What does the Insurance set up screen do?

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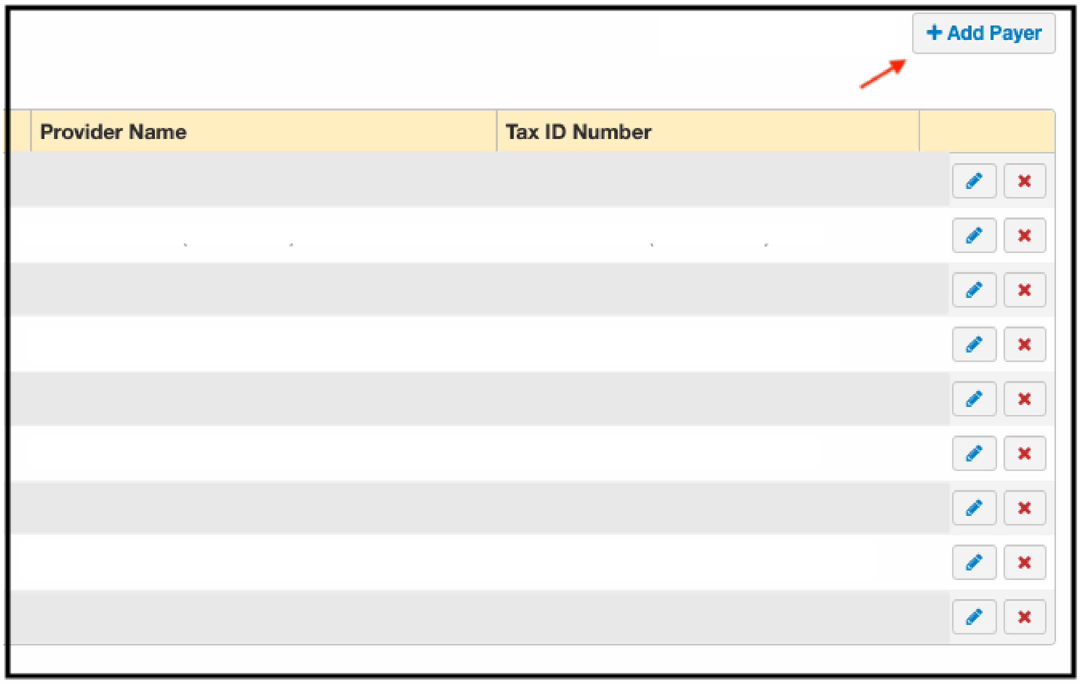
The **Insurance Setup** screen has multiple functionalities. Depending on how the provider/organization is credentialed, some claims may need to be billed with an individual NPI or SSN while another is billed with the group NPI and TIN. You can use this screen to set up the provider to bill claims for payers that use the information they were credentialed with.

You can use this feature to set up each provider, per payer with the requirements (TIN/SSN/Group vs Individual NPI/state license number/etc) to help ensure your claims are accepted for processing for the payer as quickly and efficiently as possible.

1. Select **Billing > Insurance Setup**.

   This screen shows all the insurances that you are billing along with the billing information (NPI, Tax ID, Organization Name) that you have updated in the **Account > Provider Settings > Billing**.

   If you do not see a payer that you need listed, select **Add Payer** and enter the information. Once you refresh your screen, the payer will be listed.

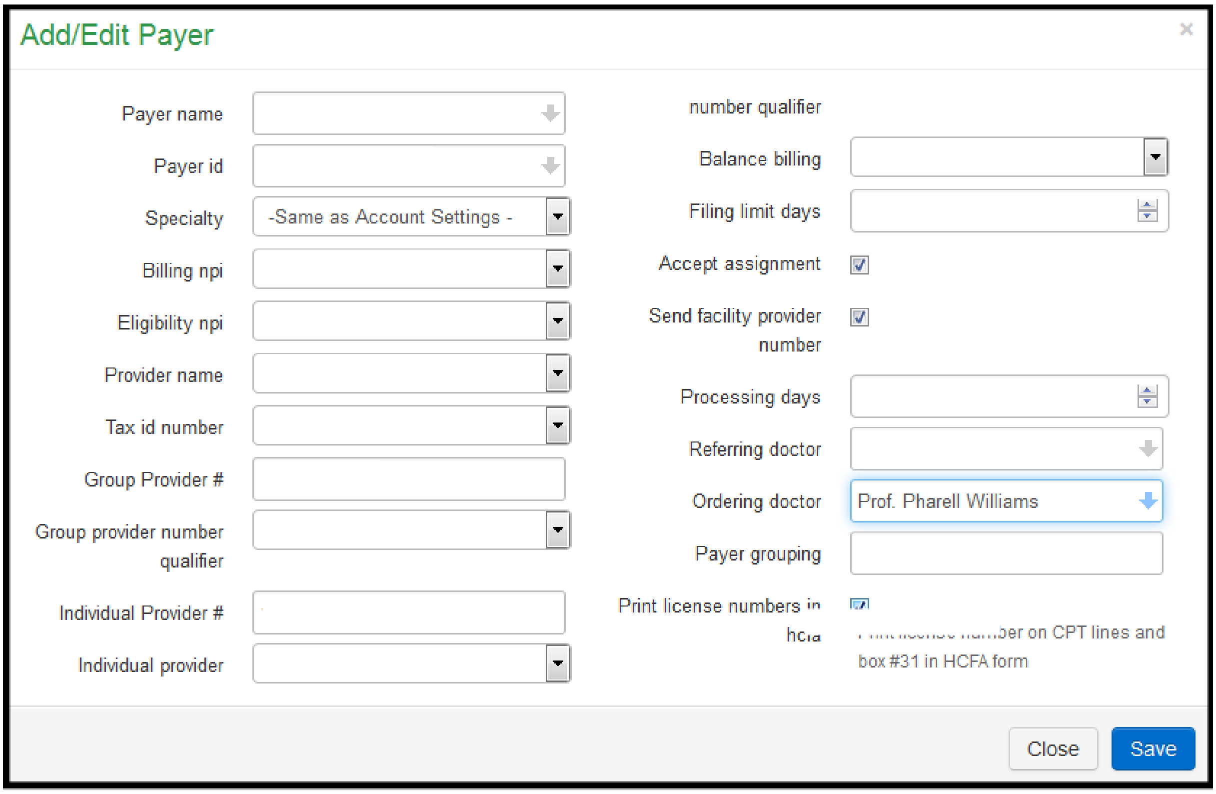
2. To edit or update any information, select the pencil icon corresponding to the payer.

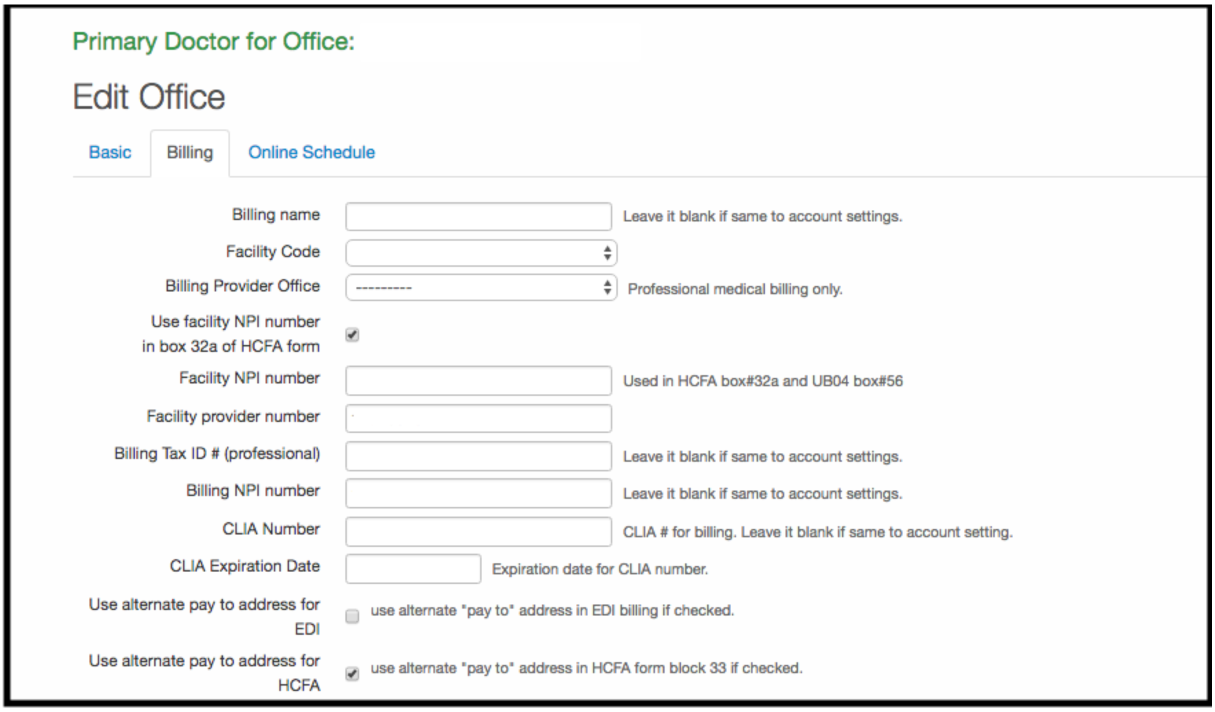
The **Add/Edit Payer** page has many options.

- **Billing NPI -** If you have two NPIs (Group and Individual), you can switch between the two depending on how you are credentialed with the payer. This is reflected in HCFA box 33a.
- **Eligibility NPI -** If you get an eligibility error message regarding enrollment, you can switch the NPI depending on how you are credentialed with the payer for eligibility. This is the NPI that the system uses to check a patient's eligibility and benefits.
- **Provider name -** Select the provider/practice name and this information is reflected in Box 33. **Example:**

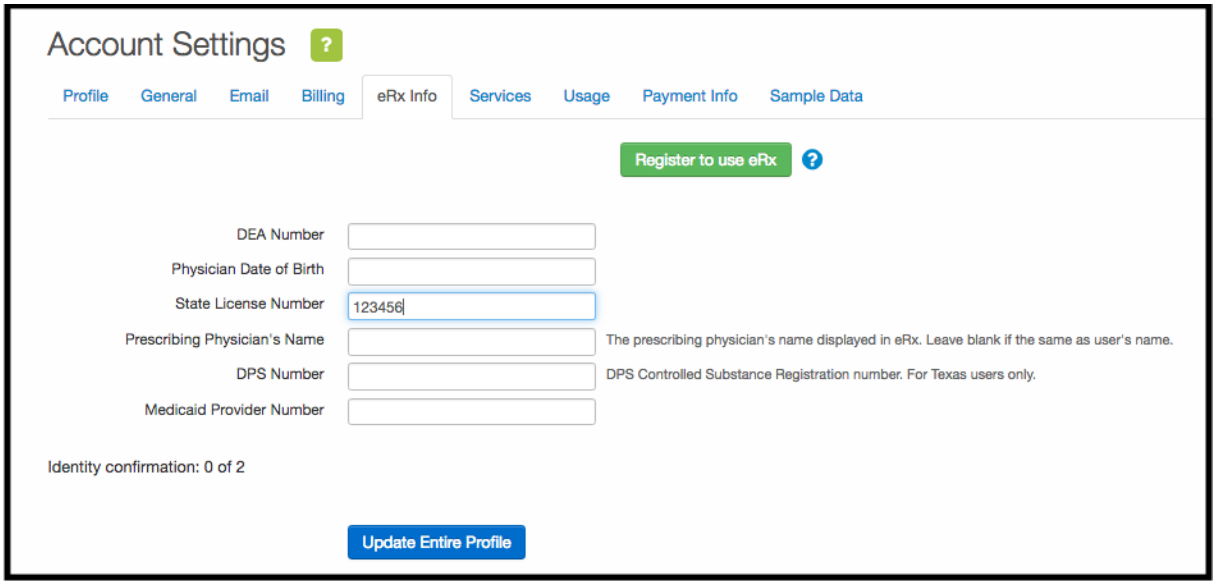
Select **Provider Name** if the billing NPI is individual.

- **Tax ID number / TIN -** Depending on how the provider is credentialed with the payer, you can switch between the billing with either the TIN or SSN.
- **Group Provider # -** If the insurance is requesting the group provider number in box 33b (shaded column), enter the group provider number in this field and choose the **Group provider number qualifier**. **Example:** Indicate whether it is Taxonomy or State License.
- **Individual Provider # -** If the insurance is requesting the individual provider number in box 24j (shaded column), please enter the individual provider number in this field and choose the **Individual provider number qualifier**. **Example:** Indicate whether it is Taxonomy or State License.
- **Balance billing** - If you are out of network with the payer and would like to bill the patient for any adjustment (sometimes listed as R & C amount), select **YES**. This transfers the adjustment amount toward the patient column.
- **Filing limit days -** If you know the timely filing limit for the payers, update in this field. You can retrieve a claim report in the **Billing > Live Claims Feed** by selecting the **TFL Warning** checkbox. This ensures that you don't miss out on reimbursement because the claim was not submitted in time.
- **Accept assignment -** If you clear this option, the insurance will send the payments directly to the patient and not to the doctor. To send claims with the **accept assignment** designation, leave the box selected. Some payers do not send payment directly to the provider, regardless of what is notated on the HCFA, if the provider is out of network.
- **Send facility provider number -** This number populates from the **Account > Offices > Edit > Billing > Facility Provider Number** field. It is reflected in HCFA box 32b (shaded field).
- **Referring doctor/Ordering doctor -** If you want a specific Referring/Ordering provider to reflect all patients who have this particular payer, enter the doctor's name that populates in this field. First, add the doctor's information to the **Message Center** as a contact.
- **Print license numbers in HCFA -** This number populates from **Account > Provider Settings > eRx Info > State License Number** field. This is reflected in HCFA boxes 24j (shaded area) and 31.




Primary Doctor for Office:
Edit Office
Basic
Billing
Online Schedule
Billing name
Leave it blank if same to account settings.
Facility Code
Billing Provider Office

Professional medical billing only.
Use facility NPI number in box 32a of HCFA form
Facility NPI number
Used in HCFA box#32a and UB04 box#56
Facility provider number
Billing Tax ID # (professional)
Leave it blank if same to account settings.
Billing NPI number
Leave it blank if same to account settings.
CLIA Number
CLIA # for billing. Leave it blank if same to account setting.
CLIA Expiration Date
Expiration date for CLIA number.
Use alternate pay to address for EDI
use alternate "pay to" address in EDI billing if checked.
Use alternate pay to address for HCFA
use alternate "pay to" address in HCFA form block 33 if checked.


Account Settings
?
Profile
General
Email
Billing
eRx Info
Services
Usage
Payment Info
Sample Data
Register to use eRx
DEA Number
Physician Date of Birth
State License Number
123456
Prescribing Physician's Name
The prescribing physician's name displayed in eRx. Leave blank if the same as user's name.
DPS Number
DPS Controlled Substance Registration number. For Texas users only.
Medicaid Provider Number
Identity confirmation: 0 of 2
Update Entire Profile