



MEDTRON
SOFTWARE INTELLIGENCE



01/30/12 NEWS BLAST

*****UPDATED*****

Overview of Louisiana Medicaid Managed Care Bayou Health Plans (BHP)

With the transition of traditional Medicaid to the new managed Medicaid through Bayou Health Plans MDS/MSI has published several News Blasts with the 'most up to date' information available:

- [012312 Overview LA Medicaid Bayou Health Plans](#)
- [121411 LA Medicaid CCNs New Name – Bayou Health](#)
- [092311 LA Medicaid CCN Announced](#)
- [080111 Recommended Administrators for CCNs](#)
- [071911 Making Medicaid Better Initiative - Update](#)
- [071311 LA Medicaid Coordinated Care Networks](#)

Providers will continue to have questions as to what these plans entail, what providers need to do, how to tell which plan each patient has, where to send claims, how payments will be received, how to setup support files, etc. as this is a very new concept with many new players.

In an effort to share our findings and develop some 'semblance of a protocol', MDS/MSI has created a BHP Comparison Grid* that displays each plan side-by-side and lists pertinent information that may be needed, i.e., correct claims address, visits allowed, where to obtain authorizations, provider relations contact information, etc.

**NOTE: MDS/MSI disclaims any responsibility for missing or incorrect information; as this is a work in progress and much of the information changes as the plans convey information.*

Instead of publishing a News Blast with each update, this grid will be readily available to all practices with the 'most up to date' information via our website, www.medtronsoftware.com. Practice staff can use the below link to add a shortcut (see instructions below) to their desktop for quick reference. The grid will be password protected, so practices will use the same user ID/password previously distributed for accessing MEDTRON User Guides.

<http://www.medtronsoftware.com/User Guides/LA Medicaid Managed Medicaid Bayou Health Plan Comparison.xls>

Also attached is an updated version of the recommended Setup & Support information (as used in MEDDATA Service Bureau) to describe how to setup the Insurance Master and Financial Class Master for each plan. Practices should setup the needed insurance codes/financial classes as soon as possible. **(MDS clients do not need to setup as this has already been completed.)**

To request a User ID/Password or any questions contact Software Support for assistance via:

Email: From MEDTRON Sign On screen, double click on 'support@medtronsoftware.com'

-OR-

Phone: (985) 234-0599 (local)
(800) 978-0599 (toll free)

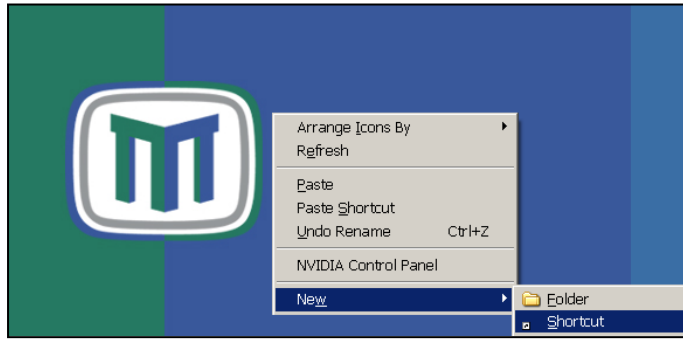
-OR-

Fax: (985) 234-0609

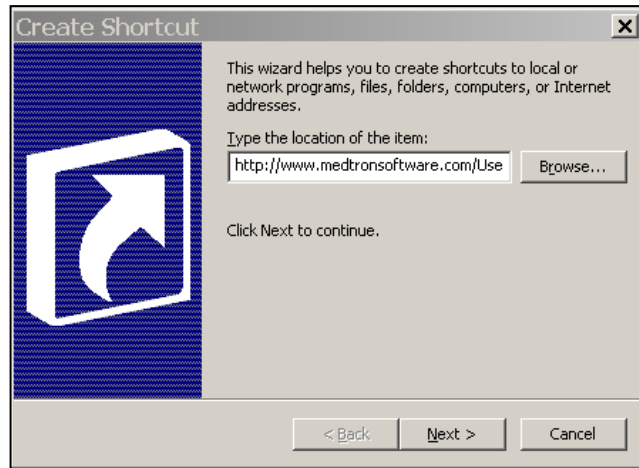
The complete News Blast including the LA Medicaid – Managed Medicaid Bayou Health Plan (BHP) (Formerly CCN) Comparison attachment is available via the MEDTRON website, 'Newsletters & News Blast' page.

To Create a Shortcut for the Desktop:

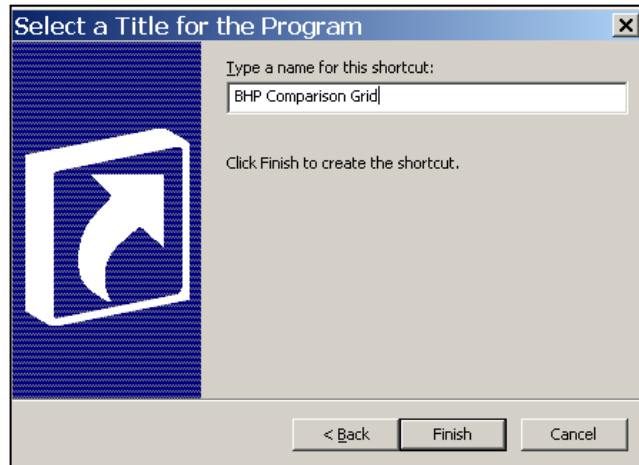
Highlight link, right click, 'Copy'
Go to desktop
Right click anywhere on empty space
Select 'New', 'Shortcut'



Create Shortcut dialog box will display
Under 'Type the location of the item' paste link
from this News Blast.
Click 'Next'



Under 'Type a name for this shortcut' key in
name of file as it should be displayed on
users desktop.
Click 'Finish'



Shortcut will now present on desktop.



Financial Class Master (#2-Setup & Support, #10-Financial Classes):

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                            Time: 11:36:09

Record Status -----> _
Financial Class -----> T1

Description -----> AMERGRP REAL SOL (MGD-MCD)
Specific Action Financial Group -----> T# BAYOU HLTH PLAN (MGD-MCD)
Reporting Financial Group -----> T# BAYOU HLTH PLAN (MGD-MCD)
Alternate Message Indicator -----> 3 Med Necessity Ind -----> ____
Delete Outstanding Claims: PRIMARY ---> N SECONDARY Claims -----> N
Print Co-pay Amount on CMS 1500-----> N Print Desc on 1500 ----> Y
File Insurance: BATCH ENTRY -----> Y FRONT DESK ENTRY -----> Y
Send Disclosure Statement -----> 2 Ind/Wrk Comp -----> N
Prt Company ATTN Line on Stmt/Ins ----> N Special *** Clms Cmpl- -> Y

PATIENT DEFAULTS
Hold Statement Code -----> N File Ins Instruction -> _
Accept Assignment: PRIMARY -----> Y SECONDARY -----> Y
PRIMARY Insurance Code -----> AMT AMERGRP REAL SOL (MGD-MCD)
SECONDARY Insurance Code -----> ____
Last changed by TRACY on 01/12/2012 @ 15:56:07 1 of 4
F3=Exit F12=Prior Screen
DE230-01
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                            Time: 11:36:51

Record Status :
Financial Class: T1 - AMERGRP REAL SOL (MGD-MCD)

TRANSFER RESPONSIBILITY INDICATOR
Transfer Patient Responsibility Indicator -----> 2
1. Transfer to Patient Responsible ___ days after PRIMARY INS is FILED.
2. Transfer to Patient Responsible after PRIMARY INS has PAID.
3. Transfer to Patient Responsible ___ days after SECONDARY INS is FILED.
4. Transfer to Patient Responsible after SECONDARY INS has PAID.

Automatic Payment Posting -----> N (Y/N)
Automatic Write-Off Posting -----> N (Y/N)
Calculate Payment Due at Front Desk ---> N (Y/N)
Calculate Write-Off at Front Desk -----> N (Y/N)
Write-Off Adjustment Code -----> ____

2 of 4
F3=Exit F12=Prior Screen
DE230-02
    
```

```

Mode: CHANGE          FINANCIAL CLASS MASTER          SL Date: 01/30/12
                                                            Time: 13:10:18

Financial Class: T1 - AMERGRP REAL SOL (MGD-MCD)

(I/D) Script
- BAYOU HEALTH:PREPAID:Must be LA Medicaid Provider
- ALL PROVIDERS MUST ENROLL IN PLAN TO BE PAR
- First 30 days - waiver for PAR status
- ENROLLMENT DATE:
- non PAR paid with authorization @90%
- GRP EFF:          PROV#:          CASE#:
- *****PHYSICIAN'S*****
- *****NPP'S*****
- *****FEE SCHEDULE*****
- REQUESTED:
- RECEIVED:

Last Changed by TRACY on 01/21/2012 @ 10:26 3 of 4
F3=Exit F11=Lock I/D F12=Prior Screen
DE230-03
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                            Time: 15:30:18

Financial Class: T1 - AMERGRP REAL SOL (MGD-MCD)

Front Desk Script
LABS:QUEST, LABCORP, AFFILIATED FACILITIES, & CLIA CERTIFIED
PROV OFC

FACILITIES:ALL HCA (LAKEVIEW REG MED CNTR), N OAKS MED CNTR,
OPELOUSAS GENERAL HOSP, SLIDELL MEM HOSP,
ST TAMMANY PARISH HOSP, THIBODEAUX REG MED CNTR

Last Changed by TRACY on 01/21/2012 @ 10:26 4 of 4
F3=Exit F12=Prior Screen
DE230-04
    
```

Plan Name: Community Health Solutions of America, Inc. (CHS-LA) (Shared Savings)

Insurance Company Master (#2-Setup & Support, #6-Insurance Company):

Mode: DISPLAY INSURANCE COMPANY MASTER SL Date: 01/18/12
Time: 09:24:43

Status Code ----> _
Company Code ----> CLA
Insurance Type --> Q (F4)

Carrier Aff ----> BHP BAYOU HEALTH PLANS
Company Name ----> COMM HLTH SOL-LA(MGD-MCD)
Group Name ----> _____

Address Line 1 --> P O BOX 23199
Address Line 2 --> _____
City/State/Zip --> ST PETERSBURG FL (F4) 33742 Country -> US (F4)
Telephone ----> 855-247-5248 Extension: _____
Fax ----> _____ Prt on Clm: _ (Y/N)
Web Address ----> http://www.louisiana.chsamerica.com
E-mail Address --> mailto:Krobertson@chsamerica.com

Alt DME Carrier --> N (Y/N)

Prov #: NO Pol Edt: NO Last Changed: 1/16/2012 @ 15:56:52 by TRACY
F3=Exit F8=Policy # Edits F11=Provider Numbers F12=Prior Screen
1 of 5 DE200-01

Mode: DISPLAY INSURANCE COMPANY MASTER SL Date: 01/16/12
Time: 15:13:20

Co Status/Code/Name -> CLA COMM HLTH SOLUTIONS-LA

Appeals Address:
Attention ----> GRIEVANCE SYSTEM COORDINATOR
Address Line 1 --> 1000 118TH AVE N
Address Line 2 --> CHS-LA
City/State/Zip --> ST PETERSBURG FL (F4) 33716 Country -> US (F4)
Telephone ----> 855-247-5248 Extension: _____
Fax ----> 866-907-4842
Web Address ----> _____
E-mail Address --> _____

Prov #: NO Pol Edt: NO
F3=Exit F8=Policy # Edits F11=Provider Numbers F12=Prior Screen
2 of 5 DE200-02

Mode: CHANGE INSURANCE COMPANY MASTER SL Date: 01/25/12
Time: 10:34:42

Co Status/Code/Name -> CLA COMM HLTH SOL-LA(MGD-MCD)

FMC Type: Re-File Days: O/R # Elec Refiles:
Primary ----> W Primary --> 55 Primary --> _____
Secondary ----> _ Secondary -> 55 Secondary -> _____

Medigap ----> Y (Y/N) Medigap ID ----> _____
Electronic ID ----> CL411 OL Eligibility Plan --> _____
National Carrier ID --> _____ TPL ID ----> _____
CPT Code Indicator --> 2 (1/2) File Ops Min/Units --> W (M/U)
Direct Mail To ----> I (I/G) Timely Filing Days ----> 365
System EOBs on 2nd --> Y (Y/N) Timely Filing-Appeals --> _____
O/R Phy 1500 Sgn Bx --> _ (Y/N/Blk)

O/R Ins Pay Desc ----> PAYMENT-COMM HLTH SOL-LA(

****UPDATED****

Prov #: YES Pol Edt: NO
F3=Exit F8=Policy # Edits F11=Provider Numbers F12=Prior Screen
3 of 5 DE200-05

Mode: DISPLAY INSURANCE COMPANY MASTER SL Date: 01/18/12
Time: 09:25:38

Co Status/Code/Name -> CLA COMM HLTH SOL-LA(MGD-MCD)

Pay To Name: Use --> _ (1/2/3/Blk) O/R --> _____
Pay To Addr: Use --> _ (1/2/3/Blk) O/R --> _____ *

O/R Tax ID ----> _____

NPI Criteria
Activate ----> B (Y/N/B)
Effective Date ----> _____
Base On ----> (F/S)
Pay To NPI ----> (1/2/3/Blk) O/R Pay To NPI --> _____
Rendering NPI ----> (1/2/9/Blk)

*Note: Second address line does not print on paper claims.

Prov #: NO Pol Edt: NO
F3=Exit F8=Policy # Edits F11=Provider Numbers F12=Prior Screen
4 of 5 DE200-06

Mode: DISPLAY INSURANCE COMPANY MASTER SL Date: 01/23/12
Time: 16:36:21

Company Code: CLA - COMM HLTH SOL-LA(MGD-MCD)

****UPDATED****

(I/D) Notes
- CLAIMS FILING:
- ~~NOTED: CLAIMS MUST BE FILED WITHIN 90 DAYS OF DATE OF SVC~~

Removed comment as this was later rescinded.

Bottom

Last Changed: 1/21/2012 @ 09:21 by TRACY
F3=Exit F12=Prior Screen
5 of 5 DE200-09

NOTE: Community Health Solutions has indicated they need both the LA Medicaid PTAN/Legacy # as well as the NPI.

NOTE: Use F11 to add provider #'s to system for claim submission. ****UPDATED****

Financial Class Master (#2-Setup & Support, #10-Financial Classes):

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/18/12
                                                             Time: 09:31:34

Record Status -----> _
Financial Class -----> T6

Description -----> COM HLT SOLUTION(MGD MCD)
Specific Action Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Reporting Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Alternate Message Indicator -----> 3 Med Necessity Ind ----> ____
Delete Outstanding Claims: PRIMARY ---> N SECONDARY Claims ----> N
Print Co-pay Amount on CMS 1500-----> N Print Desc on 1500 ---> Y
File Insurance: BATCH ENTRY -----> Y FRONT DESK ENTRY -----> Y
Send Disclosure Statement -----> 2 Ind/Wrk Comp -----> N
Prt Company ATTN Line on Stmt/Ins ----> N Special *** Clms Cmpl-> Y

PATIENT DEFAULTS
Hold Statement Code -----> N File Ins Instruction -> _
Accept Assignment: PRIMARY -----> Y SECONDARY -----> Y
PRIMARY Insurance Code -----> CLA COMM HLTH SOL-LA(MGD-MCD)
SECONDARY Insurance Code -----> ____
Last changed by TRACY on 01/17/2012 @ 11:13:48 1 of 4
F3=Exit F12=Prior Screen
DE230-01
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                             Time: 15:10:28

Record Status :
Financial Class: T6 - COM HLT SOLUTION(MGD MCD)

TRANSFER RESPONSIBILITY INDICATOR
Transfer Patient Responsibility Indicator -----> 2
1. Transfer to Patient Responsible ___ days after PRIMARY INS is FILED.
2. Transfer to Patient Responsible after PRIMARY INS has PAID.
3. Transfer to Patient Responsible ___ days after SECONDARY INS is FILED.
4. Transfer to Patient Responsible after SECONDARY INS has PAID.

Automatic Payment Posting -----> N (Y/N)
Automatic Write-Off Posting -----> N (Y/N)
Calculate Payment Due at Front Desk ---> N (Y/N)
Calculate Write-Off at Front Desk ----> N (Y/N)
Write-Off Adjustment Code -----> ____

2 of 4
F3=Exit F12=Prior Screen
DE230-02
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                             Time: 15:31:44

Financial Class: T6 - COM HLT SOLUTION(MGD MCD)

(I/D) Script
- BAYOU HEALTH PLAN:SHARED:Must be LA Medicaid Provider
- ONLY PCP'S MUST ENROLL IN PLAN TO BE PAR:
- PCP ENROLLMENT DATE:
- GRP EFF:          PROV#:          CASE#:
- ****PHYSICIAN'S****
- ****NPP'S****
- ****FEE SCHEDULE****
- REQUESTED:
- RECEIVED:
- LOADED:
- FINAL ALW MSTR CODE:

More...
Last Changed by TRACY on 01/21/2012 @ 10:53 3 of 4
F3=Exit F12=Prior Screen
DE230-03
    
```

```

Mode: CHANGE          FINANCIAL CLASS MASTER          SL Date: 01/30/12
                                                             Time: 13:15:14

Financial Class: T6 - COM HLT SOLUTION(MGD MCD)

Front Desk Script
LABS: Any LA Medicaid Lab/Facility

**UPDATED**

Last Changed by TRACY on 01/21/2012 @ 10:53 4 of 4
F3=Exit F12=Prior Screen
DE230-04
    
```


Financial Class Master (#2-Setup & Support, #10-Financial Classes):

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                              Time: 15:38:14

Record Status -----> _
Financial Class -----> T2

Description -----> LA CARE (MGD-MCD)
Specific Action Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Reporting Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Alternate Message Indicator -----> 3 Med Necessity Ind ----> ____
Delete Outstanding Claims: PRIMARY ---> N SECONDARY Claims -----> N
Print Co-pay Amount on CMS 1500-----> N Print Desc on 1500 ---> Y
File Insurance: BATCH ENTRY -----> Y FRONT DESK ENTRY -----> Y
Send Disclosure Statement -----> 2 Ind/Wrk Comp -----> N
Prt Company ATTN Line on Stmt/Ins ----> N Special *** Clms Cmpl-> Y

PATIENT DEFAULTS
Hold Statement Code -----> N File Ins Instruction -> _
Accept Assignment: PRIMARY -----> Y SECONDARY -----> Y
PRIMARY Insurance Code -----> LAC LACARE (MGD-MCD)
SECONDARY Insurance Code -----> ____
Last changed by TRACY on 01/06/2012 @ 11:02:21 1 of 4
F3=Exit F12=Prior Screen
DE230-01
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                              Time: 15:38:44

Record Status :
Financial Class: T2 - LA CARE (MGD-MCD)

TRANSFER RESPONSIBILITY INDICATOR
Transfer Patient Responsibility Indicator -----> 2
1. Transfer to Patient Responsible ___ days after PRIMARY INS is FILED.
2. Transfer to Patient Responsible after PRIMARY INS has PAID.
3. Transfer to Patient Responsible ___ days after SECONDARY INS is FILED.
4. Transfer to Patient Responsible after SECONDARY INS has PAID.

Automatic Payment Posting -----> N (Y/N)
Automatic Write-Off Posting -----> N (Y/N)
Calculate Payment Due at Front Desk ---> N (Y/N)
Calculate Write-Off at Front Desk -----> N (Y/N)
Write-Off Adjustment Code -----> ____

2 of 4
F3=Exit F12=Prior Screen
DE230-02
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                              Time: 15:34:15

Financial Class: T2 - LA CARE (MGD-MCD)

(I/D) Script
- BAYOU HEALTH:PREPAID:Must be LA Medicaid Provider
- ALL PROVIDERS MUST ENROLL IN PLAN TO BE PAR:
- ENROLLMENT DATE:
-
- GRP EFF:      PROV#:      CASE#:
-
- ****PHYSICIAN'S****
-
- ****NPP'S****
-
- ****FEE SCHEDULE****
- REQUESTED:
- RECEIVED:
- LOADED:
- FINAL ALW MSTR CODE:

More...
Last Changed by TRACY on 01/21/2012 @ 10:26 3 of 4
F3=Exit F12=Prior Screen
DE230-03
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                              Time: 15:34:45

Financial Class: T2 - LA CARE (MGD-MCD)

Front Desk Script
LABS:QUEST, LABCORP, AFFILIATED FACILITIES, & CLIA CERTIFIED
PROV OFC
FACILITIES:OPELOUSAS GEN HOSP, ST TAMMANY PARISH HOSP

Last Changed by TRACY on 01/21/2012 @ 10:26 4 of 4
F3=Exit F12=Prior Screen
DE230-04
    
```


Financial Class Master (#2-Setup & Support, #10-Financial Classes):

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                            Time: 15:40:19

Record Status -----> _
Financial Class -----> T3

Description -----> LA HLTHCARE CONN(MGD MCD)
Specific Action Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Reporting Financial Group -----> IH BAYOU HLTH PLAN (MGD-MCD)
Alternate Message Indicator -----> 3 Med Necessity Ind -----> ____
Delete Outstanding Claims: PRIMARY ---> N SECONDARY Claims -----> N
Print Co-pay Amount on CMS 1500-----> N Print Desc on 1500 ---> Y
File Insurance: BATCH ENTRY -----> Y FRONT DESK ENTRY -----> Y
Send Disclosure Statement -----> 2 Ind/Wrk Comp -----> N
Prt Company ATTN Line on Stmt/Ins ---> N Special *** Clms Cmpl-> Y

PATIENT DEFAULTS
Hold Statement Code -----> N File Ins Instruction -> _
Accept Assignment: PRIMARY -----> Y SECONDARY -----> Y
PRIMARY Insurance Code -----> LHC LA HLTHCARE CONN(MGD-MCD)
SECONDARY Insurance Code -----> ____
Last changed by TRACY on 01/06/2012 @ 11:05:45 1 of 4
F3=Exit F12=Prior Screen
DE230-01
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                            Time: 15:40:53

Record Status :
Financial Class: T3 - LA HLTHCARE CONN(MGD MCD)

TRANSFER RESPONSIBILITY INDICATOR
Transfer Patient Responsibility Indicator -----> 2
1. Transfer to Patient Responsible ___ days after PRIMARY INS is FILED.
2. Transfer to Patient Responsible after PRIMARY INS has PAID.
3. Transfer to Patient Responsible ___ days after SECONDARY INS is FILED.
4. Transfer to Patient Responsible after SECONDARY INS has PAID.

Automatic Payment Posting -----> N (Y/N)
Automatic Write-Off Posting -----> N (Y/N)
Calculate Payment Due at Front Desk ---> N (Y/N)
Calculate Write-Off at Front Desk -----> N (Y/N)
Write-Off Adjustment Code -----> ____

2 of 4
F3=Exit F12=Prior Screen
DE230-02
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                            Time: 15:35:37

Financial Class: T3 - LA HLTHCARE CONN(MGD MCD)

(I/D) Script
- BAYOU HEALTH:PREPAID:Must be LA Medicaid Provider
- ALL PROVIDERS MUST ENROLL IN PLAN TO BE PAR:
- ENROLLMENT DATE:
-
- GRP EFF:      PROV#:      CASE#:
-
- ****PHYSICIAN'S****
-
- ****NPP'S****
-
- ****FEE SCHEDULE****
- REQUESTED:
- RECEIVED:
- LOADED:
- FINAL ALW MSTR CODE:

More...
Last Changed by TRACY on 01/21/2012 @ 10:33 3 of 4
F3=Exit F12=Prior Screen
DE230-03
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                            Time: 15:36:03

Financial Class: T3 - LA HLTHCARE CONN(MGD MCD)

Front Desk Script
LABS:QUEST, LABCORP, AFFILIATED FACILITIES, & CLIA CERTIFIED
PROV OFC
-
-
FACILITIES:ALL HCA(LAKEVIEW REG MED CNTR),MERCY REG MED CNTR
OPELOUSAS GEN HOSP, ST TAMMANY PARISH HOSP,
THIBODEAUX REG MED CNTR
-
-
Last Changed by TRACY on 01/21/2012 @ 10:33 4 of 4
F3=Exit F12=Prior Screen
DE230-04
    
```


Financial Class Master (#2-Setup & Support, #10-Financial Classes):

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/18/12
                                                              Time: 09:34:28

Record Status -----> _
Financial Class -----> T7

Description -----> UNITED HLTHCARE (MGD-MCD)
Specific Action Financial Group -----> TH BAYOU HLTH PLAN (MGD-MCD)
Reporting Financial Group -----> TH BAYOU HLTH PLAN (MGD-MCD)
Alternate Message Indicator -----> 3 Med Necessity Ind ----> ____
Delete Outstanding Claims: PRIMARY ----> N SECONDARY Claims ----> N
Print Co-pay Amount on CMS 1500-----> N Print Desc on 1500 ---> Y
File Insurance: BATCH ENTRY -----> Y FRONT DESK ENTRY -----> Y
Send Disclosure Statement -----> 2 Ind/Wrk Comp -----> N
Prt Company ATTN Line on Stmt/Ins ----> N Special *** Clms Cmpl-> Y

PATIENT DEFAULTS
Hold Statement Code -----> N File Ins Instruction -> _
Accept Assignment: PRIMARY -----> Y SECONDARY -----> Y
PRIMARY Insurance Code -----> UMF UNITED HLTHCARE (MGD-MCD)
SECONDARY Insurance Code -----> ____
Last changed by TRACY on 01/17/2012 @ 11:23:43 1 of 4
F3=Exit F12=Prior Screen
DE230-01
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/16/12
                                                              Time: 15:46:18

Record Status :
Financial Class: T7 - UNITED HLTHCARE (MGD-MCD)

TRANSFER RESPONSIBILITY INDICATOR
Transfer Patient Responsibility Indicator -----> 2
1. Transfer to Patient Responsible ___ days after PRIMARY INS is FILED.
2. Transfer to Patient Responsible after PRIMARY INS has PAID.
3. Transfer to Patient Responsible ___ days after SECONDARY INS is FILED.
4. Transfer to Patient Responsible after SECONDARY INS has PAID.

Automatic Payment Posting -----> N (Y/N)
Automatic Write-Off Posting -----> N (Y/N)
Calculate Payment Due at Front Desk ----> N (Y/N)
Calculate Write-Off at Front Desk -----> N (Y/N)
Write-Off Adjustment Code -----> ____

2 of 4
F3=Exit F12=Prior Screen
DE230-02
    
```

```

Mode: DISPLAY          FINANCIAL CLASS MASTER          SL Date: 01/23/12
                                                              Time: 15:40:00

Financial Class: T7 - UNITED HLTHCARE (MGD-MCD)

(I/D) Script
- BAYOU HEALTH PLAN:SHARED:Must be LA Medicaid Provider
- ONLY PCP'S MUST ENROLL IN PLAN TO BE PAR:
- PCP ENROLLMENT DATE:
-
- GRP EFF:      PROV#:      CASE#:
-
- ****PHYSICIAN'S****
-
- ****NPP'S****
-
- ****FEE SCHEDULE****
- REQUESTED:
- RECEIVED:
- LOADED:
- FINAL ALW MSTR CODE:
More...
Last Changed by TRACY on 01/21/2012 @ 10:53 3 of 4
F3=Exit F12=Prior Screen
DE230-03
    
```

```

Mode: CHANGE          FINANCIAL CLASS MASTER          SL Date: 01/30/12
                                                              Time: 13:20:20

Financial Class: T7 - UNITED HLTHCARE (MGD-MCD)

Front Desk Script
LABS: Any LA Medicaid Lab/Facility

**UPDATED**

Last Changed by TRACY on 01/21/2012 @ 10:53 4 of 4
F3=Exit F12=Prior Screen
DE230-04
    
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