

## Set up Ancillary charge record: Flu, Pneumonia & H1N1

Through **Resident Accounting** select **Libraries > Charges / GL Coding > Ancillary Charges**

- You need a record for each of the **five different** types of charges.
  - Flu shot
  - Flu shot administration
  - H1N1 shot administration (The H1N1 vaccine is provided and is *not* billable)
  - Pneumonia shot
  - Pneumonia shot administration
- To learn which charge items have already been set up in the profile, click the **Print Reports** button(lower right corner). Select **Cost Centers/Units**. Choose a range from 50 thru 80. Click **Print**. Review the report.

Cost Centers/Units  Print From 50 Thru 80

Cost Center Id	0051	Description	MEDICAL SUPPLIES
Item Number	0001	Description	FLU SHOTS
Type	<input checked="" type="radio"/> A/R Ancillary Charge <input type="radio"/> A/R Payment <input type="radio"/> A/R Adjustment <input type="radio"/> Inactive		
Bill Code	FLU	Enter SKIP to exclude from MaineCare bill	
Summary Code	51	Revenue Code	636
<input checked="" type="radio"/> UB04 Bill <input type="radio"/> HCFA 1500 Bill <input type="checkbox"/> Summary Bill		HCCPC Code	90658
Unit Price	10.00	Unit Cost	10.00
		Respiratory Therapy	
		Standard Minutes	0.00

- Build the types of charges that are not yet built.

Enter the **Cost Center ID** you use for these types of ancillaries.

Assign an **Item Number**.

**Bill Code:** **Flu** for Flu shot or Flu shot administration.

**Pneu** for Pneumonia shot or Pneumonia shot administration.

**H1N1** for H1N1 shot administration.

**UB04** and **HCCPC Codes:** Each Item has its own codes (below) which may change each year.

Flu Shot Diagnosis	V04.81	PNEU Diagnosis	V03.82	H1N1 Shot Diagnosis	V04.81
Flu Shot HCPC	90658	PNEU Shot HCPC	90732	H1N1 Shot HCPC	G9141
Flu Shot Rev Code	636	PNEU Shot Rev Code	636	H1N1 Shot Rev Code	771
Flu Shot Adm HCPC	G0008	PNEU Administration HCPC	G0009		
Rev. Code	771	PNEU Adm Rev Code	771		

Click **OK**. This will display the Cost Center G/L Coding Screen. See next page.

**Cost Center G/L Coding Screen**

Effect on A/R  Debit  Credit

Refer to your chart of accounts.  
 Call your accountant if necessary.

**A/R:** Enter the accounts receivable numbers for each insurance and each level of care.

**Revenue/Contractual/Cash**  
 Enter the appropriate account numbers for each insurance and level of care.

If you do not separate this transaction in your General Ledger by level of care, use only the **SNF/Default** column.

Complete only the insurance account number lines for the insurances that you plan to use for this transaction. This will prevent improper G/L posting due to incorrect payer entries.

Click **OK** to save the record.

Select **Libraries > Fee Schedules > Edit Medicare B**

Verify that the HCPCs are set up and that you have records for the following HCPC codes

**90658      G0008      90732**  
**G0009      G9141**

If these codes are not set up in the fee schedule, the billing process will error-trap them as invalid codes.

Enter the **Effective Date**.

Enter the **HCPC Code**.

Leave **Modifier 1** and **2** blank.

Enter a **Description** and the **Fee** for each item.

If the code is not built, the program will display:  
**Code does not exist, are you sure you want to add it?**  
 Click **Yes**.

Click  **Service Based**.

## Record Charges and Process Billing

To enter residents' charges select **Receipts/Charges/Adj > Ancillary Charges**.

Choose the correct **Payer Source**.

To bill these charges to Medicare B select **Billing > Medicare B > Select Bills**.

Enter the **Extract** date range and select Residents.

Select **Type**: Seasonal Flu, H1N1 or Pneumonia.

<input type="checkbox"/> Seasonal Flu
<input type="checkbox"/> H1N1 Flu
<input type="checkbox"/> Pneumonia

When bills have been selected, continue the billing process like a normal Medicare Part B billing.

You must bill each type separately.