

## WHAT IS “AT YOUR FINGERTIPS”?

“At Your Fingertips” is a bi-monthly tip sheet to help providers navigate Electronic Visit Verification (EVV) by answering common questions and providing assistance for resolving common issues encountered by providers in their use of the EVV system.

This tip will help you understand what “Not OK to Bill” means in the Santrax system and how “Not OK to Bill” affects the claims process. With better understanding of “Not OK to Bill” you will be more successful exporting claims from the Santrax system.

**NOTE:** An e-mail containing client identifying data must be sent via encrypted mail.



*Not sure who to contact when you have a question or issue?*

Contact DXC Technology via e-mail to: [ctevv@dxc.com](mailto:ctevv@dxc.com)



## EVV TIP # 11

### NOT OK TO BILL

#### WHAT IS NOT OK TO BILL?

When preparing to create invoices in the Santrax system to be submitted to the Department of Social Services (DSS) for claim adjudication, providers must ensure that their invoices meet the criteria for export. Providers must select “Show Only Items Not OK to Bill” in the Billing Review screen in the Santrax system prior to creating invoices. Selecting this option will display those visits that either do not have a status of “02-Confirmed” or have a status of “02-Confirmed” but are lacking information, such as a physician signature, and are not able to be exported from the Santrax system in their present state. Having a status of “Not Ok to Bill” means that a visit does **not** fulfill the requirement for export and payment.

Search Filters

Admission: [Dropdown] Date From: 08/01/2017 Date To: 08/17/2017

Company: [Dropdown] Rate Plan: [Dropdown] Time Range: [Dropdown]

Location: [Dropdown] Service: [Dropdown] Weekday: [Grid]

Admit Type: [Dropdown] Type: [Dropdown]  Show Only Items OK To Bill

Team: [Dropdown] Event: [Dropdown]  Show Only Items NOT OK To Bill

Payor: [Dropdown] Status: [Dropdown]  Show As Summary

Billing Freq: [Dropdown] Not OK To Bill Reason: [Dropdown]

#### WHAT TYPE OF VISITS ARE “NOT OK TO BILL”?

In order for a visit to be “Ok to Bill” it must fulfill the following criteria in Santrax. The visit must have:

- A prior authorization (PA) that covers the dates of service and has units remaining on the PA in Santrax
- Schedule that matches the PA in Santrax
- Service was provided according to the PA in Santrax. For example, if the PA has a modifier then the visit in Santrax must have a modifier associated with it
- The visit must be confirmed; either auto-confirmed or manually confirmed. You must resolve any red highlighted exceptions in Visit Maintenance for a visit to become confirmed and “OK to Bill”. If the visit is highlighted in red, then an exception exists and it is NOT “OK to Bill”.

Visits performed by Home Health service providers must fulfill these additional criteria for the visits to be “OK to Bill”:

- A primary diagnosis must be entered in the client’s profile.

- All open physician signature holds on the client's authorization must be resolved.

If a visit is missing any of the above criteria then the visit **will not be allowed** to be exported from the Santrax system. The visit will be in a hold status and will remain in that status until the reason the visit is not ok to bill is addressed and corrected.

If your reason the claim cannot be exported is that the PA does not have sufficient units or does not cover the date of service provided, please contact the client's case manager at the Access Agency for assistance. The contact information for each Access Agency can be found in At Your Fingertip tip sheet #1 - Know Your Resources. For assistance with creating schedules, or confirming visit data in Visit Maintenance please contact Sandata Customer Care at 1-855-399-8050 or by email at [ctcustomercare@sandata.com](mailto:ctcustomercare@sandata.com).