necessary information ie: Address, City, State, Zip code, etc.



Click Save at the bottom of the screen.

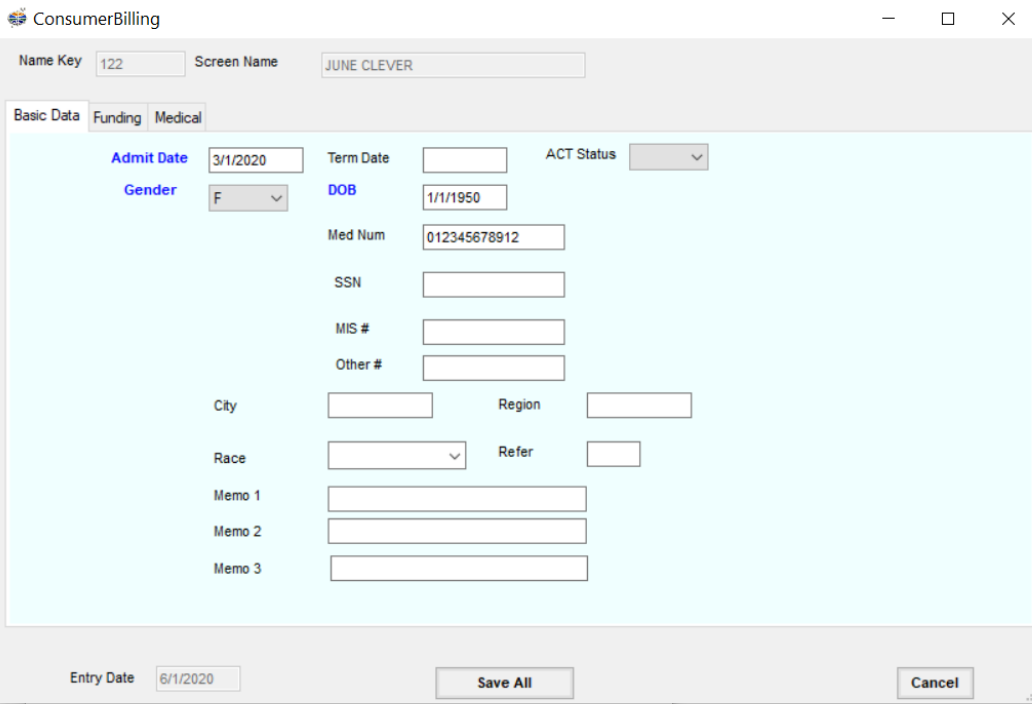
You will then be able to select the proper funding source/contract by choosing from the dropdown box and selecting Accept.



This will bring you to the Consumer Billing screen, which has 3 tabs: Basic Data, Funding, and Medical.

*Please note that Name Key and Screen Name will appear at the top of the screen no matter which tab you are in.

Basic Data



The Admit Date, Gender, DOB and Med Num will all be auto-filled.

*NOTE: If the consumer has an insurance ***other than*** MH as their primary funding, ie: CCA, Tufts, etc., enter the ID numbers in each field as follows:

Med Num: Other Ins. number

MIS #: Other Ins. number

Other #: MH ID number.

If they only have MH, then only the Med Num field needs to be filled out.

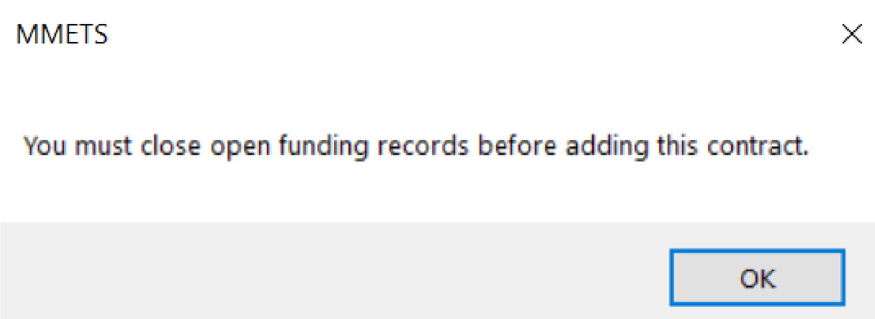
You are now ready to move onto the next tab: Funding

Funding

In this section, you will be adding the insurance company who is financially responsible for the services provided for each individual.

NOTE: If there is more than one insurance company (ie: MH + CCA,Tufts, etc.), only ONE funding source can be OPEN at a time.

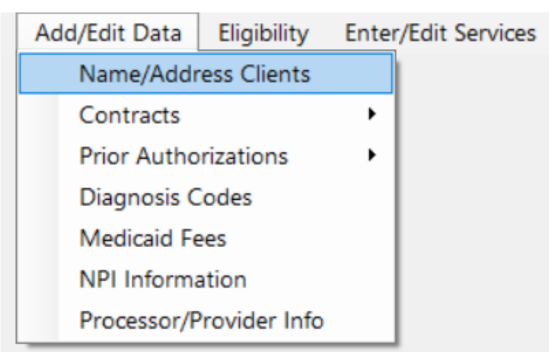
ONLY MH Remote and In-Person can be open at the same time. Having 2 open sources does NOT apply to two different insurance companies. You will receive the message below if you attempt to have 2 open sources from different companies, ie: CCA and MH or Tufts and MH. In this case, close the currently open funding source before adding.



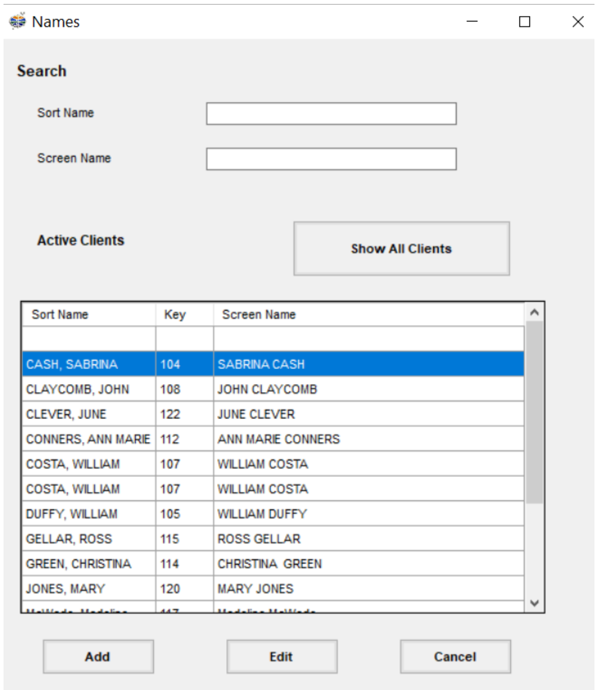
NOTE: Do NOT add the *same* funding source more than once. There should only be ONE contract for each insurance company.

Go to Add/Edit Data

Select Name/Address Clients

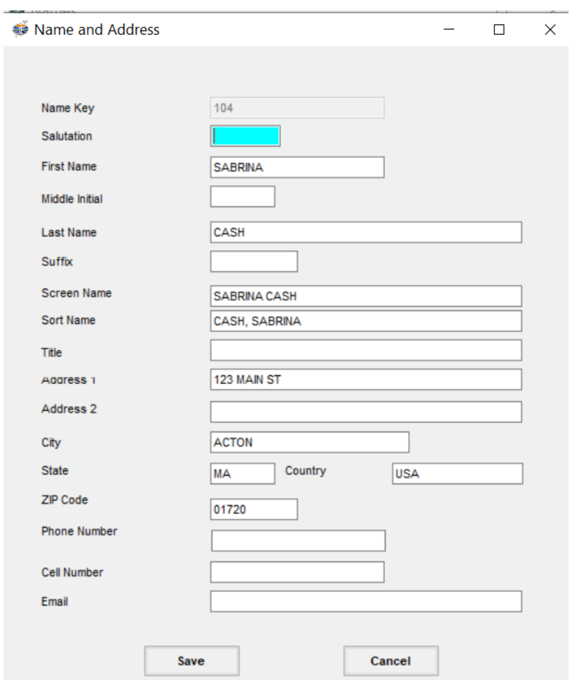


You can select the person in the Names box below by double clicking on your selection.



This will bring up their name and address information.

Hit SAVE at the bottom.



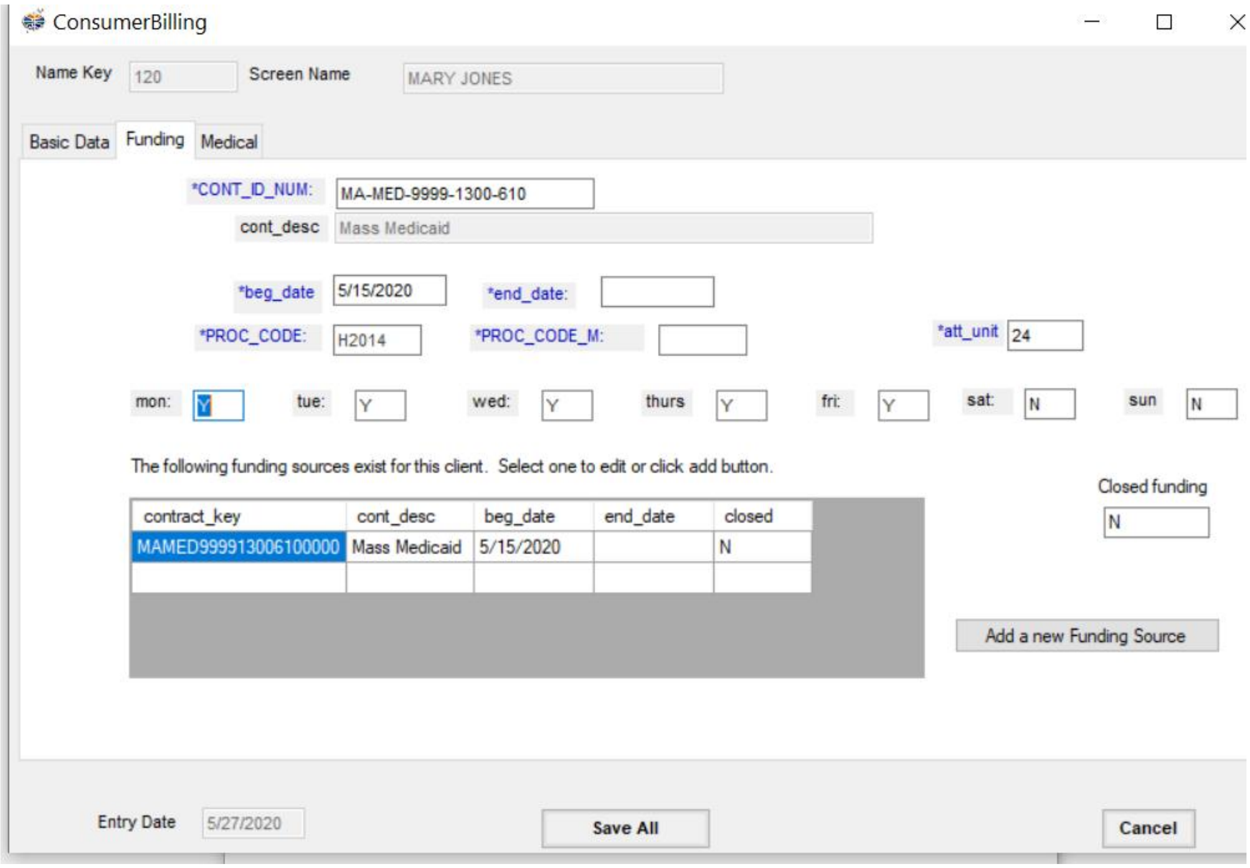
3 Tabs will come up: Basic Data, Funding, Medical.

Go to the center tab: **Funding**

Adding a Single Funding Source:

You will need to fill out the beginning date (beg_date), Procedure Code (PROC_CODE), modifier (PROC_CODE_M), correct number of daily units under *att_unit (ie: for Procedure Code S5102, Dayhabs would enter 1, (depending on procedure code), AFC's would enter 1, etc.)

Next, change the N's to Y's in each day of the week you wish to have records/claims created. (ie: dayhabs would have Y for Mon-Fri, while AFC would have Y for Mon-Sun)



When adding additional funding sources:

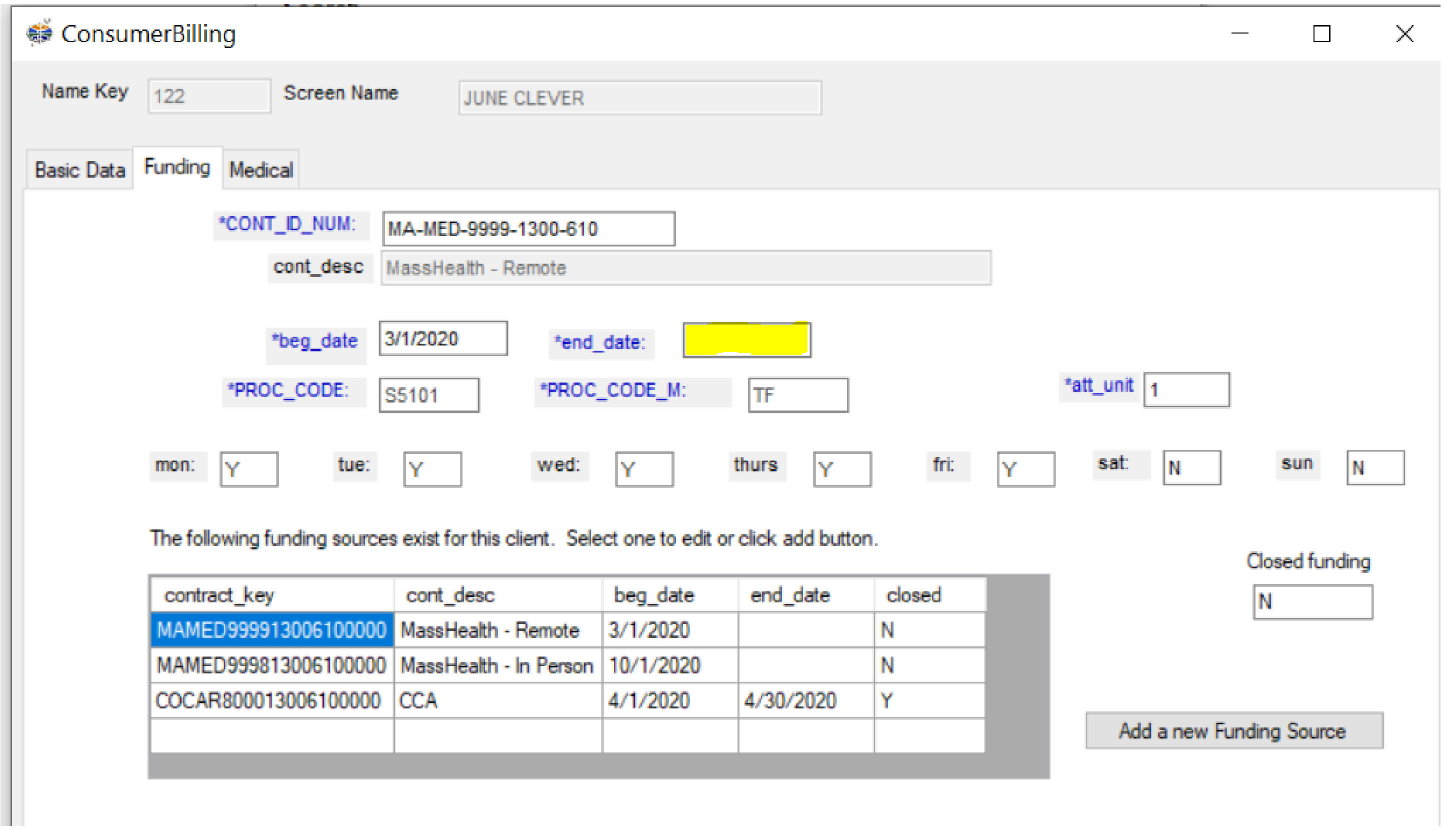
NOTE: Do **NOT** add the same funding source more than once. There should only be **ONE** contract for each insurance company or location, ie: In-Person vs. Remote.

For info on how to add a contact:
https://etime.net/assets/media/documents/ADDING%20CONTRACTS%20update.pdf

Closing a Funding Source:

Enter a date in the ***end_date** field. (see highlighted box below.)

NOTE: ONLY enter an end date if the funding source is, in fact, **closed.** Do **NOT** enter in future dates (ie: 1/1/2050).

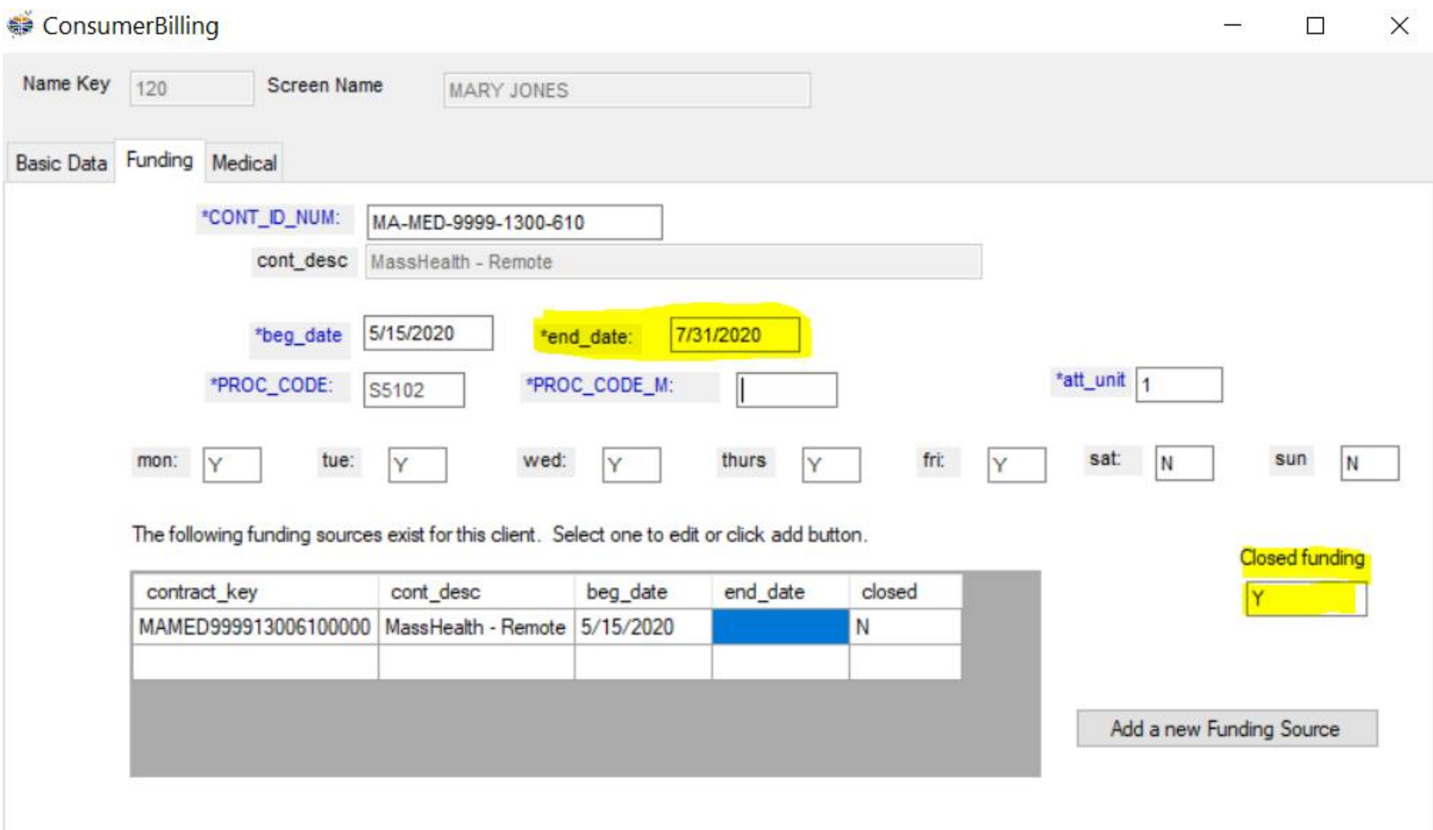


Hit the **Save All** button at the bottom of the screen before proceeding.

NOTE: **N** in the Closed Funding field indicates that the funding source is OPEN.

Y in the Closed Funding field indicates that the funding source is CLOSED.

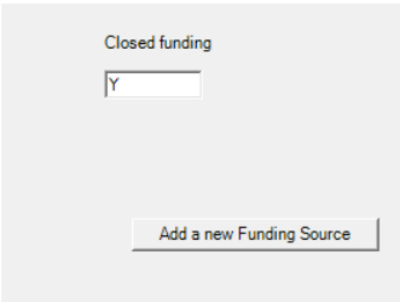
Enter a date in the *end_date field in the middle of the screen….NOT the one in the box at the bottom of the screen. Note the highlighted field to enter in the end date.



A **'Y'** will appear in the Closed funding field. You do not have to manually enter anything into the Closed funding field.

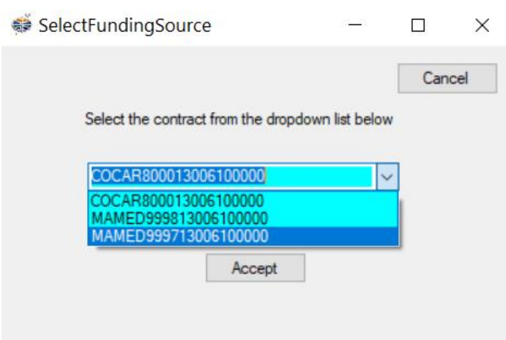
Adding a New Funding Source:

Select the Add New Funding Source button on bottom right of screen:



A box will appear with a dropdown box of available contracts to choose from.

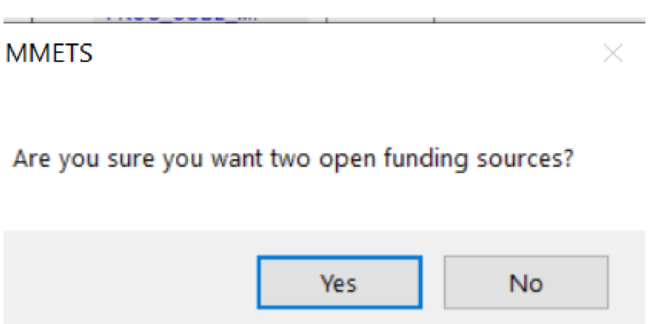
Select the contract you are adding and click Accept.



Follow instructions above for Adding a Single Contract and click Save All when completed.

*The software allows for 2 funding sources to be open at one time. For example, the Remote contract and the In-Person contract can both be open.   This does NOT apply to two different companies (ie: CCA and MH).

A message will appear if you do not have an end date in one of the contracts:



Though you can't bill for those two contracts for the SAME date of service, a person may have a Remote service one day and In-Person the next, all within the same week/month.

Having both funding sources open at the same time means you do not have to close one out to create claims for the other. ETS Recommends splitting your billing by location, ie: Remote and In-Person, and completing one batch at a time.

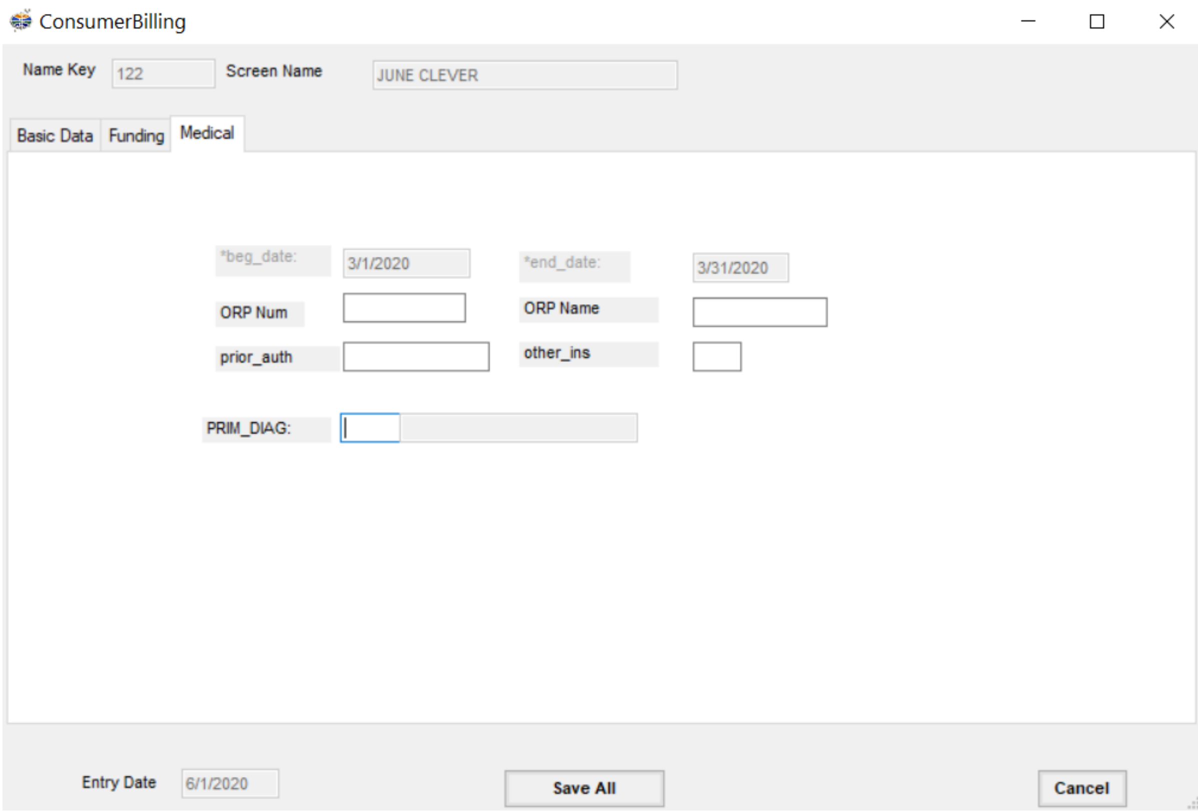
NOTE: All claims that are created will only be created for an OPEN source or sources. And therefore, if you create "Attendance by Person" there will be records for both open contracts created for that person. You will need to delete out the attendance that you are not intending to bill for.

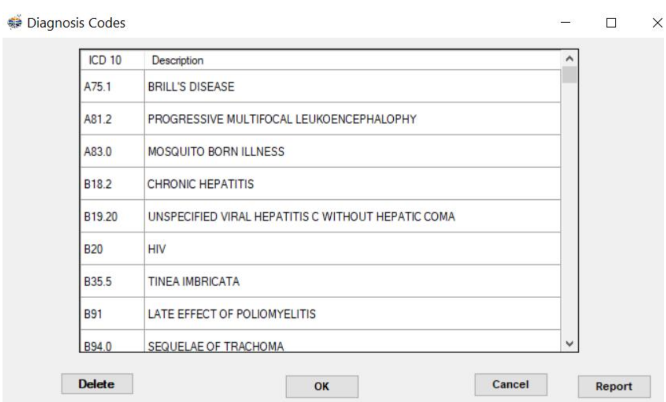
MEDICAL

The final tab is **Medical**. Fill in any applicable fields.

*Please Note: **Only** AFC and GAFC's need to fill out ORP Num and ORP Name.

You MUST fill in the Primary Diagnosis code. If you hit enter in this field, a box will come up showing ALL valid codes. You may choose from this list or simply type in the appropriate code. The description will auto-fill.

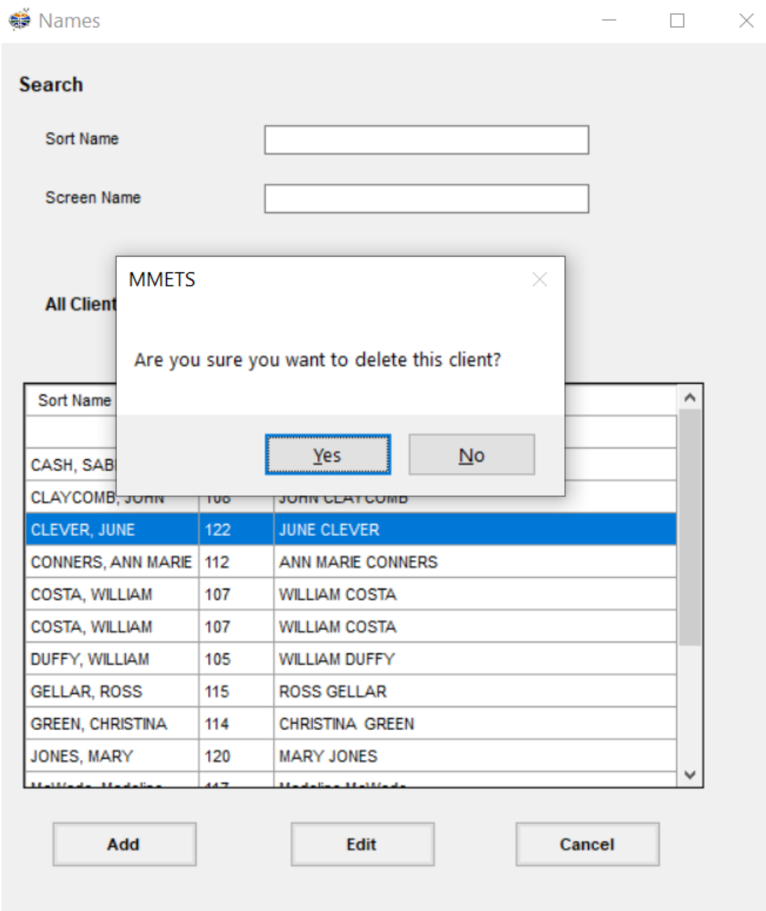




Select Save All at the bottom when you are finished and all data from each tab will be saved.

To delete a client who has been added, but has NOT been billed yet, go to Names box and highlight the line you would like to remove. Hit “Delete” on your keyboard.

You will get a message asking if you would like to delete the client.



If there are claims in the history file under the name key you wish to delete, you will NOT be able to remove that consumer.

A message will appear to alert you: