

# STRATFORD

Volume 20.09

Healthcare EDI and Management Software

September 1996

## *stratford notes*

**W**e have received written notice that Medicare will begin rejecting unprocessable claims beginning October 1, 1996.

An unprocessable claim is incomplete or has invalid information. This rejection will be for assigned and unassigned claims. Medicare will not return the hardcopy claim to you; they will discard it. You will receive notice of the rejection on your remittance advice. Unfortunately, the claim will be rejected when the first problem is encountered. This means you will only be informed of the first problem. You must resubmit the entire claim. If the claim has several errors, you may correct the first problem and then have the claim rejected again for a second problem. When you resubmit the claim, it is not treated as a resubmission, but is treated as an initial submission.

All of the items that will cause a rejection are checked by the Stratford program prior to creating the claim. The Stratford program creates an audit that lists all the problems. This audit will allow you to correct the claim before it is sent to Medicare. The Stratford program has had this audit capability for many years. Here is the potential problem for some of our customers: As you know, in the past, Medicare did not reject the claims. A person would review the claim and in most cases that person would correct the problem. Because of this, many Stratford customers demanded to have an override switch which would cause the claim to print or transmit with errors. Now those

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customers will begin having claims rejected. Since we have no way of knowing which customers have been using the switch, we cannot contact them. Do you use the switch? •

Recently we had an article about Blue Shield's decision not to renew their contract for Medicare processing in Northern California. Now we have received notice that Aetna will not continue its contract with HCFA. Aetna presently processes part B claims in 9 states. Aetna also processes part A claims in several areas including California. Many Stratford customers will be affected. For example, Stratford recently had its ANSI 837 program approved for transmitting Rural Health part A (UB92) claims in California. As far as we know, Stratford is the only software vendor to have the ANSI format approved by Aetna. If any changes are required we will notify those customers who are using the ANSI

*You can find Stratford's Internet server at this address:*

**Training Classes**  
**SHS Software Basic Training**

In the Stratford Classroom:

Every Friday	9:30 AM -12:00 PM	\$165
	1:30 PM - 4:00 PM	\$165
By Appointment		\$165

Call for class availability at least three days in advance.  
On-site training with a certified Stratford trainer may be available (*by appointment only*). The cost is \$250.  
Telephone training is available (*by appointment only*).

**FROM THE EDI CORNER.....**

Virginia customers: You may now download your Medicare acknowledgment reports. They will be automatically reformatted for you.

Ohio customers: You may now transmit your claims using the Stratford ANSI 837 program.

Mississippi customers: You may now transmit your claims to Medicare using the Stratford NSF program. •

**NPI/NPS**

(National Provider Identifier/National Provider System) HCFA is assigning a unique number to all healthcare providers. This number will replace PIN and UPIN numbers as well as all other identification numbers used in government health care programs. The number will also be used for billing. The number will be used by private sector insurers and state Medicaid agencies.

The number is an 8-position number. The eighth position is a "check digit". Individual physicians, limited license practitioners, and group practices will

receive a two-position suffix to indicate different practice locations.

Providers must begin using this number on all Medicare claims beginning February 1997.

We do not have much more information about this number than what is printed above. The number will probably require every Stratford customer who bills Medicare to have a database update. This is not a simple program change but a change to the data files. Every user will probably be required to change the UPIN and PIN numbers for every provider and referring provider in their database. As you know, the UPIN is a 5 position ID and the PIN number is more than 8 positions. There will probably be no easy conversion. Unless HCFA publishes a conversion table, Stratford will have no way to convert your numbers for you.

This is one more change that will make all other existing software programs unusable for Medicare billing. The previous change regarding the formatting of electronic claims could be handled by sending the claims to a clearinghouse. This ID number change cannot be handled by a third party but must be handled by the billing office. Aren't you happy that you use the Stratford program? We will do about 95% of the work for you. •

**EDI "per-claim" charges**

Stratford does not have any "per-claim" or other charges related to transmitting claims to Medicare or any other carrier. We only charge (optional) for supporting

## TIMELY FILING OF MEDICARE CLAIMS

You have up to two years to file a Medicare claim.

Dates of Service	Must be Filed By
10/01/93 to 09/30/94	12/31/95
10/01/94 to 09/30/95	12/31/96
10/01/95 to 09/30/96	12/31/97

## BILLING FOR CRITICAL CARE

Do you use the CPT code 99292 for evaluation and management of unstable critically ill or unstable critically injured patients? The first one hour of time must be billed using CPT 99291. You cannot use 99292 alone. It can only be used with 99291. 99292 is used for billing each **additional** 30 minutes of constant attendance by the physician. In billing for the time, you should round to the nearest 30 minutes. For example, 35 additional minutes is billed as 30 minutes by placing a 1 in the quantity field. You can bill 45 additional minutes as one hour by placing a 2 in the quantity field. •

## JOB OPENINGS AT

Stratford will run your Stratford software related classified ad in our monthly newsletter *free*, upon SHS approval!



## STRATFORD

If you know someone who is (or was) employed by a Stratford competitor that is going out of business, Stratford has job openings now and we are anxious to talk to her/him.

If you believe you have the necessary qualifications for customer support and or healthcare software programming, please contact us.

Please send your resume by fax to:  
(415) 692-1073 or by email to:  
[jobs@stratfordsoftware.com](mailto:jobs@stratfordsoftware.com).

Do not call. If you are qualified, we will contact you to set up an interview.

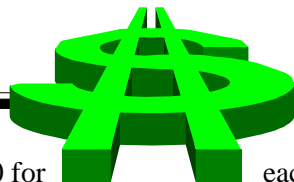
Software support and development is a career with an unlimited future. We believe it IS the future. •

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 ★ California Healthcare Management ★  
 ★ is running seminars in medical billing. ★  
 ★ The basic seminar for \$50 will be held ★  
 ★ on a Saturday, from 9AM to 2PM. ★  
 ★ The advanced seminar for \$100 will be ★  
 ★ held on a Saturday, from 9AM to 2PM. ★  
 ★ To secure reservations, call: ★  
 ★ CHM ★  
 ★ 2130 Palmetto Ave. ★  
 ★ Pacifica, CA 94044 ★  
 ★ For exact dates and times call ★  
 ★ (415) 359-4195 ★  
 ★\*\*\*\*\*

## SOFTWARE SUPPORT NOTES

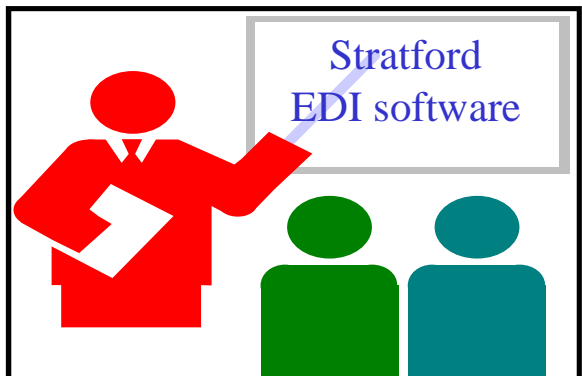
We have customers who say “I did not call you 6 times during the past 120 days so I should get a credit on my account.” Your basic support fee does not pay for *any* phone calls. That is right, no calls at all. The basic fee only pays for us to keep the programs current. We include an average number of calls as a courtesy because we understand that support questions are a necessary part of distributing software. If you call more than the average, then we charge more because you require more than the average amount of time from the support staff. We have not yet billed anyone on a per-call basis. Companies that charge on a per-call basis must hire a large staff of people to resolve the complaints from customers who are not happy with the support or for some other reason, believe they should not be required to pay. We have researched this by going to meetings where “call-center” issues are discussed. Providing support for software is a major problem for the software industry at this time. There are articles in most major newspapers regarding this almost every month. The two conflicting problems are: a support organization is very expensive and difficult to run and the customers want to pay as little as possible.

If you consider all the costs of using Stratford software, you will find that it is much less expensive than any other comparable software. We only raise the charge \$21.50 per month for extra calls. Before you call us to complain about your bill, think about the amount involved and ask yourself how much service you can provide for \$21.50. •



Stratford will pay you \$100 for each person\* you refer who purchases Stratford Software at full price (\$895). Simply call or write to give us your referral. **We must receive the referral notice in advance of the sale.** We will take care of the rest!

\*Subject to restrictions



## ADVANCED TIP OF THE MONTH

**Priority support service:** The fastest way to get support is by fax. It is possible for us to receive more than 100 calls within the first 15 minutes after we open in the morning. It is not possible for us to have a technical support person waiting to take your call without charging much more than we now do.

**If you send a fax with a description of the problem, your call is given priority over other calls.** If you call and leave the message “please call”, your call is placed at the bottom of the call-back list. We must do everything we can to avoid “phone-tag” so that we may help the maximum number of people in the minimum amount of time.

**Do not call more than one time. The second call places your first call at the**

### *Stratford Newsletter*

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*<http://www.stratfordsoftware.com/>*

*New Software Sales Only (800) 274-4594*