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Newsletter, October 13, 2015

**We are moving:**

The office has moved to the Bloomington, Indiana area.. New Address: PO Box 511, Spencer, IN 47460. Office phone number is 812 585 6045, cell phone for emergencies is 505 249 3793. The email address is [ronaldbparks@hotmail.com](mailto:ronaldbparks@hotmail.com).

**ICD10:**

It is your responsibility to test your ICD10 submissions. I cannot test for you. A major update has been uploaded to the download page. You should backup your data files before installing the update. Several files will be updated. Install on your main or server computer first. This will increase the characters allowed for ICD10 from 7 to 9.

You must use the 'New Form' when printing insurance claims. The old form does not support ICD10. Ensure the INS LAYOUT has the IFO:DIAGTYPE without a default. Some users had set the default to 9. Follow the instructions in the user manual to setup the new form. Some carriers seem to want a period in the ICD10 code, some do not want the period. In the past I have removed the periods for electronic. I will not remove the period in ICD10 codes. Put the period in or leave it out, the data you enter will not be changed.

Your med.ini file needs the [ICD10] section.

```
[ICD10]  
USEICD10=YES
```

Change the YES to a NO for resubmitting claims with dates of service prior to October 1. See the additional ICD10 paragraph around page 4 of this newsletter.

**Halting New Sales:**

We are no longer marketing the program. We will continue to support existing customers. I plan to retire in a few years. Support will continue for many years.

**Support and Upgrade Changes for 2015:**

The October update is the last update planned for 2015. We are changing our policy on updates and phone support.

**Phone Support:**

Phone support will still be provided but you will be charged a minimum of \$30.00 for calls lasting more than 5 minutes.

**Email Support:**

Most email support will remain free. Email support requiring research for electronic claim rejections will be charged a minimum of \$30.00. There may be other cases that could result in a charge. You will receive prior notice.

**Remote Support:**

Very short remote support assistance will remain free. You will receive prior notice of any charge for remote support.

**Support Payment:**

I will send an invoice by mail or email. You may pay by the 'Place Order' button on my web page, [www.billingmedical.com](http://www.billingmedical.com). I can send a PayPal request for payment. Checks will be accepted.

**Updates:**

Program updates will no longer be free. There will a \$50.00 charge for updates. Updates will be mailed or provided by FTP download. We usually have one update in the 4<sup>th</sup> quarter, this is a free update.

**Failure to pay:**

All invoices must be paid within 30 days. Failure to pay will result in no support.

Read the updated anti-virus information. Windows defender can cause problems.

Instructions for MSP, Medicare Secondary Payer Electronic claim filing may be downloaded from [www.billingmedical.com/SECONDARY.PDF](http://www.billingmedical.com/SECONDARY.PDF)

A new update is available from [www.billingmedical.com/download.html](http://www.billingmedical.com/download.html). I have added the ability to add a patient photo to the patient update screen. Read the user manual, setup.txt file or use the help files for instructions. We will be adding a contact information page to the Patient Demographic screen. You will be able to add Cell Phone, Email, and other patient contact information.

I currently do not have a method of sending test claims via paper or electronic. I must leave the testing up to the users. Let me know if you experience problems.

I am adding a new section to the newsletter. I will be adding a list of problems and solutions to the end of this newsletter.

**New 1500 (02-12) Form?**

The January 2014 update allows the printing of the new Form 1500 (02-12) or the current Form 1500 (08/05). There is a box on the setup screen for printing insurance forms. Select the "New Form" field if you wish to print the Form 1500 (02-12). The program will remember your setting for each login. We will force use of the new form in April 2014. There is a great deal of differences in the NUCC manual ([www.nucc.org](http://www.nucc.org)) and the Medicare Claims Processing Manual, 100-04 Chapter 26. I am sure that we will have future changes to the printing of paper claims. The creation of the ANSI 5010 Electronic Data Interchange file has not changed. Read the user manual, Manual.doc or Manual.pdf for instructions on modifying your Insurance Layouts. The main change is to the Diagnosis Code Box 21 and the addition of qualifiers to the DOI, Other Date and Referring Physician. Use the instructions for the new HCFA at [www.nucc.org](http://www.nucc.org). Read the [www.billingmedical.com](http://www.billingmedical.com) [ronaldbparks@hotmail.com](mailto:ronaldbparks@hotmail.com) Office 812.585.6045

user manual for examples and help in changing your insurance form layout file. You may set the MED.INI file to always use the new form, read the user manual. **Medicare has not updated instructions for the new form, I suspect they will.**

### **Insurance Layout for New 1500 (02-12)**

The user manual, manual.pdf or manual.doc contains step by step instructions for changing the layout for the new 1500. Each insurance carrier may have a unique layout. You may add as many layouts as you have carriers. The default layout is normally HCFA. All carriers should be accepting the new layout. Some states have different rules for workmen compensation claims. I recommend copying the current layout to another name, HCFAOLD (or any name that suits your system). It will be difficult to switch between the new and old insurance layouts. You may delete the mreport.tps and forms.tps files from the c:\medbill\sample directory. Install the latest update. This will install a new version of the default Ins Layout in the sample directory. You can open the sample program and view or print the layout.

### **Additional Fields for New 1500:**

The charge header screen has three new fields and a rename of one field. Read the 1500 02-12 user manual at [www.nucc.org](http://www.nucc.org). The Date of Illness field has a qualifier, the default will be 431 Date of Illness/Injury, 484 is the date of LMP. The date of same or similar illness has been renamed Other date and a qualifier has been added. The other date qualifier has a drop down list, select the date type. A new qualifier has been added for the Referring Physician. The default is DN for referring. Use the [nucc.org](http://nucc.org) manual for other codes.

### **EDI Clearing House Support:**

MED will work with most electronic clearing houses and most carriers that accept direct submission of electronic claims. We can help with initial setup and may be able to help with testing. There may be a small charge for testing. We have many providers filing direct with Medicare GBA's. You are responsible for selecting the Clearing House or Carrier.

Availity, [www.availity.com](http://www.availity.com).

Capario, [www.capario.com](http://www.capario.com)

ClaimMD, [www.claim.md](http://www.claim.md)

Lindsay Technical Consultants, [www.lindtech.com](http://www.lindtech.com)

There are many other EDI clearing houses.

### **Phone Support:**

Please keep phone questions to a minimum. Email support is normally free, [ronaldbparks@hotmail.com](mailto:ronaldbparks@hotmail.com) . Some users call for assistance when email would have been better. I will try to answer short well defined phone questions. I cannot teach you how to operate your computer. You should know how to use windows explorer, notepad and be able to follow simple instructions. I can help with how to use the MED Program. I do not teach billing or help with insurance carriers. Read the reports received from the insurance carriers and clearing houses.

### **Phone Support Alert:**

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Calling AOL, Yahoo and many other internet portal providers may subject you to bogus support. You may be directed to an oversea call center. They will tell you that you have a virus and may even install malware on your computer. You will be offered a program to fix your problem. Do not pay \$79.00, \$99.00 or \$239.00 to this call center. Contact a local support person. Check your current anti-virus software.

### **Support Charges:**

Phone calls over 5 minutes and remote connection assistance over 5 minutes will be charged \$30.00. Calls and remote connection over 30 minutes will be charged \$60.00. Email support will continue to be free for most support requests.

### **Malware:**

Any program that you did not want on your computer can be considered Malware. Trojan Horses, spyware, viruses and root kits are examples of Malware. Other programs that you find on computer but you did not install can be considered Malware. An example would be the ASK toolbar, Chrome browser and the Macafee free scanner. These are very good programs, but programs you may not have planned to install. Downloading Adobe Reader may install additional software, be alert to the little check boxes. Adobe is not alone in this practice. Many unwanted programs and some viruses are downloaded because you did not notice the check boxes, or you selected the recommended quick install. I use the custom install option to see what other programs are being installed. The recommended or default install options may make changes that will slow down your computer. You can uninstall many of these unwanted programs by using the Add/Remove programs or Programs option in the Control Panel. Your anti virus or spyware program may be able to remove some of the unwanted programs. There is a free program, Malwarebytes [www.malwarebytes.org](http://www.malwarebytes.org) that is very good at removing Trojan Horse programs and root kits. The Malwarebyte program is free for 14 days. You may purchase the program for \$24.95. Hitmanpro is an excellent program to remove malware, <http://www.surfright.nl/en/hitmanpro> . Ccleaner may be used to repair windows registry problems, [www.piriform.com/ccleaner](http://www.piriform.com/ccleaner) .Be cautious when downloading programs from the internet.

### **Windows 8:**

We have tested MED with Windows 8, 32 and 64 bit versions, no problems.

### **HELP Files:**

All the MED programs use winhlp32. Microsoft has stopped including winhlp32.exe in the standard operating system installation for Vista, Windows 7 and Windows 8. Follow this link to view Microsoft message KB917607 <http://go.microsoft.com/fwlink/?LinkID=82148>. Or search the Microsoft web site for winhlp32.exe. Download the version of winhlp32 that matches your windows version (32 or 64 bit). Windows 8 users will use the Windows 7 version of winhlp32. I have created CHM type help files for MED, MEDEMR, QUERY, HISTORY and LINEPAY. The newer CHM help files may be viewed on most smart phones and tablets. The CHM files are installed in the default directory, usually C:\MEDBILL. We will continue using winhlp32 but will keep the CHM files current.

### **UPDATES:**

Backup your data and program directory on the main computer prior to any update. Install the update on the main or server computer then update the workstations. Windows 7, 8, Vista and Server may require administrator privileges. You may want to change the

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properties of the program icons to run as administrator. You may need to change the UAC settings during installation.

**Ambulance Billing:**

MED may be used for Ambulance Billing. I will work with any office that wants to use the program to bill Ambulance charges. I have noticed that most Ambulance programs are very expensive.

**Price Reduction:**

We are reducing the price of the software. The current price is \$595.00 is being reduced to \$195.00. We often offer specials at [www.ebay.com](http://www.ebay.com).

**ICD10:**

The ICD10 conversion has been completed. The current update contains ICD10 (CM) and ICD10 (PCS) files. These files were created from a GEM, General Equivalent Mapping file. You may search for an ICD9 code, select the suggested ICD10 code. You are responsible for the accuracy of all codes. The file is provided as a starting point for ICD10 diagnosis codes. You need to add a section to the program INI file, usually C:\MEDBILL\MED.INI.

[ICD10]  
USEICD10=YES

[INSFORM]  
HCFA1202=YES will only use the new form.

This will enable ICD10 support; change the YES to NO to go back to ICD9 diagnosis codes. You may need to add ICD10 and PCS10 to the [COMMON] section if you use multiple directories. Install the update on server or main computer first. Set USEICD10 to NO or omit to use ICD9 Codes.

**UB04 Support:**

We will not remove Institutional billing, UB04 from MED. You may need to enter your own ICD10 procedure codes. The ICD10 PCS Browse does not contain a selection button.

**Electronic Filing Problems:**

The 5010 conversion problems have vanished. I have seen very few problems. The carriers were changing edit checks and not updating the companion guides. Some clearing houses are upgrading 4010 claims to 5010. Be sure to use 5010. Do not use the 4010 claims. Request for assistance must contain the type of claim you submitted (4010 or 5010). I will connect to your computer via INSTANTVNC to look at the file. We should not be sending patient data via email. You may send redacted error reports, black out or remove Protected Health Information.

**Not Otherwise Classified (NOC) and NDC:**

Try to avoid NOC codes. The CPT code J3301, Kenalog injection is a good example of an NOC code that must be used. Read the user manual for instructions for submitting NDC numbers. You need to change your insurance layout and enter the NDC number using the format specified in the user manual. You also need to enter additional

information, drug name and dosage administered. This information may vary by insurance carrier. Read the user manual for instructions for adding the line note. The program will add the line note to SV101-7 if the Reference field starts N4. Watch the website for future changes to the line note and NOC code requirements. Different carriers may have unique requirements for the line note. Medicare may not pay for the injection.

### **835 ERA's:**

We have completed the upgrade of the automatic import of the Ansi 835 ERA files. The program will import the older and newer format. You may select the ERA type 4010 or 5010.

### **Data Encryption:**

Data files containing protected healthcare information that can be associated with a patient may be encrypted. I have heard from a few users on using file encryption. Users of Windows 7, 8 and Server 2008 may use the BitLocker program provided by MicroSoft. This is a total disk or directory encryption system. Windows versions greater then Window 98/ME may use the free TrueCrypt program to encrypt the entire drive or an individual directory. Data encryption may not work on Windows 98 or ME.

The user manual, MANUAL.PDF and the Med Help Files have been updated. Instructions for using the MS Word Merge are included. You can merge basic patient information into a Microsoft Word document. A new Face Sheet has been added to the Patient Browse Screen. The face sheet shows patient name, address along with the responsible party and insurance information.

### **More 5010:**

We have completed testing for the 5010 for Professional and Institutional Claims with Availity, [www.availity.com](http://www.availity.com). Users filing direct to a carrier should use the 5010 version. You may download the new SETUP.EXE. You may contact your clearing house or carrier for testing instructions. I can provide assistance. ***It is your responsibility to test your 5010 claims.*** Please visit [www.billingmedical.com](http://www.billingmedical.com) for the most current updates. I have submitted a request for vendor testing with Trailblazer, waiting for approval to test. Discontinue sending 4010 claims.

### **Medicare Vendor ID:**

I have completed testing with Trailblazer, my vendor ID is V00397. You may need to complete a new production form. It is easier for you to submit test claims using your submitter id number. Trailblazer is J4, some of the other GBA's may accept my vendor ID? I will help in submitting test claims to your clearing house.

### **5010 Tips:**

You need Zip +4 codes for your Office, Providers, Hospitals, Facilities, Referring Physicians. It is a good idea to use Zip+4 for Insurance Companies. Include Zip+4 codes that are known to you. Do not make up a code. All patients should have social security numbers. If you cannot obtain the SSN, do not put anything in the Patient SSN field. Billing provider address cannot be a PO Box. There can be only one NDC per claim line. The user manual contains instructions for different Pay To addresses. It is better to not include the '-' dash between the zip and zip+ numbers.

**Claims Program: (update, we are working on updating the claims program)**

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The free Claims program will not be updated for 5010. You may continue to print the claims. Some clearing houses use print image files. The claims program will create a good print image. Some clearing houses will accept 4010 claims. The claims program will create the 4010. You may update to the MED program, contact us for update pricing.

### **HL7:**

We are working on adding HL7 support. We can create an interface to your EMR, Electronic Medical Record program on a case by case basis. It seems the HL7 support between EMR programs is plagued by version problems. We have created a Lab interface. Contact us for details, [ronaldbparks@hotmail.com](mailto:ronaldbparks@hotmail.com). We are using HL7 version 2.3. We plan to switch to HL7 version 3.

### **Special Reports:**

There have been many requests for special reports. It is possible to create just about any type of report. The key is always the data. We cannot report items that are not collected. You may create your own reports using a commercial report writer, MicroSoft Access, Excel or by use of an ODBC driver. Most of the file and field definitions are in the user manual, Manual.pdf. Topscan is a program that is included in the installation. Topscan can be used to export your data to a CSV file (comma separated file) and print the data base schema. I can create reports to meet your needs. You need to be very specific on what you want. A report may cost as little as \$75.00 but may be much higher. A ODBC driver may be purchased for \$150.00. Visit [www.softvelocity.com](http://www.softvelocity.com).

### **Training Videos:**

There are training videos at [www.billingmedical.com](http://www.billingmedical.com). The videos are in MP4 format you may need Quick Time or another program to view the videos. You may also view the videos on you tube. (<http://www.youtube.com/watch?v=ZFSxZtbeNL8>).

Microsoft is offering a free Anti Virus program, Microsoft Security Essentials. **You will need to exclude the data files, \*.tps and maybe the entire directory for MED (usually c:\medbill). Microsoft Security Essentials is known to cause data corruption when you are using data files in a multi user environment.** Most anti virus programs are checking all files when they are opened. This can cause data corruption. Workstation computers should not be checking files on the server or main computer. Each anti virus program has different methods of excluding files and directories.

### **Backup:**

We are seeing problems with backups. Make sure your backup system is working. Amazing Charts users need to use the Amazing Chart backup and copy the backup files to a removable device. Your backup media may fail. Test your backup. I will provide free assistance for backup issues. Backup everything you believe to be important. Create a system for backing up your computer and the MED programs.

- You should have an offsite backup solution.
- Do not rely on a single backup system.
- Have multiple backup devices.
- Replace your backup media on a regular schedule.
- Test your backup. (Restore your data onto another computer.)

### **Off Site Backup Recommendations:**

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- IBACKUP, [www.ibackup.com](http://www.ibackup.com). About \$15.00 per month. Backs up at night, very fast and secure, everything in the backup job is backed up.
- IDRIVE, [www.ibackup.com](http://www.ibackup.com). A cheaper version of ibackup. Similar to Carbonite.
- CARBONITE, [www.carbonite.com](http://www.carbonite.com). \$60.00 per year. Backs up during normal usage. Everything is not backed up every day.
- Mozy, [www.mozy.com](http://www.mozy.com), \$60.00 per year, similar to Carbonite.
- USB external drives, Tape Drives. One time cost for the drive and extra tapes. You need to rotate your backup drives or tapes. One complete backup set must be stored off site. A fireproof safe may not provide protection. Your USB or Tape cartridge may fail. Replace the backup media often, save the old media.
- Edrive, about \$5.00 per month, I believe Ibackup provides this.

#### **ANTIVIRUS:**

- Obtain an antivirus program.
- Keep your antivirus system up to date.
- Run scans weekly.
- You should have an antivirus program on all computers.

**You will need to exclude the data files (\*.tps) from virus checking.** You may want to exclude the entire Medbill directory. I can recommend AVG, [www.avg.com](http://www.avg.com), Comodo, [www.comodo.com](http://www.comodo.com) and Avast, [www.avast.com](http://www.avast.com). There are many excellent antivirus programs. A good antivirus program should not slow your Computer. Windows 7 and 8 have a built in anti virus program, Window Defender. This is similar to MicroSoft Security Essentials. You must exclude the \*.tps files from virus checking. Window Defender will cause damage to your data files.

#### **SPYWARE/MALWARE:**

All computers with internet access need spyware detection and removal software. My favorite spyware program is SpyBot, [www.safer-networking.org](http://www.safer-networking.org). Run spyware scans. Keep your spyware software up to date. Many of the antivirus programs contain spyware removal.

#### **Remote Support:**

We are using INSTANTVNC.EXE as our remote connection program of choice. You may download the program at [www.billingmedical.com/download.html](http://www.billingmedical.com/download.html). Save INSTANTVNC.exe on your desktop. You may sign up for a free remote connection account at [www.logmein.com](http://www.logmein.com). I can connect to your computer over the internet. There may be a small charge for remote connection support. Send an email for detailed logmein.com instructions. Read the Remote Assistance Instruction manual on my web page, [www.billingmedical.com](http://www.billingmedical.com). I do not keep logins or passwords for your system. You will need to supply the correct login and passwords for logmein and gotomypc and team viewer.

Visit my web site, [www.billingmedical.com](http://www.billingmedical.com) for up to date information and alerts. Send an email or call if you have questions about backup, antivirus, spyware and support.

Thank you,



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## Problems and Solutions:

Problem: Charges not saved, payment date defaults to current date.

Solution: Download and reinstall the update.

In January we had three reports of download problems. In two cases the Charge screen would not save the entered charge amount. The other problem was with the payments screen not keeping the payment date it was defaulting to the current date. All three problems were solved by downloading the program a second time. I am forced to use a HTTP transfer. My web portal does not allow FTP transfers. HTTP has very little error checking or error recovery. There were 78 downloads in January, three problems. You can order a CD or arrange for us to connect to your computer by using the InstantVnc program.

Problem: Some users are having trouble understanding Medicare Secondary Claims.

Solution: We are working on creating a tutorial or improving the user manual.

Medicare Secondary Payments (MSP) via EDI has long been an issue. The user manual is a little short on instruction. Instructions for MSP, Medicare Secondary Payer Electronic claim filing may be downloaded from [www.billingmedical.com/SECONDARY.PDF](http://www.billingmedical.com/SECONDARY.PDF)

Pay to instructions are giving some users problems. The idea is to use an existing or and extra provider for pay to address. The MED.INI needs a line added to the [ANSI] section. PAYTO=xx, where xx is the provider that contains the address that you will receive payments.

Lots of ICD10 problems. You need to use the new form, modify the med.ini file and check your ins layout for no default on the IFO:DIAGTYPE.