

EDI Support Services

Billing Therapy Claims Electronically Using PC-ACE Pro32

Many therapy claims do not require additional attachments or paperwork. However, "Incident-To" claims must contain the Date Last Seen (DLS) and Supervising Provider Information.

Implementation Guide Specifics

- *Date Last Seen (DLS)* – This is the date that the patient was seen by the attending/supervising physician for the qualifying medical condition related to the services performed.

Example: DTP*304*D8*20080120~

- The DLS is required when claims involve services from an independent physical therapist, occupational therapist, or physician services involving routine foot care.
 - The DLS is submitted in Loop 2300 (Claim Information).
 - The DLS is submitted in a DTP segment.
 - The Date/Time Qualifier must be submitted as 304.
 - The Date Time Period Format Qualifier must be submitted as D8.
 - The Date Time Period must be submitted in a format CCYYMMDD.
- *Supervising Provider Information*

Example: NM1*DQ*1*LAST*FIRST*MI***XX*1234567893~

- The supervising provider name is submitted in Loop 2310E (Supervising Provider Name).
- The supervising provider name is submitted in a NM1 segment. The Entity Identifier Code must be submitted as DQ.
- The Entity Type Qualifier must be submitted as 1.
- The Identification Code Qualifier must be submitted as XX.
- The Identification Code must be submitted as the supervising NPI.

Entering a Therapy Claim Using PC-ACE Pro32

Billing Line Items tab:

The screenshot shows the 'Professional Claim Form' window with the 'Billing Line Items' tab selected. The 'Physical Therapy (C)' sub-tab is active. The 'Diagnosis Codes (1 - 8):' field contains 'V571'. The table below has the following data for line 1:

LN	24a - Service Dates From	24a - Service Dates Thru	24b PS	24c EMG	24d Proc	24d - Modifiers 1	24d - Modifiers 2	24e Diagnosis	24f Charges	24g Units	24h EP	24h FP	24h AT	24j Rendering Phys.
1	01/01/2013	01/01/2013			97004					1.00				
2														
3														
4														
5														
6														

Summary fields at the bottom: 28 - Total Charge: 0.00, 29 - Patient Amount Paid: 0.00, 30 - Balance Due: 0.00. Buttons for 'Recalculate', 'Save', and 'Cancel' are visible.

1. Enter the claim diagnosis code, service dates and a pre-defined procedure code.
Note: When a valid physical therapy procedure code is entered, the physical therapy tab will automatically appear.

Physical Therapy tab:

The screenshot shows the 'Professional Claim Form' window with the 'Physical Therapy (C)' sub-tab selected. The 'Attending/Supervising Phys ID' and 'Date Last Seen' fields are highlighted with a red box.

1. Select the Physical Therapy tab to enter the Attending/Supervising Phys ID and Date Last Seen.

Billing Line Items tab/Extended Details (Line) tab:

Professional Claim Form

Patient Info & General | Insured Information | **Billing Line Items** | Ext. Patient/General | Ext. Pat/Gen (2) | Ext. Payer/Insured

Line Item Details | **Extended Details (Line 1)** | Ext Details 2 (Line 1) | Ext Details 3 (Line 1) | Physical Therapy (C)

Miscellaneous Extended Details

24d - Modifiers 3 & 4 Hospice Employed? Purch. Charges Sales Tax
 Anesthesia/Other Minutes Co-Pay Status Initial Treatment Postage Claim
 Units Type Code Purchased Services? Shipped Date

Line-Level Supporting Provider Information

	Last/Org Name	First Name	MI	Suffix	Provider IDs / Types / Payer IDs		
Rendering							
Purch. Service							
Supervising							
Ordering							
Referring							
Referring (2nd)							
Asst. Surgeon							

Save Cancel

Note: The supervising provider information on the Extended Details tab will automatically populate when the Supervising Provider ID is completed on the Physical Therapy tab.