

We are currently updating the OP Help Center content for the release of OP 14.19 or OP 19. OP 19 is a member of the certified OP 14 family of products (official version is 14.19.1), which you may see in your software (such as in Help > About) and in the Help Center tabs labeled 14.19. You may also notice that the version number in content and videos may not match the version of your software, and some procedural content may not match the workflow in your software. We appreciate your patience and understanding as we make these enhancements.

Managing HIPAA Code Tables

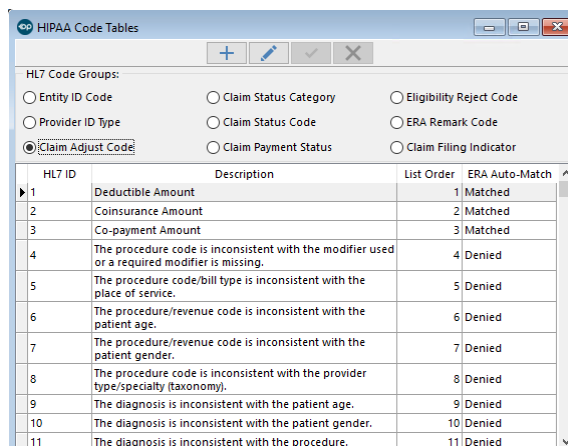
Last Modified on 10/23/2019 10:33 am EDT

Version 14.19

Path: Billing tab > More button (Reference Data group) > HIPAA Codes

Overview

The HIPAA Code Tables window manages the codes used in e-Billing. Generally, you should not change or remove the values in these tables. You can, however, add items if you find that your claims and/or adjudications are returning codes that are not currently defined in the database. You can also reorder the lists in which the items will appear in to make it easier to locate.



The screenshot shows the 'HIPAA Code Tables' window. At the top, there are radio buttons for selecting an HL7 Code Group: Entity ID Code, Provider ID Type, Claim Adjust Code (selected), Claim Status Category, Claim Status Code, Claim Payment Status, Eligibility Reject Code, ERA Remark Code, and Claim Filing Indicator. Below this is a table with columns: HL7 ID, Description, List Order, and ERA Auto-Match.

HL7 ID	Description	List Order	ERA Auto-Match
1	Deductible Amount	1	Matched
2	Coinsurance Amount	2	Matched
3	Co-payment Amount	3	Matched
4	The procedure code is inconsistent with the modifier used or a required modifier is missing.	4	Denied
5	The procedure code/bill type is inconsistent with the place of service.	5	Denied
6	The procedure/revenue code is inconsistent with the patient age.	6	Denied
7	The procedure/revenue code is inconsistent with the patient gender.	7	Denied
8	The procedure code is inconsistent with the provider type/specialty (taxonomy).	8	Denied
9	The diagnosis is inconsistent with the patient age.	9	Denied
10	The diagnosis is inconsistent with the patient gender.	10	Denied
11	The diagnosis is inconsistent with the procedure.	11	Denied



The following are the available HL7 Code Groups:

- Entity ID Code
- Provider ID Type
- Claim Adjust Code
- Claim Status Category
- Claim Status Code

- Claim Payment Status
- Eligibility Reject Code
- ERA Remark Code
- Claim Filing Indicator


Add to the HIPAA Code Tables

To add a code to a HIPAA Code Table:

1. Navigate to the HIPAA Code Tables window by following the path above.
2. Select the radio button of the proper HL7 Code Group where a new entry is necessary. The existing codes in that group are displayed in the bottom section of the window.
3. Click the **Add** button  .
4. Enter the details of the new code:
 - HL7 ID required by payer
 - Description of the code
 - List Order
5. Click the **Save** button  .

Editing List Order

You can reorder items in these groups to make them easier to find in drop-down menus. For example, if your practice is 90% Medicaid, you could set the **List Order** value of Medicaid in the Claim Filing Indicator table so that it is at the top of the list.

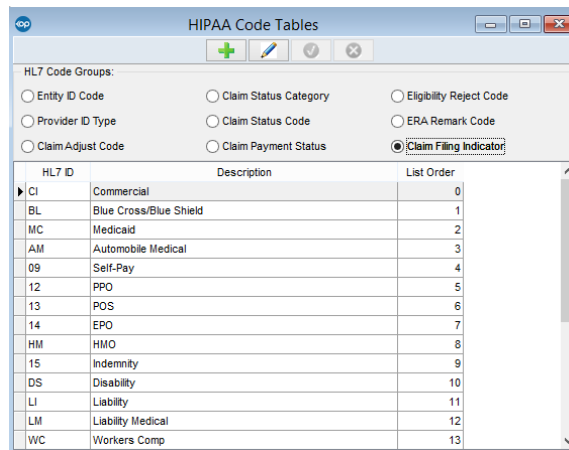
1. Navigate to the HIPAA Code Tables window by following the path above.
2. Select the radio button of the proper HL7 Code Group where an edit is necessary. The codes in that group are displayed in the bottom section of the window.
3. Click the **Edit** button  .
4. Make the edit on the desired code.
5. Click the **Save** button to save your edit.

Version 14.10

Overview

The HIPAA Code Tables window manages the codes used in e-Billing. Generally, you should not change or remove the values in these tables. You can, however, add items if you find that your claims and/or adjudications are returning codes that are not currently defined in the database. You

can also reorder the lists in which the items will appear in to make it easier to locate.





HL7 ID	Description	List Order
CI	Commercial	0
BL	Blue Cross/Blue Shield	1
MC	Medicaid	2
AM	Automobile Medical	3
09	Self-Pay	4
12	PPO	5
13	POS	6
14	EPO	7
HM	HMO	8
15	Indemnity	9
DS	Disability	10
LI	Liability	11
LM	Liability Medical	12
WC	Workers Comp	13

The following are the available HL7 Code Groups:

- Entity ID Code
- Provider ID Type
- Claim Adjust Code
- Claim Status Category
- Claim Status Code
- Claim Payment Status
- Eligibility Reject Code
- ERA Remark Code
- Claim Filing Indicator


Add to the HIPAA Code Tables

To add a code to a HIPAA Code Table:

1. Navigate to **Utilities > Manage Codes > HIPAA Codes**. The HIPAA Code Tables window will open.
2. Select the radio button of the proper HL7 Code Group where a new entry is necessary. The existing codes in that group will show in the bottom section of the window.
3. Click the **Add Record** button  .
4. Enter the details of the new code:
 - HL7 ID required by payer
 - Description of the code
 - List Order
5. Click the **Save Record** button  to save your addition.

Editing List Order

You can reorder items in these groups to make them easier to find in dropdown menus. For example, if your practice is 90% Medicaid, you could set the **List Order** value of Medicaid in the Claim Filing Indicator table so that it is at the top of the list.

1. Navigate to **Utilities > Manage Codes > HIPAA Codes**. The HIPAA Code Tables window will open.
2. Select the radio button of the proper HL7 Code Group where a new entry is necessary. The existing codes in that group will show in the bottom section of the window.
3. Click the **Edit Record** button  .
4. Make the edit on the desired code.
5. Click the **Save Record** button to save your edit.