

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 “OK to Bill” means in the Santrax system and how “OK to Bill” affects the claims process. With better understanding of “OK to Bill” you will experience less claim denials and/or failures. The “Items Not OK to Bill” identifier will be discussed in a future tip sheet.

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



EVV TIP # 5

OK TO BILL

WHAT IS OK TO BILL?

When preparing to create invoices in the Santrax system to be sent to the Department of Social Services (DSS) Web portal for claim adjudication, providers must ensure that their invoices meet the criteria for export. Providers must select “Show Only Items OK to Bill” in the Billing Review screen in the Santrax system prior to creating invoices. Selecting this option will display only those visits with a status of “02-Confirmed” that have all required prior authorization (PA) information. Having a status of “Ok to Bill” does not necessarily guarantee that the invoice will be paid when it is processed by DXC Technology. “OK to Bill” means that the visit meets certain criteria to be exported from the Santrax system.

The screenshot shows the 'Search Filters' section of the Santrax system. It includes various dropdown menus for Admission, Company, Location, Admit Type, Team, Payor, Billing Freq, Rate Plan, Service, Type, Event, Status, Not OK To Bill Reason, Date From, Date To, Time Range, and Weekday. The 'Show Only Items OK To Bill' checkbox is highlighted with a red box.

WHAT IS THE CRITERIA FOR “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.

For instructions in entering the primary diagnosis or removing physician holds, please see the instructions on the Electronic Visit Verification Important Message, found [here](#).

WHAT HAPPENS IF A VISIT IS NOT "OK TO BILL"?

If a visit is not "Ok to Bill" it will not appear in the list of visits that are "OK to Bill" and able to be exported from Santrax. In order to export those visit from the Santrax system, the reason that the invoices were not "OK to Bill" will have to be addressed before it could be exported from the Santrax system.

There may be times when an exported invoice could result in a denied claim. This may occur when the client's eligibility or PA changed after the invoice was exported. The reasons for the claim denial must be addressed and/or corrected prior to re-submittal or the claim will again deny. For assistance in resubmitting previously billed claims, please refer to the "Billing Resubmission" job aide found on the Electronic Visit Verification Important Message, [found here](#). For assistance in understanding why a claim denied payment, please contact the Provider Assistance Center at 1-800-842-8440.

WHAT IF THE VISIT IS "OK TO BILL" AND IT NEEDS MORE REVIEW?

Providers may have visits that are "OK to Bill" because they meet the export criteria but may need to be prevented from export from the Santrax system. Among the reasons that a provider may want to prevent a visit from exporting from Santrax is if the provider is waiting for a required physician signature or third party payer data. For additional support in preventing "OK to Bill" visits from exporting from the Santrax system, please contact Sandata Customer Care at 1-855-399-8050 for assistance.