How to submit Secondary Claims in AccuCare

Two areas are important to the successful preparation and submission of electronic claims in AccuCare.

1) The first area is the client's payer plan information listed in the Client Intake > Payers Tab. Make sure the Primary Insurance Plan for the client is listed as Primary and has an Automation order = 1.

Make sure the Secondary Insurance Plan for the client is listed as Secondary and has an

Automation order = 2.

Demographics	Case	Management	Billing	Payers	Fee Schedule	Referrals	AI/AN	Custom Forms	Multi-Dimer	isional Assessment	Comments		
Add New Paye	r Plan												
Automation Order	Default	Payer Type	Paye	er Name	Plan Name	Plan Tj	/pe	Effective Date	End Date	ID Number	Held	Edit	Delete
2		Insurance	Mag Hea	gellan Behavio Ith Services	ral	Secon	dary	01/01/2021		23334		1	×
1	~	Insurance	Wes Adv	tern Health antage		Primar	У	01/01/2016		134		9	×

2) Next you will need to make sure to enter the Payment and Adjustment information from the Primary

Insurance Plan. These entries can be entered in the Insurance Payments module.

- A Payment entry from the Primary is required, even if the Primary paid zero.
- All Adjustments need to be entered using the "COB Adjustment" entry.
- All Payment and Adjustment amounts must equal the total charged amount of the service.

Note: The COB Adjustment amounts entered are not applied to the balance amount. They act as "Invisible entries" for secondary claim filing only.

3) If the Automation order in Client Intake and the Primary Payment and COB Information are entered correctly, then the system will automatically ready the service to be submitted to the secondary insurance plan and will contain all of the Primary EOB information on the claim.

4) If your service is not showing up in the Submit Services with a "Ready" status and the secondary

Payer as the Plan.

You can go into Client Billing Activity and edit the Charge service by selecting the secondary Payer as the Client's Payer Plan. This should allow the service to display in the Submit Services with the desired Payer; however, if the primary payer's EOB information was not entered properly, the service will most likely have a "Missing Info" status.

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#### Example #1:

Here is an example of an EOB from Medicare as the client's primary insurance plan:

PERF PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
NAME BI	I, RONA	LDO M.		HIC 9	A66666666	ACNT BE	NS 9R-01	ICN 17082190	015XXX	ASG Y	MOA MA01	MA18
1223344XXX	0701	070108	12	1	E1390		180.00	44.16	0.00	8.83 CO-42	135.84	35.33
PT RESP	8.83			CLAIM	TOTALS		180.00	44.16	0.00	8.83	135.84	35.33
CLAIM INFORM	MATION F	ORWARD	ED TO:	BCMN	(/BC/BS MIN	INESOTA						35.33 NET

The information from this EOB tells us:

Total Amount Charged=	\$180.00	Payment from Primary Insurance	\$ 35.33
Adjustment due to Co-Ins	\$ 8.83	Adjustment due to CO-42	\$135.84

The total of the payment amount and the two adjustments equal the charge amount of

\$180.00. This is how this information would look in the Insurance Payments in AccuCare:

ne - Dining - inst	Inalice Fa	yments						0.011		D.W D. 4 #	
arch by: Last Nar	ne 🗸					Name	Ponal	55N	BTL-	Billing Ref. #	_
gins with or match	es: be						Contracticity (c)				
<ul> <li>Date of service</li> <li>End date of ser</li> <li>Date posted</li> </ul>	vice	Start D End Da	ate: 09/01/2 ite: 09/17/2	2013							
ggle All ervices	5	Search	Display	AII						<b>☑</b> si	now only un
9/2/2013 Indiv	idual Therap	oy 1 Unit	rs \$180	(Remm,Beverl)	/ BeverlyR /	11-Office / 292.	<i>85)</i> File	d Date: 09/17/2013			
ype Payment	Amount	\$35.33	E.O.B Date	09/05/2013	Filed Date	09/17/2013	Ins Plan	[PRI]NE Mcare - 1/1/2011 - U	Memo	Posted	09/17/2013
vpe COB Adjustmer	t Amount	\$8.83	Grp Code	Patient Respon	Rsn Code	2 - Coinsurance	Ins Plan	[PRI]NE Mcare - 1/1/2011 - U	Memo	Posted	09/17/2013
/pe COB Adjustmen	It Amount	\$135.04	Grp Code	Contractual Ob	KSII Code	42 - Charges e	ins Plan	[PRI]NE MCare - 1/1/2011 - (	riemo	Posted	09/1//2013

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#### Example #2

110.

Another EOB from Medicare as the primary insurance plan, this plan paid zero to the provider.

PERF PROV	SERV	DATE	POS	NOS	PROC	MODS	BILLED	ALLOWED	DEDUCT	COINS	GRP/RC-AMT	PROV PD
AME CAL	, BUF	ORD		HIC 3	33333333A	ACNT C	12546P-02	ICN 170832101	1XXX	ASG N	MOA MA28	
1223344XXX	0704	070408	12	1	E0431		200.00	69.11	0.00	13.82 CO-42 CO-45 PR-100	10.37 120.52 55.29	0.00
PT RESP	79.48			CLAIM	TOTALS		200.00	69.11	0.00	13.82	186.18	0.00 0.00 NET

The information from this EOB tells

Total Amount Charged	\$200.00	<b>Payment from Primary Insurance</b>	\$ 0.00
Adjustment due to Patient Co-Ins	\$ 13.82	Adjustment due to CO -42	\$ 10.37
Adjustment due to CO -45	\$120.52	Adjustment due to PR-100	\$ 55.29

The total of the payment plus the four adjustments equals the charge amount of \$200.00

Below is how the information would be entered in the Insurance Payments in AccuCare to be able to generate a secondary claim.

arch by: Last Name	Name C	Buford	Billing Ref. # BIL-01CADBUPM	
gins with or matches: compared to the service Start Date:	c	, Buford	BIL-01CADBUFM	
ilter by: Date of service Start Date:				
Date of service Start Date:				
Start Date:				
End Date:	2			
Date posted				
Search Display All				
			-	
gle All			⊻ Sh	ow only un
rvices				
9/3/2013 Assessment 1 Units \$200 (Remm,Beverly)	/ BeverlyR / 11-Office / 305.90)	Filed Date: 09/17/2013		
pe Payment Amount \$0.00 E.O.B Date 09/05/20	13 Filed Date 09/17/2013	Ins Plan [PRI]NE Mcare - 1/1/2010 -	l Memo Posted	09/17/2013
pe COB Adjustment Amount \$13.82 Grp Code Patient Re	espon Rsn Code 2 - Coinsuran	ce Ins Plan [PRI]NE Mcare - 1/1/2010 -	l Memo Posted	09/17/2013
pe COB Adjustment Amount \$10.37 Grp Code Contractu	al Ob Rsn Code 42 - Charges	e: Ins Plan [PRI]NE Mcare - 1/1/2010 -	( Memo Posted	09/17/2013
pe COB Adjustment Amount \$120.52 Grp Code Contractus	al Ob Rsn Code 45 - Charge e	x Ins Plan [PRI]NE Mcare - 1/1/2010 -	l Memo Posted	09/17/2013
	coon Pen Code 100 - Davenan	t Ins Plan [PRI]NE Mcare - 1/1/2010 -	Memo Posted	09/17/2013
pe COB Adjustment Amount \$55.29 Grp Code Patient Re	apon KSI COLE 100 - Paymen			
pp     COB Adjustment     Amount     \$13.82     Grp Code     Patient Re       pp     COB Adjustment     Amount     \$10.37     Grp Code     Contracture       pp     COB Adjustment     Amount     \$120.32     Grp Code     Contracture	espon Rsn Code 2 - Coinsuran al Ob Rsn Code 42 - Charges al Ob Rsn Code 45 - Charge e	ct Ins Plan [PRI]NE Mcare - 1/1/2010 - e: Ins Plan [PRI]NE Mcare - 1/1/2010 - x Ins Plan [PRI]NE Mcare - 1/1/2010 - t Ins Plan [PRI]NE Mcare - 1/1/2010 -	l Memo Poste l Memo Poste l Memo Poste l Memo Poste	d d d

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Now that the Primary Payment amount and all of the COB adjustment amounts equal the charge amount, a secondary claim can now be prepared and submitted to the secondary insurance plan.

The step for preparing and submitting a secondary claim uses the same process for preparing and submitting primary insurance claims.

Either at this time or the next time that you go to Submit Service click the Display All Ready button. The claims that you have entered the information for to be sent to secondary insurance will now appear in the Submit Services screen with Ready status. Once these claims have been prepared with the method of electronic or paper, next you will submit or print in the Submit Insurance button.