

Common Billing Errors - Before Approving Bills

Diagnosis Code – only the first diagnosis code in the list will be validated from MCP, therefore the diagnosis code has to be under that fee code. If not, it will be changed to 'Partial.' If you have one fee code and multiple diagnosis codes ensure the first one in the bill matches the fee code.

Expired MCP – bills with an expired MCP will not be submitted. To find the current MCP expiry, search the client registry.

Out of Province Primary Health Card Number (PHN) – ensure you have the PHN on the patient chart before billing.

Babies using Mothers MCP – ensure you have checked the box on the newborn demographics page to ensure the mothers MCP is sent in the bill. The 'Primary Parent' must also be checked in the newborns chart.

Billing Dashboards

Ministry claims review (NL) – provides the life cycle of the bill for each provider (pending/approved/submitted).

- If bills are in 'submitted' status and don't change for a few days, contact TELUS or MCP as there may be a batch error.
- If bills fall under the 'outside of 30 days' widget, log a ticket with TELUS or call MCP.

Billing Remittance (NL) – lists remittance statements based on a two-week period from MCP. Also lists 'action required' bills (i.e. partials) from this remittance period.

- 'Action required' bills can be accessed from this widget or via 'My Bills' from the EMR main page. Partial bills will have an error code, but no description. The description can be found in the billing remittance statement for that provider.

TADS

TADS (Partial or Refused) can be found under 'My Bills' on the main page of the EMR.

Refused – if a bill comes back as **refused**, find the reason code and description within the TAD. Then fix the error and resubmit electronically via the EMR.

Partial – if a bill is returned to the EMR in **partial** status, but should have been paid in full, fax the correct fee and diagnosis code, provider billing number and reason to MCP at 1-709-292-4053. MCP will change the fee code to allow the provider to get partial payment as this work was done even if the fee and diagnosis code don't match. The error code will be displayed with no description. The description can be viewed under the billing remittance bulletin. To access:

- From the main EMR screen select the 'My Bills' icon. Then select the 'Messages' icon (top right) from that window.
- Once you are in the messages window you can scroll down to find the message.
- This message will provide you with the error code descriptions of all 'partial' bills.
- It will also indicate how much you have been paid for that timeframe and provide you with any additional funds owed.