PatientKeeper Provider Charge Entry

Purpose:

To provide a standardized process on how to enter charges into PatientKeeper.

Definition:

PatientKeeper (PK) is a stand-alone application supported by Revenue Cycle Services (RCS) that is utilized by some clinicians and support staff to capture professional charges in certain settings. The application is used by clinicians, support staff, billers, coders and charge scrubbers to capture and review professional charges rendered to patients in settings/locations where PK is the charge capture solution. Revenue Cycle Services (RCS) is responsible for billing physician office charges, reviewing insurance claims, making adjustments to accounts and/or balance billing.

Qualifications:

- Applies to providers that enter charges using the Standard version of PatientKeeper.
- Access to PatientKeeper is granted by submitting an electronic SOLAR.

Step	Description:	Key Point/Image/Reason
1	Open Cerner and login to PowerChart.	Cerner Explicit PowerChart PROD

Reach out to your supervisor or manager with questions. To ensure the most current version of this document is in use, please refer to the electronic version and print when necessary.

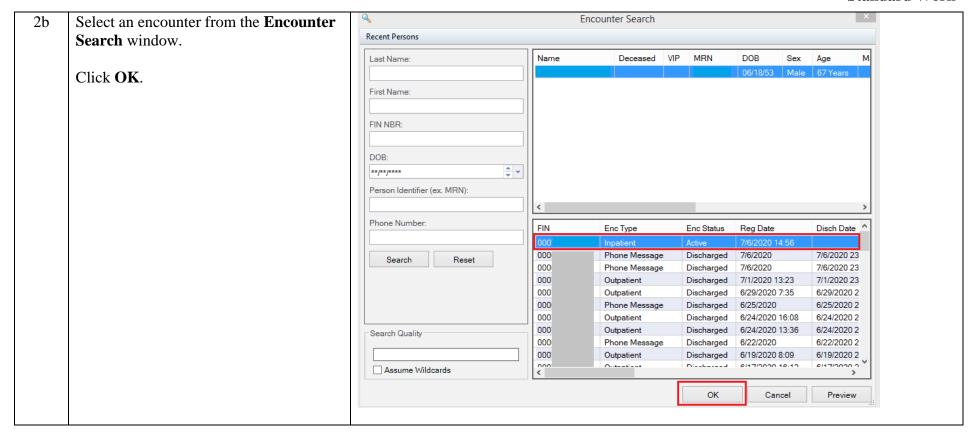
Document Number: 26029 v.1

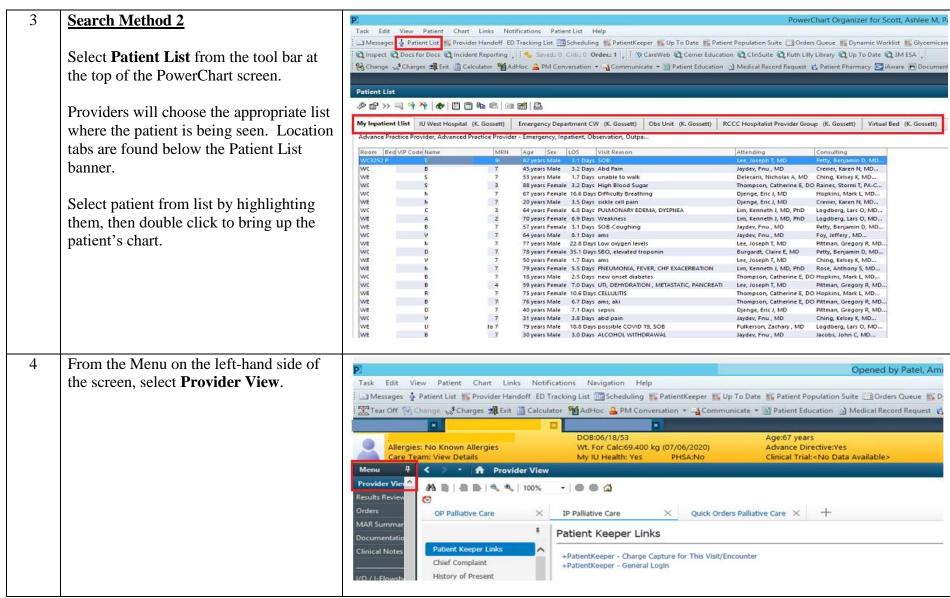
Date Modified: 7/21/2020

SME: Ginny Morton

SPA TQM: Chris Byers

2a	Search for the patient 1 of 2 ways.	PowerChart Organizer for Joyce, Crystal L
	Search Method 1	Ambulatory Organizer Toynamic Worklist Referral Management Copy Auto Text
	Enter the patient the patient's Medical Record Number (MRN) in the search field.	n Launcher 🕞 Documents 🧓 Collections Inquiry 💿 Reporting Portal 📋 Report Builder 📛 Scheduling Appointment Book 🔊 Discern Analytics 2.0
	neid.	© Recent ▼ MRN ▼ © Full screen ■ Print ❖





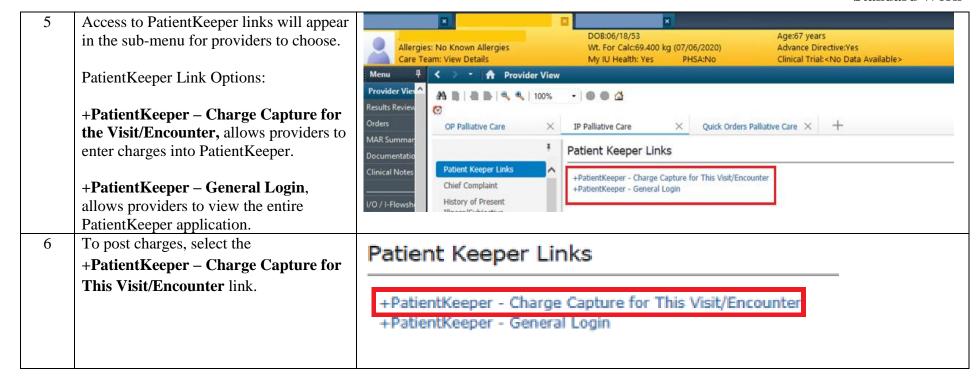
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Once the Charge Capture Screen opens, locate the panel titled **Charge Details** On the left-hand side of the screen.

Populate each field with the patient's charge details. The fields indicated by a red asterisks (*) are required.

The fields are as follows:

INS Info Only – Information from Cerner with the insurance name. This does not affect edits and is for informational purposes only.

Date * – Auto populates with today's date. This is can be changed if needed.

Rendering Provider * – The provider who performed the services.

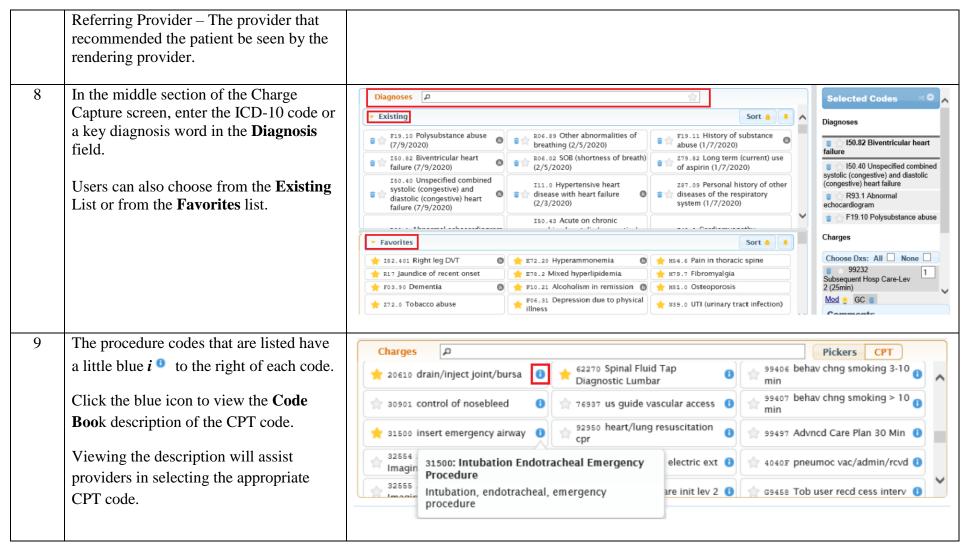
Bill Area * – The location in which the services are rendered.

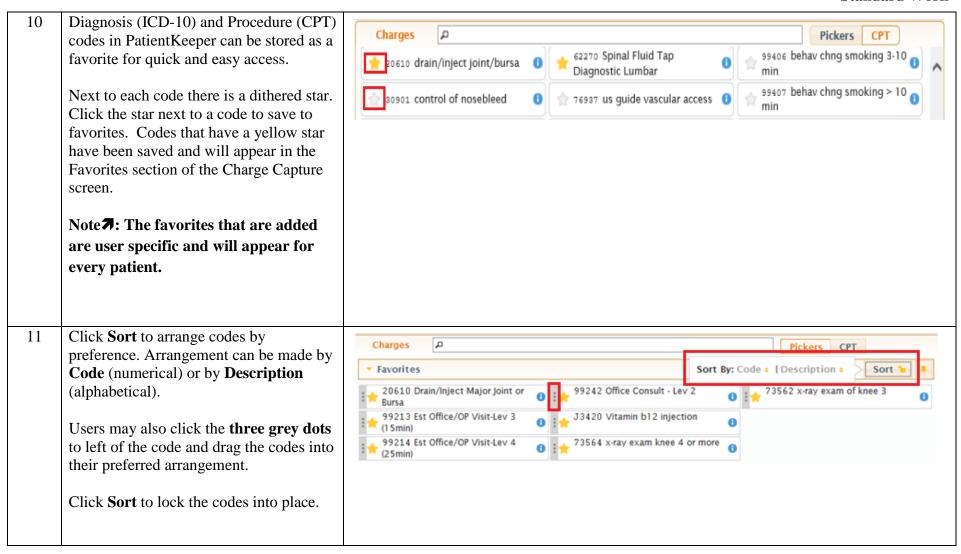
Staffing Provider – The supervising provider that will verify the information entered by the rendering provider.

Svc Site * – The physical location of where the services are rendered (i.e. Inpatient, Outpatient, Surgery Center, etc.)

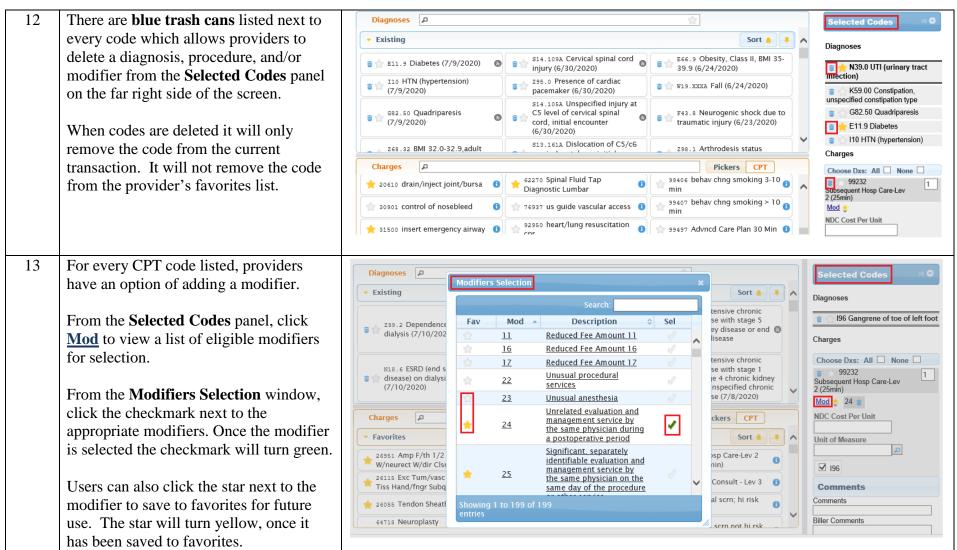
Charge Details
INS Info Only MEDICARE PART A
Date* 07/06/2020
Rendering Provider*
SCHENDEL MD, KEVIN D
Bill Area*
Facility - Greenbush Internal Medicine Arnett 100
Svc Site*
Inpatient-21
Referring
₽ ▼
Staffing Provider
P











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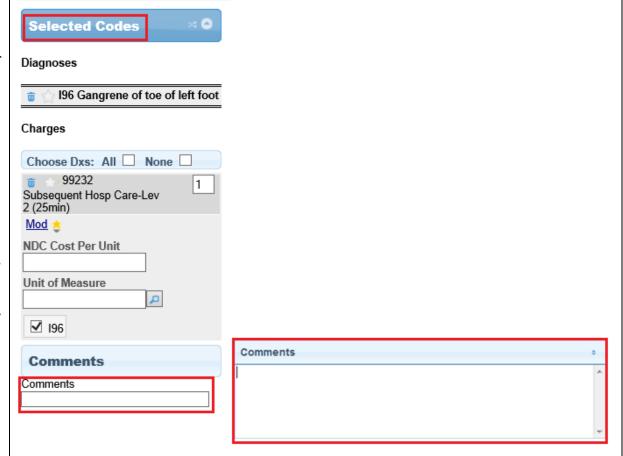


Providers have the option of sending the biller, coder or scrubber a message if they have questions about the charge, if they are unsure of which code to select or other information related to the charge capture process.

From the **Selected Codes** panel, click inside the **Comment** field. A Comment window will appear off to the side.

Enter comment, then click anywhere outside the box to save the comment.

Note 7: The billers, coders and scrubbers do not have the option to reply back to the comment. Providers should list their email address with their comment so they have the ability to respond back to the message.



15 After charges have been entered Diagnoses P **Selected Codes** including: Diagnosis Codes, Procedure Existing Diagnoses Codes, possible modifiers and comments, 112.0 Hypertensive chronic 196 Gangrene of toe of left foot kidney disease with stage 5 click **Submit** at the bottom of the screen. 299.2 Dependence on renal E11.9 Type 2 diabetes 6 chronic kidney disease or end 🚳 dialysis (7/10/2020) mellitus (7/9/2020) stage renal disease Charges (7/9/2020) This will move the encounter to the 112.9 Hypertensive chronic Choose Dxs: All
None N18.6 ESRD (end stage renal kidney disease with stage 1 99232 E66.01 Morbid obesity **Holding Bin** for the biller, coder or i disease) on dialysis through stage 4 chronic kidney (7/9/2020) Subsequent Hosp Care-Lev (7/10/2020) disease, or unspecified chronic 2 (25min) scrubber to process. kidney disease (7/8/2020) NDC Cost Per Unit Charges Д Pickers CPT Unit of Measure Favorites Sort 6 26951 Amp F/th 1/2 Jt/phalanx 99222 Initial Hosp Care-Lev 2 🛖 36415 routine venipuncture W/neurect W/dir Clsr MCR Cons (50min) ✓ 196 26115 Exc Tum/vasc Mal Sft 50081 removal of kidney stone 99253 Initial IP Consult - Lev 3 Tiss Hand/fngr Subq <1.5cm Comments G0105 Colorectal scrn; hi risk Comments 🛖 26055 Tendon Sheath Incision measure 64718 Neuroplasty G0121 Colon ca sern not hi rsk Submit Send to Outbox Cancel ٠

Effective Period & Review History

Effective Period:	02/01/2020-01/31/2021	
Reviewed by:	Brian Sauders, Program Director of Revenue Cycle Services – System Patient Access	
Approved by:	Maria English, Executive Director of Revenue Cycle Services – System Patient Access	
	DJ Plavsic, Executive Director of Revenue Cycle Services – System Patient Access	
Electronic Signature:	JP.	

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