

Table of Contents - *Jump to a section below*

[Convert Services Into Line Items](#)

[Send Electronic Claims \(837\) or Print to Paper](#)

[Bill Status: Fix Common Error Codes](#)

[Post ERAs \(835\) or Post EOBs](#)

[Verify Line Items](#)

[Bulk Change Print Status](#)

The Billing process, from start to finish, looks like this:

1. **Convert Services Into Line Items** - Calculate/Recalculate services on the Services Form until no errors are present.
2. **Verify Line Items** - Services become Line Items and can be verified on the Line Items List.
3. **Send Claims or Print to Paper** - Line Items are added to a Claim and submitted to a clearinghouse either electronically (837) or by paper.
4. **Post ERA or Post EOB** - Electronic Remittance Advice (ERA), which is the electronic version (835) of an insurance payer's Explanation of Benefits (EOB) is received and contains the claim adjudication information for posting.

[Back to Top](#)

Convert Services Into Line Items

The Services Form provides a list of Services that have been rendered for a client. Once processed, Services become Line Items.

Scrub (Recalc) Services

1. Navigate to the Services Filter Form: **Billing Engine > Navigation Form > Services button.**
2. Select **NOT BILLED ONLY** from the **Bill Status** drop-down menu.
Note: You can filter further by utilizing the fields in this form (e.g. by Service Date range, Client, etc.)
3. Click the **OK** button. A list of Services is displayed.
4. Click the **Recalc List** button.
Note: To Recalc an individual Service line, select the Service in the Services Form grid and click the **Recalc Selected** button.
5. A window is displayed, "You have chosen to recalc the displayed records. Please click Yes to confirm or No to cancel." Click **Yes**. Services that have a Bill Status of "0" will be removed from the form since the filter is set to NOT BILLED ONLY. Any Services remaining will display a **Bill Status** code other than "0".

Note: The Bill Status is displayed in the lower left-hand corner for a selected Service. The Bill Status is also displayed in the Bill Status Code column in the top half of the window.

- Correct errors that are identified for the Service until the Bill Status is "0." Refer to the [Fix Common Error Codes](#) section below.

Services Form - (SVSL)

Agency ID	Agency Name	Program ID	Program Desc	Staff ID	Staff Last Name	Staff First Name	Staff Middle Name	Service Date	Case No	Client Last Na
1	Test Agency			0293		kuro		05/31/2022	3289	
1	Test Agency			0293		kuro		05/31/2022	3317	
1	Test Agency			0293		kuro		05/31/2022	3318	
1	Test Agency			0293		kuro		05/31/2022	3319	
1	Test Agency	1	Crisis	0309		Denver		05/19/2022	3286	
1	Test Agency			0293		kuro		05/23/2022	3286	
1	Test Agency			0304	Patel	Arpita		06/09/2022	981	

Service ID: 2207 Filter(s) in effect. 1832 Record(s) found.

Agency ID: 1 Program ID: Staff ID: 0293 Service Start Date: 05/31/2022 Service End Date: 06/01/2022 Case No.: 3289 Activity Code ID: 90853

Place of Contact / Service (P, S, T, W): P Prim / Sec Ther: P Number in Group: 1

Elapsed Time: 00:07:00 Start Time: 05 :00 PM End Time: 12 :00 AM Site Identification: Service Cancellation: In / Out Patient: O Temporary Living Arrangement: Original Billed Amount Override: \$0.00 Original Units Override: 0.00 Authorization No.:

Notes:

Diagnosis 1: ICD Diagnosis 2: ICD Diagnosis 3: ICD Diagnosis 4: ICD

NDC: NDC Units: 0.00

Unit Of Measure: EMG: Ignore R: Billing Log(0) Create Zero Billed Amount:

ICD-9 ICD-10 Do Not Bill:

Bill normal Bill client full amt with out ATP adj Bill client full amt with ATP adj

Staff Name: kuro Client Name: Seamus, Reynard Bill Status: 99 * Original Billed Amount: \$0.00 User Id: NEXTSTEP Control Date: 05/31/2022 02:24:11

Proof List Add Edit Delete Exit (Esc) Recalc Selected Bill Status Line Items/Trans Filters Defaults Suspend Billing

Activity Code ID
Review this field to ensure the correct activity is being billed for.

Services Details
Provides all pertinent information associated with the service

Recalc List
Recalculates and refreshes the window with updated verification

Filters
Allows the sorting of existing services down to the individual client you're processing.

Bill Status
Tells you what the Bill Status codes (displayed bottom left *) refer to.

[Back to Top](#)

Bill Status: Fix Common Error Codes

If you have Services remaining in the Services Form, the Bill Status will need to be reviewed and you will need to resolve any issues to ensure the Service can be converted into a Line Item.

Bill Status 17: Add Client Insurance Coverage

If your Agency has the Insurance widget enabled within the Face Sheet in NSS, the client's insurance can be added from there. It can also be handled through the Billing Engine directly. Updates made to fields that exist in both the Insurance widget and Billing Engine will be automatically updated in both places.

Add Client Insurance from Insurance Widget Within NSS

1. Navigate to the Insurance widget: **Face Sheet > Search for Client > Edit button > Insurance.**

2. Click the **Add** button .

3. Complete the **Insurance Information** and **Subscriber Information** sections.

Note: Priority is a numerical field: 1= Primary, 2=Secondary, 3=Tertiary.


4. Click the **Save** button. The client insurance record will be sent to the Billing Engine.

Note: If you are collecting money from a client, they must have Private Pay as an insurance. An entry for Self Pay is auto-generated unless your Agency has this disabled. To add coverage-specific details, such as: Effective dates, Copays, and Deductibles, click on the **Self Pay** line to expand. The system assumes the insurance is active if the Effective Date range is blank.

5. Follow the steps in [Calculate Services](#) to Recalc.

Add Client Insurance from Billing Engine

1. Navigate to the Client Insurance Form: **Billing Engine > Navigation Form > Client Insurance button.**

2. In the **Case No.** field, type the client's case number or click the **Search** button  to search for the client.

3. Click the **Edit Insurance** button.

4. Click the **Add** button.

5. Enter the client's insurance information.

Note: Priority is a numerical field: 1= Primary, 2=Secondary, 3=Tertiary.

6. Click the **Populate Sub** button to populate Subscriber Name, Address, Phone, Social Security No., Birthdate from NSS.

7. Change **Subscriber Name** if the subscriber is not the client and select another option from the **Subscriber Relation to Client** drop-down menu.

8. Add any other information pertinent to your agency on Page 1 and Page 2.

Note: To mark a client as needing prior authorization, select the **Prior Authorization Required?** checkbox on Page 2, if this is not already set at the insurance level.

9. Click the **Save** button.

Note: If you are collecting money from a client, they must have Private Pay as an insurance. An entry for Self Pay is auto-generated unless your agency decides to disable this. To add coverage-specific details, such as: Effective dates, Exclusions, Copays, Deductibles, Caps, and Billable diagnosis click the **Details** button from the Client Insurance List. The system assumes the insurance is active if the Effective Date range is blank.

10. Follow the steps in [Convert Services Into Line Items](#) to Recalc.


Bill Status 30: Subscriber Number Missing On Insurance

If your agency has the Insurance widget enabled within NSS, the client's insurance can be edited from there. It can also be handled through the Billing Engine directly. Updates made to fields that exist in both the Insurance widget and Billing Engine will be automatically updated in both places.

Edit Client Insurance from Billing Widget Within NSS

1. Navigate to the Insurance widget: **Face Sheet > Search for Client > Edit button > Insurance.**
2. Click the **Edit** button next to the insurance record you want to edit.
3. Type into the **Subscriber Number** field.
4. Click the **Save** button.
5. Follow the steps in [Convert Services Into Line Items](#) to Recalc.

Edit Client Insurance from Billing Engine

1. Navigate to the Client Insurance Form: **Navigation Form > Client Insurance button.**
2. In the **Case No.** field type the client's case number or click the **Search** button  to search for the client.
3. Highlight the insurance you want to edit and click the **Edit Insurance** button.
4. Click the **Edit** button.
5. Type into the **Subscriber Number** field.
6. Click the **Save** button.
7. Follow the steps in [Convert Services Into Line Items](#) to Recalc.

Bill Status 25: Missing Diagnosis (25)

Many agencies have Diagnosis set as a required field within the Billing widget in NSS. However, if that is not the case or if your Agency is using schedule-based billing, you may receive a Bill Status of 25 when processing Services. Best practice is to alert clinicians and have them fill out a diagnosis for the client.

[Back to Top](#)

Verify Line Items

Once Services are processed, the Line Items (or Claims) are ready to be transmitted as 837 files or printed based on the payer. As you become more comfortable with the process, you may not find it necessary to review Line Items prior to sending out Claims. You may only navigate to this form when needing to review certain items.

1. Navigate to the Line Items Filter Form: **Billing Engine > File > Billing > Line Items.**

2. Use the filters to narrow down your search (e.g. by a Payer or Client).

3. Click the **OK** button. The Line Items List displays Line Items based on your search criteria.

Note: If you do not select any filters and keep **ALL** as selected for the Line Item Status, you will receive a prompt, “By not entering any filters, you have chosen to select all of the line item records in the database. Please click Yes to continue or No to cancel.”

4. Highlight a Line Item and click **OK**. The Line Item Form is displayed. To make edits to the Line Item or add a note, click the **Edit** button.

Note: Submission History is displayed in the lower right-hand corner of the window.

5. Confirm **Print Status** reflects the Line Items are ready to be picked up in the next batch of claims.

Note: Y (Yes), S (Sent), R (Reprocess) statuses mean that any line item with these statuses will be picked up in the next batch of claims that go out. A Print Status of N (No), means that the line item will not be picked up in the next batch of claims to go out.

[Back to Top](#)

Send Electronic Claims (837) or Print to Paper

Send an Electronic Claim File (837)

1. Navigate to the HIPAA 5010 Transfer Form: **Billing Engine > Navigation Form > 837 Form button.**

2. Complete the following fields:

a. **Transaction Set:** Confirm the correct option is selected from the drop-down menu. The default is 837 Professional.

b. **Format Type:** Select from the drop-down menu.

Note: 19, 20, and 21 are the most common insurance Format Types. 16 is the most common Medicaid. You can access the Master Insurance List to review Format Types: **Maintenance and Setup > Insurance > Insurance.**

c. **Start Date/Stop Date:** Enter in a start and stop date, or leave blank to grab all Line Items.

d. **Contact Employee:** Select from the drop-down menu.

3. Click the **Start** button. The Save As folder is displayed.

4. Select the **EDI folder > 837 folder.**

5. Type into the **File Name** field and save the file with a file extension supported by your clearinghouse.
6. A window is displayed summarizing the file you've saved and to check for accuracy, click **OK**.
7. A window is displayed, "Would you like to transfer/SFTP the file now?" Click **Yes** to transfer the file to the clearinghouse.
8. A window is displayed, "Process Complete!" Click **OK**.
9. On the still opened HIPAA 5010 Transfer form, select the **Update Billing Status Only** checkbox and click **Start** again. This will change the Print Status on the affected Line Items to an **N** and prevent these Line Items from being sent on a later claim.

Print a Paper Claim

1. Navigate to the Print Bills Form: **Billing Engine > File > Claims Processing > Invoicing > Print Bills**.
Note: To print a UB, select **UB04 Print Bills** instead of Print Bills.
2. Complete the following required fields:
 - **Employee #:** Select your employee number from the drop-down menu.
 - **Format Type:** Select a format type from the drop-down menu.
 - **Print Client Invoices:** Type in a case number or case number range.
Note: If you click into the first empty box and select tab on your keyboard, the first box will fill in "1" and the second box will fill in as "ZZZZZZZZZZ" and will print every single case with a Print Status "Y" for your search criteria.
3. Click the **Process** button.
4. A window is displayed summarizing the Line Items you've selected, click **OK**. The Print Options Form is displayed.
5. Select the **Printer** button to print to paper.
Note: Select the **Screen** button to see a print preview or the **Disk** button to save to your computer.
6. On the Print Bills Form, select the **Update Billing Status Only** checkbox and click **Process** again.
7. A window is displayed asking you to confirm that the invoices have been printed successfully, click **Yes**.
8. A window is displayed, "Process Complete!" Click **OK**. This will change the Print Status on all affected Line Items to an **N** and prevent these Line Items from being printed again.

[Back to Top](#)

Post ERAs (835) or Post EOBs

In order to post to a Line Item, the Line Item has to have a Print Status of **N** and Line Item Closed must **not** be selected, meaning the Line Item is still open. When posting, the **Line Item Closed** checkbox will autocheck if the Line Item has no remaining balance.

Post ERA (835)

1. Navigate to the HIPAA 835 Inbound Form: **Billing Engine > Navigation Form > 835 Form button.**
2. Import the 835 file, using one of the following options:
 - If you are using an SFTP integrated clearinghouse, select the **Import** button. This will pull down the file from the clearinghouse and into the EDI folder.
 - a. Click the **Start** button.
 - b. Select the **EDI** folder.
 - c. Select the **835** folder.
 - d. Select the file and click **OK**.
 - If you are not using an SFTP integrated clearinghouse:
 - a. Click the **Start** button.
 - b. Search for the folder that you manually saved your file to.
 - c. Select the file and click **OK**.
3. An 835 Select Party Type Form may be displayed if the system could not find an insurance match. Click the **Party Type** drop-down for the insurance displayed in the window and then click the **OK** button.

Note: Sometimes the Billing Engine may fail to identify the Party Type with some remits and may ask for you to select it in the step above. If you want to skip this step and have the transactions posted even when the Party Type doesn't match, click the **Ignore Party Type** checkbox on the 835 Form prior to importing the file.
4. Transactions are displayed under **Records To Post**, when they match back to a Line item. The bottom section, **Records Unable to Post**, is where transactions do not match to a Line Item.

Note: Most of the time transactions show under Records Unable To Post, when an Agency is transitioning to NSS from another system.
5. Double-click on a record to view a detailed breakdown of the associated payments and adjustments. The Transaction Details window is displayed.

Note: Payments and adjustments can be modified in this window.
6. **Exit** out of the Transaction Details window back to the HIPAA 835 Inbound Form.
7. Click the **Post** button to post payments and adjustments back to the Line Item. If there is any patient responsibility or co-insurance a new Line Item will be created.

Note: You can select the **Check All** button to select all lines at once in Records to Post. By default, the **Do Not Post Denied** checkbox is selected and those transactions will be added to the Working Queue even if you select the Check All button.

8. A window is displayed providing a summary of posted payments and adjustments to the Line Items. Click **OK**.
9. If using an integrated clearinghouse, a window is displayed asking, "Would you like to move the file to the Success folder now?" Click **Yes** to move the file from the root folder to the Success folder. Files in the Success folder have been posted.
10. A window is displayed, "Process Complete!" Click **OK**.
11. A window is displayed, "Would you like to move the records that are unable to post to the Working Queue?" Click **Yes**.
12. A window is displayed, "Process Complete!" Click **OK**.
13. Select the **Working Queue** tab. A list of items not posted and/or denied are displayed.
Note: Select the **Filters** button to narrow down your Working Queue list.
14. Double-click on a row to open the **Transaction Details** window. In this window, you will see any open Line Items the client has and you can add adjustments or post.
15. If the lines are associated with old system remits you can select the checkbox in the **Delete** column and click **Delete Selected** button or click the **Delete All** button if applicable.

Post Paper EOB Directly to Line Item

1. Navigate to the Line Items Filter Form: **Billing Engine > File > Billing > Line Items**.
2. Use the filters to narrow down your search (e.g. by Payer or Client).
3. Click the **OK** button.
4. The Line Items List displays Line Items based on your search criteria.
5. Select a Line Item and click the **OK** button. The Line Item Form is displayed.
6. Click the **Transactions** button. The Transactions Form is displayed.
7. Click on the **Transactions Form** tab and then click the **Add** button.
8. Enter in the EOB details.
9. Click the **Save** button to post the payments and adjustments.

Note: Select the **Override Kickdown** checkbox if you need to apply a specific override to the Line Item and enter the override information to the right of the checkbox.

Post Paper EOB Using Grid

1. Navigate to the Transactions Entry Grid Form: **Billing Engine > File > Billing > Transactions Entry Grid**.
2. Search for the client. The open Line Items are displayed in the grid for the client.

3. Select a field within a Line Item and type directly into the grid to add the EOB information.

Note: If you need to override and push something to another insurance, in the upper right-hand corner of the form, highlight the insurance and select the **Push to Ins** button.

4. Click the **Save** button to post.

[Back to Top](#)

Bulk Change Print Status

On occasion you may find yourself needing to update the Print Status for a number of Line Items at once, so that you may resend them in an 837 file or re-print them.

1. Navigate to the Line Items Print Status Change Form: **Billing Engine > File > Billing > Line Items Print Status Change Form.**
2. Use the filters to narrow down your search (ex: by Payer or Client).
3. In the **Print Status (Y / N / S / R)** field, type in "N."
4. In the **Print Status Changed To** field, type in the Print Status you want to bulk change the Line Items to.
5. Click the **OK** button.
6. A window is displayed, "The system found # of records to change. Please Click Yes to continue or No to cancel." Click **Yes**.
7. A window is displayed, "Process Complete!" Click **OK**.

Note: You can navigate back to the Line Items List to see that the Print Status has been updated.

[Back to Top](#)