So you've added a new insurance or doctor to your MEDENT system.

What's next?

Set the Credential/Bill As (CR/BA) fields.

The Bill As field determines how claims are submitted to insurance (electronic and paper claims). Both fields can be set manually in the Insurance Company Masterfile or via a utility.



Manual Instructions

- Under Practice Management, click Setup > Insurance Co's/Col Agencies > Insurance Co's/Collection Agcy's.
- Click **Edit/View** and select the insurance you need to edit.
- In the insurance company detail screen, click
 Provider #'s at the top of the screen and select
 Doctor Provider #'s.
- Click Edit and set the fields accordingly.

NOTE: The system defaults certain values based on the Provider Type. Doctor = R (Rendering) Resident = S (Supervising) Nurse Practitioner = R (Rendering) Nurse Practitioner (CA) = R (Rendering) Physician Assistant = R (Rendering) Physician Assistant (CA) = R (Rendering) Resource = S (Supervising) Other Non-Doctor Provider = R (Rendering) Dentist = R (Rendering) Dental Hygienist = S (Supervising) Locum Tenum = R (Rendering)

Utility Instructions

- Under Practice Management, click Setup > Insurance Co's/Col Agencies > Insurance Company Utilities > Set Credentialing/ Provider and 'Bill As' field for Selected Dr/Insurance.
- Click Ins/ECS ID > Selected.
 - Select the insurance companies that will be using the same flags. Click **OK**.
- Click Selected Doctors, select the provider(s) and click OK.
- Click Select Credential Option and make a selection.
- Click **Select Bill As Option** and indicate how you want to see the provider on the claim.
- Click the check mark 🗸 to run the utility.
 - NOTE: You may need to run this utility multiple times if setting different insurances and providers with different values.



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Questions? Submit a support request at <u>MEDENT.com</u>.

Understanding Your Options

The following values are used to fill in the Credential/Bill As (CR/BA) fields in MEDENT.

CR G-Group

Credentialed as a Group meaning MEDENT will send the Individual and Group NPI Numbers. For ECS claims, the Provider Type Org in the control file should be set to 008.

CR I - Individual

Credentialed as an Individual meaning MEDENT will send the Individual NPI Number.

CR N - Not Credentialed

MEDENT will not send the Claim and ECS selection and 1500 forms/insurance printing will Error Out.

CR P - Pending Credentialing

MEDENT will send Supervising Doctor NPI. Attach a supervising doctor in charge entry to bill the claim according to the value set for the Supervising Doctor selected.

CR H - Hold Claims

Claims for the provider will be held and not billed. For non-doctor, all claims will be held, even if they would have billed under the supervising doctor.

BA S - Supervising

Sends the Supervising Provider as the Servicing provider. Available if the Provider is set as: Nurse Practitioner, Physician Assistant, Other Non Doctor Provider, Resident or Resource.

BA R - Rendering

Sends the Rendering Provider as the Servicing provider. Available if the Provider is set as: Doctor, Dentist, Nurse Practitioner, Physician Assistant or Other Non Doctor Provider.

BA B - Both Supervising/Rendering

Sends both Rendering and Supervising providers. Available if the Provider is set as: Nurse Practitioner, Physician Assistant, Other Non Doctor Provider.

BA I - Incident To

Prompts Incident To question in progress note, eSuperbill or charge entry based on Charge Entry Standard Options > #33 'Incident to' Dflt Answer. Available if Provider is: Nurse Practitioner, Physician Assistant, Other Non Provider and Allow Incident to = Yes in Doctor Setup.

BA F - Fee Line Setup

MEDENT will continue to look at the Fee line setup to determine how the claim gets billed.

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