

REV - Check Indexing Procedure

Purpose:

Check indexing allows users of the OnBase system to view a check received by the Iowa Medicaid Enterprise (IME) in an online format. Once indexed, the check can be found by running a query in OnBase by check number, amount, as well as payor.

Identification of Roles:

IME Core Unit – Receives check, scans and loads to OnBase, notifies Revenue Collections when the check load has completed. IME Revenue Collections – Indexes checks to the proper OnBase Queue.

Performance Standards: Daily

Path of Business Procedure:

Step 1: Checks are submitted to Iowa Department of Human Services (DHS) by: Medicaid recipients, Providers, Attorneys, Insurance carriers, and County Courts.

Step 2: The volume of checks varies daily. Each packet can contain anywhere from 1 to 100 checks.

Step 3: Core Mailroom receives the live checks (A physical check) or Photostats (A Photostat is a check mailed to a lockbox and deposited directly by Wells Fargo Bank). The checks are scanned and loaded into OnBase queues according to the P.O. Box number on the check envelope.

Step 4: There are many types of checks that come to Revenue Collections. These checks are given the following classifications:

02: HCBS (Home and Community Based) Waiver Audits

05: Lien Recovery

09: Insurance Recovery Member

09: Insurance Recovery Member¹

(A member endorses a carrier check to the IME/or if they pay via their own account)

11: Insurance Recovery Carrier

12: Insurance Recovery Provider

16: DIA Audit (See DIA Adjustment Procedures Manual)

- 17: DIA Audit Residential Care (See DIA Adjustment Procedures Manual)
- 19: Returned/Cancelled Warrants (See Returned Warrants Manual)
- 20: Claim Errors
- 23: Credit balance, Miscellaneous and Others Including Medicare without other Commercial TPL, Medicaid payments from another state's Medicaid agency.
- 25: RCF Returned/Cancelled Warrants (See Returned Warrants Manual)
- 31: Background Checks – Provider Services
- 32: Application Fees – Provider Services
- 35: Disallowance (See Disallowances Procedures Manual)
- 50: IHAWP Member Premiums - Dental Premiums
- 86: MCO Liquidated Damages Check

Step 5: Check indexing takes place the day after all checks arrive in the mailroom. Revenue Collections must perform check indexing first thing in the morning after CORE has scanned the checks into the queues.

Step 6: Revenue Collections accesses the checks in the OnBase Workflow Inbox queues.

Step 7: Each check is manually reviewed as well as its accompanying documentation. Revenue Collections must review all checks to make sure they are in the correct queue and reroute incorrectly categorized checks.

Step 8: *Check Review:* The check indexer should review the following to ensure that the check can be deposited prior to indexing a check for deposit.

- a) Check date is valid
- b) Payee name is correct
- c) Check is signed by the payor
- d) Check is endorsed if the check is from a third party and signed over to over to Iowa Medicaid.

If these items are not correct the item will need to be selected and directed to the return queue in OnBase to return to the party that sent the check.

*** Please note that this is on regular checks as Photostat checks have already been processed and cannot be returned.**

Procedure for checks that need to be returned to the sender:

- a) The indexer will select the check and mark the item for return in OnBase.

- b) The indexer will submit a request via email to the group distribution list of "revcoll check" to please pull the check and provide it back to them to return to the sender.
- c) When the deposit is prepared the check would then be removed by the parties completing the deposit, and presented back to the check indexer who would then verify and sign off that the check was received by them to return to the sender.
- d) The check indexer will then create a letter to the payer and advise of the issue with the check and the reason the check is not able to be deposited by Iowa Medicaid and mail the check back to the sender via regular mail with the letter.
- e) The check should be placed in a **sealed** envelope and placed in the mail bin prior to the end of the day mail pickup. If the mail has already been picked up the check should be placed back in the safe until the next day to be mailed.
- f) The indexer should then place a note on the check and the check e-form within OnBase stating what action was taken and complete the check-out of the queue.

Step 9: Revenue Collections will then create a Check E-Form (A form generated by OnBase for key wording and indexing scanned checks.) into the OnBase system. This will assign a recovery classification and allows users to search for the check by key fields such as check amount, check number, and payor. When entering the data it is important that there are no slashes or dashes entered into the E-Form.

Step 10: Revenue Collections will then take the following steps to index the checks.

- a) Open OnBase System and access the Workflow Inbox.
- b) Select one of the following check queues to begin indexing:
 - 1) Provider Overpayment
 - 2) TPL Logging
 - 3) Lien Recovery
 - 4) MEPD
 - 5) Log Adjustment – Background Checks
 - 6) Miscellaneous
 - 7) Returned Warrants
- c) Reroutes checks scanned to Revenue Collections OnBase Queues in error.
- d) Identify misappropriated checks to return to sender.
- e) Select the first check packet in the queue and scroll through all the documentation. Count the number of checks included in the packet. **Make sure to index all checks within the packet. There can be up to 100+ checks per packet.**
- f) Review the documentation included in the check packet to determine the recovery classification to assign to the check.

- g) Index each check by creating an E-Form in OnBase.
- h) Complete the check. The check will automatically drop down into the appropriate queue where Revenue Collections will create a Credit/Adjustment E-Form to request an adjustment from Core.
- i) For checks that come to Revenue Collections but should go to the DHS Cashier Revenue Collections Team lead will call the county and remind them to send the check to the DHS Cashier. MEPD Payments should be indexed as returned and sent to the Theresa Yourison at the Hoover building.
- j) Occasionally, Revenue Collections will receive another document that should be referenced to a check. When this occurs within OnBase the following steps can be taken to attach the correspondence with the check for future reference:

Step 11: *Performing “Attach to Check” function in On Base* - On Base has a task button that allows you to attach a document with the related check. This task button is called “Attach to check” and is located in multiple queues within Revenue Collections Workflow. The following queues will allow you to perform this function:

Within the CK01 lifecycle

- a) Provider Overpayment Logging
- b) TPL Logging
- c) Lien Recovery Logging
- d) Log Adjustment
- e) Estate/Miller Trust Logging
- f) Miscellaneous Check Logging

Within the REV01 lifecycle:

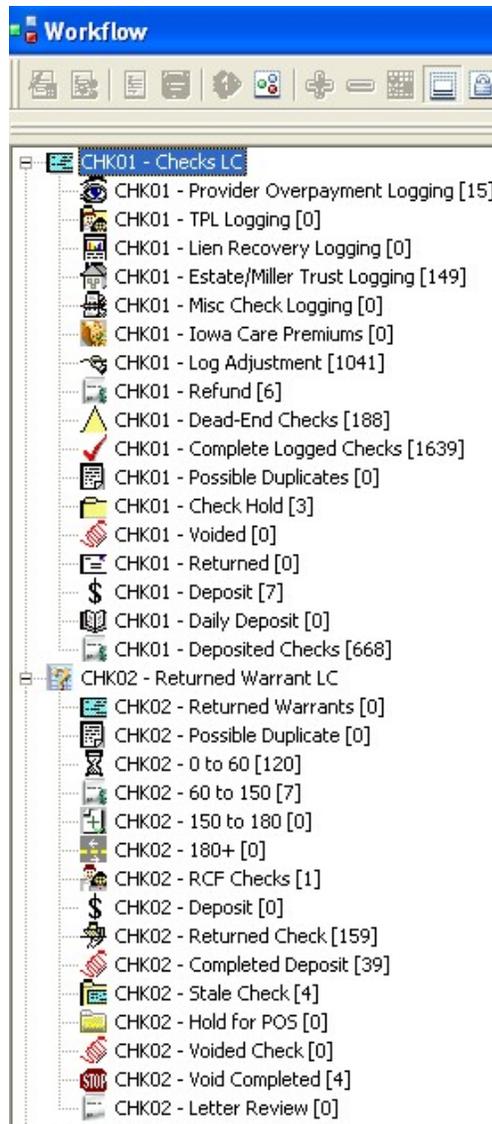
- a) Provider Overpayment
- b) Faxes
- c) Fax Back Verification
- d) Credit Balance
- e) Disallowance
- f) Payout Disallowance

In order to properly execute this function, you will need to use the ***related check DCN not*** the Eform DCN in the pop-up box.

To view the check and attached documentation, access the **CK01-Complete Logged Check Queue**. Right click on your mouse, choose the option “filter inbox” and choose filter by DCN/xRel DCN. Enter the xRel DCN, click on the

check document and the check and documentation attached will appear as separate entries.

Screenshot of OnBase / Check Indexing Queues



Screenshot of Document Retrieval:

The screenshot shows a software window titled "Document Retrieval". It contains several sections for defining search criteria:

- Document Type Groups:** A list with "General" selected.
- Document Types:** A list with "Check Keywords E-Form" selected.
- Dates:** Two date pickers labeled "From" and "To", each with a "Today" button.
- Keywords:** A list of search fields with "And" buttons to the right. The "CCN" field is populated with "082241001".

Field	Value	Operator
Check Principal		And
DCN		And
Date Received	/ /	And
Status Indicator		And
Completion Date	/ /	And
Unit		And
Payor Name		And
Julian Date		And
Packet Number		And
xRef DCN		And
CCN	082241001	And

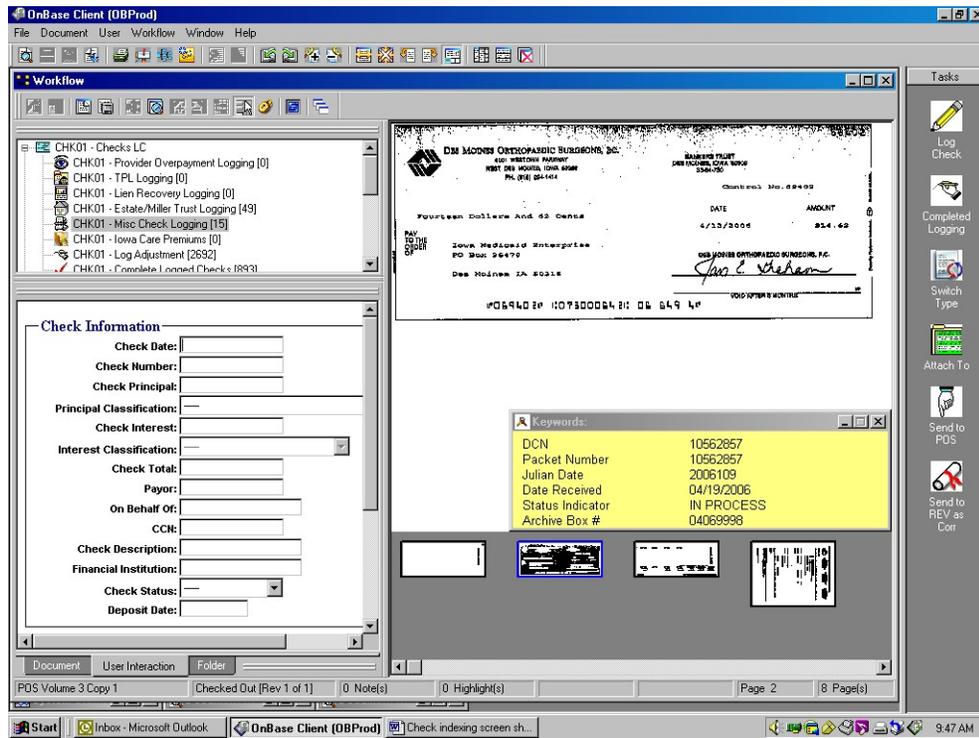
— Check Information

Check Date:	08/08/2008
Check Number:	12534282077
Check Principal:	\$43.00
Principal Classification:	49-Iowa Care Premiums
Check Interest:	
Interest Classification:	—
Check Total:	\$43.00
Payor:	
On Behalf Of:	
CCI:	082241001
Check Description:	
Financial Institution:	
Check Status:	Return
Deposit Date:	

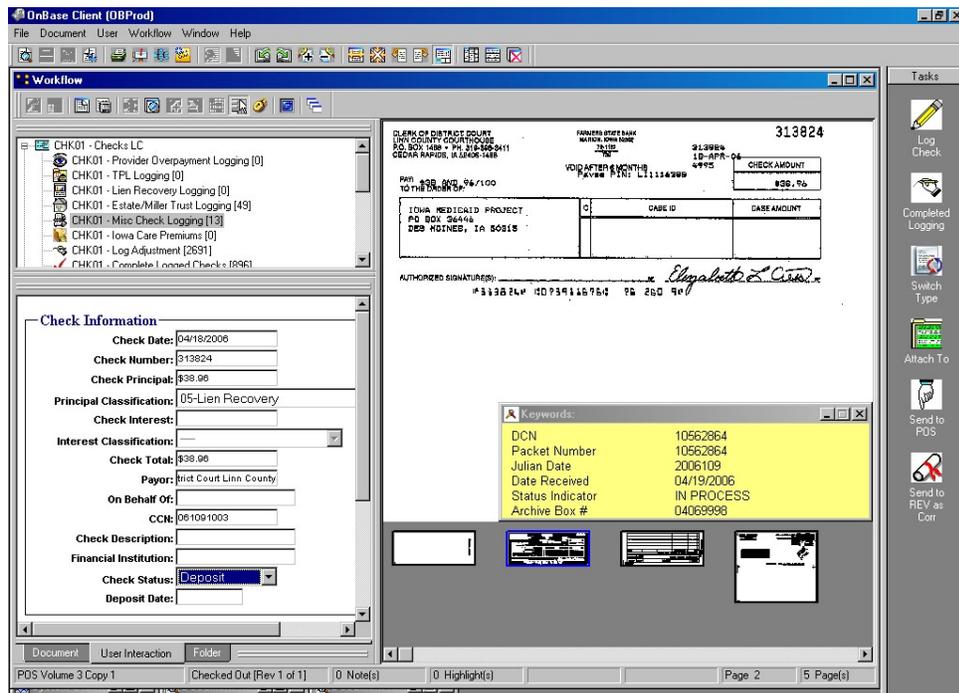
— Misc Information

Unit:	Revenue Collections
Provider Number:	
HPI Number:	
DCI:	50434809
Julian Date:	2008224
Date Received:	08/11/2008
DCI of Rel Check:	50402530
Created By:	REVASMALL

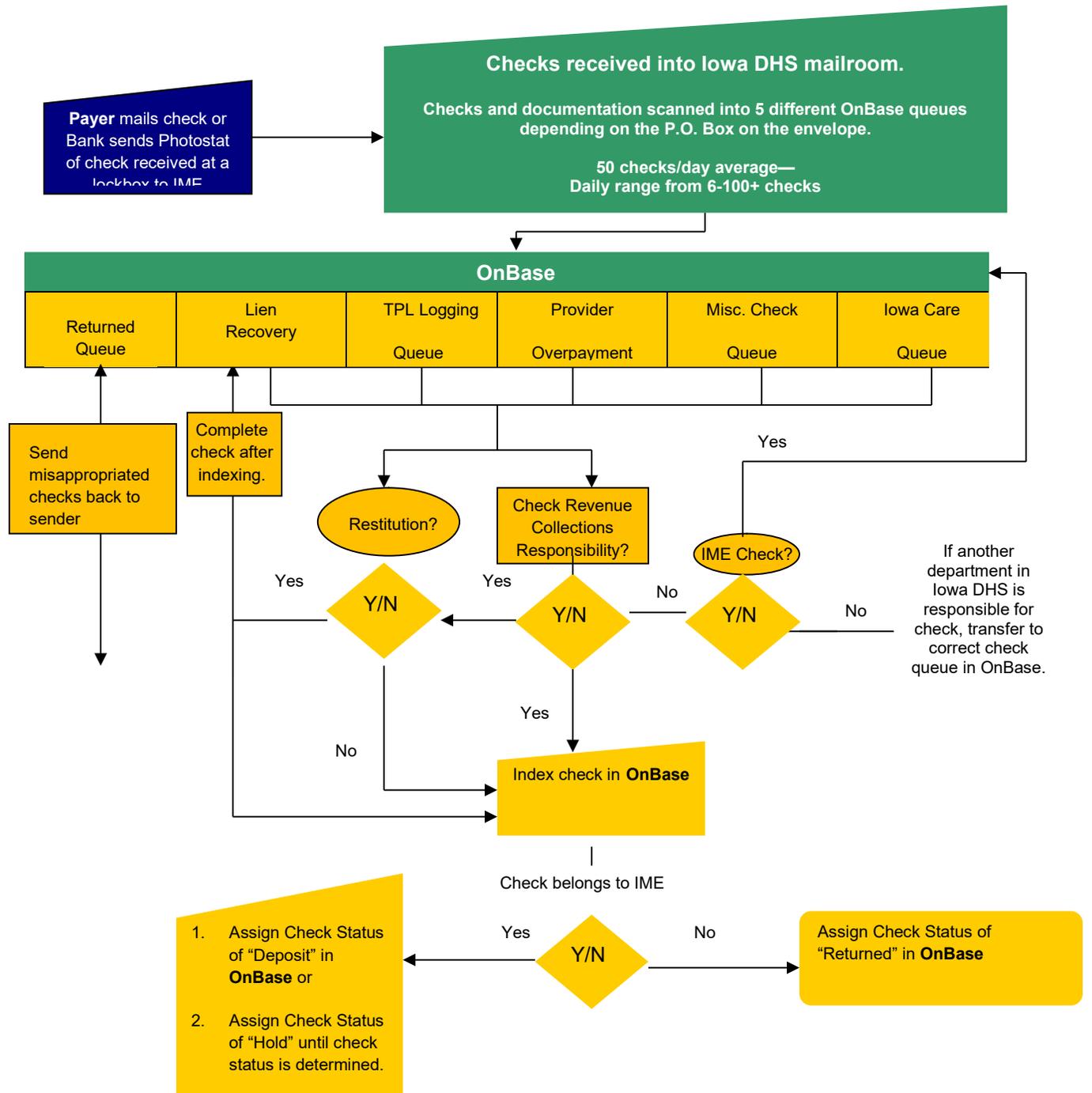
Screenshot of check in OnBase



Documentation accompanying check



Check Indexing Flowchart



Copy of Classification Codes: The Master is held on:

Dhsime/IMEUniversal/Operational Procedures/Financial Procedures.

CHECK CLASSIFICATION CODES					
NAME	#	COMMENTS/CONTENTS	SOURCE UNIT/DEPARTMENT	ADJUSTMENTS TO MMIS	CCH (6 TH DIGIT)
DHS Recovery Provider – Audits	02	DHS Fiscal Mgmt. recoveries	DHS & (periodically) Provider Cost Audits	Y – HO Credit/Adjustment or Gross History	4 – DHS 8 - PCA
Court Ordered Restitution	04		Rev Col	Y – HO Credit/Adjustment or Gross History	1
Lien Recovery	05	All types: MVA or Trauma	Rev Col	Y – HO Credit/Adjustment or Gross History	1
Estate Recovery	08		Rev Col	Y – Gross History	1
Insurance Recovery - Member	09		Rev Col	Y – HO Credit/Adjustment or Gross History	1
Insurance Recovery - Carrier	11	All Revenue Collection activities (reclamation and pay/chase)	Rev Col	Y – HO Credit/Adjustment or Gross History	1
Insurance Recovery Provider	12	Revenue Collection activities (Provider refunds, except Disallowance project)	Rev Col	Y – HO Credit/Adjustment or Gross History	1
Recovery – 100% TXIX Federal Funds	14	LEA/AEA recoupments (State share already re-paid)	SURS	Y – HO Credit/Adjustment or Gross History	3
Recovery – 100% Refugee Federal Funds	15	Refunds or recoveries for Medicaid Members with Part A codes of AAC or ABB	SURS, Rev Col	Y – HO Credit/Adjustment or Gross History	1 – Rev Col 3 - SURS
Recovery – NF or ICF/MR Audits (FFP)	16	DIA - NF (080xxxx) or ICF/MR (088xxxx) audits	DIA	Y – HO Credit/Adjustment or Gross History	2 – DIA
Recovery – 100% State funds	17	* DIA - RCF audits, OR * Recoveries direct from RCF providers - i.e., Prov #: 089xxxx, OR * Other Nat'l Settlements	DIA Rev Col DIA, Rev Col	Y – HO Credit/Adjustment or Gross History	2 – DIA or Nat'l settlements 1 – Direct from provider
Fraud Abuse Provider	18	DIA - MFCU	DIA MFCU, DHS	Y – HO Credit/Adjustment or Gross History	2
Cancelled Warrant	19A	Voided Provider Checks or State-Dated checks - FFP	Fiscal Management	Y – HO Mass Adjustment, HO Credit/Adjustment or Gross History	6 – State-dated 7- Voided
Cancelled Warrant	19B	Voided Provider Checks or State-Dated checks – 100% State funds	Fiscal Management	Y – HO Mass Adjustment, HO Credit/Adjustment or Gross History	6 – State-dated 7- Voided
Claim Error	20	Provider refunds	Rev Col	Y - Credit/Adjustment or Gross History	1
Cost Settlement	21		Provider Cost Audits	Y – HO Mass Adjustment, HO Credit/Adjustment or Gross History	8
SURS Provider Overpayments	22		SURS – Provider Overpayments	Y - Credit/Adjustment or Gross History	3
Other	23	Recoveries direct from providers, except RCF providers	Rev Col - Provider Overpayment	Y – HO Mass Adjustment, HO Credit/Adjustment or Gross History	1
RCF Returned/Cancelled Warrant	25	Returned Residential Care Facility	Fiscal Management	Y – HO Credit/Adjustment or	7 - Voided

Provider Overpayments - PERM	26	provider check	PERM Contractor, SURS	Gross History	3
Provider Overpayments – MIC Audits	27		MIC Audit Contractor, SURS	Y - Credit/Adjustment or Gross History	3
HMS Recovery Project	35	Revenue Collections – Disallowance Project	Rev Col	Y - Credit/Adjustment or Gross History	1
Drug Rebate	41	OBRA rebate payments	POS	No	5
Drug Rebate	42	OBRA interest	POS	No	5
Drug Rebate	43	Supplemental rebate payments	POS	No	5
Drug Rebate	44	Supplemental rebate interest	POS	No	5
Investment Plan			Fiscal Management/ <u>Treas</u>	No	N/A
Iowa Care Premiums	49		Rev Col	No	1

Note: Additional instructions for journal voucher transfer, archive retrieval process and archive document purging can be found in the attachment section (page 9-12) of this document. These processes are only done on an occasional basis.

Step 12: MCO Liquidated Damages

- a) Checks received by the IME for MCO liquidated damages will come to PO Box 31202. The Revenue Collections Unit will index the check using classification “86”. Pages 12 and 13 contains an **example** of the invoice that will accompany the check:

INVOICE

Date: January 12, 2017
Invoice # 12-345

Iowa Department of Human Services	TO	MCO Name
Iowa Medicaid Enterprise		Address
PO Box 310202		City State Zipcode
Des Moines, IA 50331		

SOURCE	DUE DATE (
Q1 SFY2017 Quarterly Report	Within ten (10) business days of receipt of Agency's notice that liquidated damages are due

QTY	DESCRIPTION	UNIT PRICE	LINE TOTAL
2	Reports not submitted completely and accurately within the requested timeframes and in the format identified by the Agency		
	<ul style="list-style-type: none"> Pop B-1 to B-6 Special Needs Population report Pop D-1 to D-5 General Population report 	\$315	\$630
5	Failure to meet performance targets		
	<ul style="list-style-type: none"> AccQual A-10 Grievances and Appeals Report 	\$157	\$785

Step 13: Check Indexing Audit Procedures (for management only)

Check indexing audits take place daily. 3 % of the checks indexed are audited.
 Steps to audit checks indexed:

Auditing regular log adjustments checks

- a) Open OnBase
- b) Go to Document Retrieval, select "General" and "Check Keywords E-Forms"
- c) Select the CCN and enter Julian date beginning with the two digit year, the Cash Control Number (CCN Code), and 001 (i.e. 082241001) 08= year, 224 = Julian date, 1 = Revenue Collections, 001 beginning document number)

CCN: Cash Control Number Reference:

DIGITS	Description
1-5	Julian Date, Beginning with two- digit calendar year
6	1- Revenue Collections
	2- DIA (HCBS Waiver Audits)
	3- SURS
	4- DHS
	5- POS (Drug rebate)
	6- Stale Dated
	7- Returned, Then Voided Provider Checks
	8- Provider Cost Audit
7-9	Ascending order of each check received for any particular day, for each category assigned per digit #6.

Example: Today is February 1, 2006. Revenue Collections received six checks as follows:	
Check Source	CCN Number

DIA- NF Audit	060322001
Lien Recovery check from a law firm	060321001
Provider check- refund of third party insurance payment	060321002
Provider check- refund of third party insurance payment	060321003
Insurance carrier check	060321004
Insurance carrier check	060321005

- d) Verify that there are not two documents that are displayed with the same CCN number.
- e) Once selected open check
- f) Review the audit form (see below) and verify that the information is correct by comparing the check to the E-Form.
- g) If there are errors, note them and provide to the representative to correct them, follow up to ensure they are corrected. (Please note that the representative can correct all items with the exception of the "Status"). The Team Lead will need to make that change. An email needs to be sent to the IME CORE Helpdesk.
- h) Provide feedback to Account manager as needed. Complete the representatives audit scorecard with the totals.

Forms/Reports:

Revenue Collections Check Indexing Audit Form

Date of Audit:

Auditor:

Indexed By:

CCN:

Category of Error:

No of Errors Present ____

Date of check (verify also valid date)

Check number

Check amount

Julian Date

Payor is Correct

Payee is Correct (i.e. Iowa Medicaid)

All Checks are indexed

Classified Correctly

Deposit type is Correct

CCN Number is correct with the day.

Other

RFP References: 6.1.8, 6.6.1.2

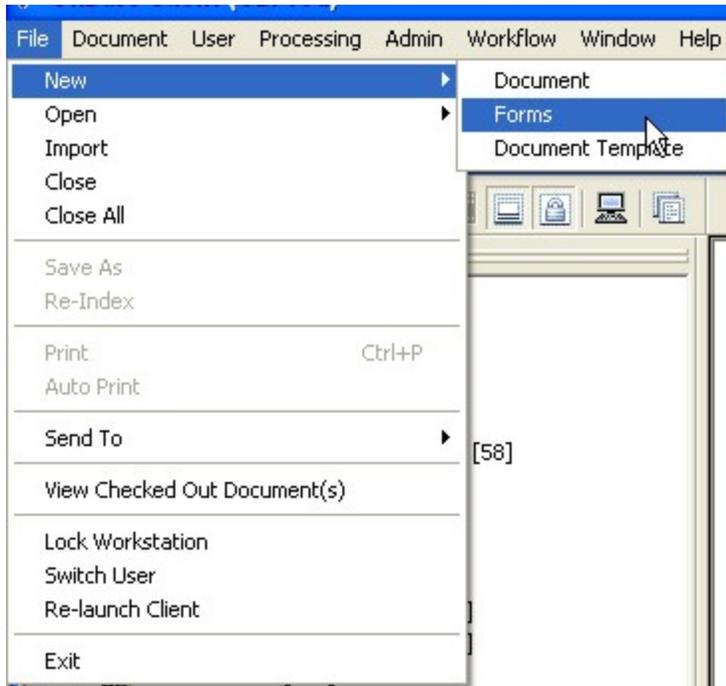
Interfaces: CORE

Attachments:

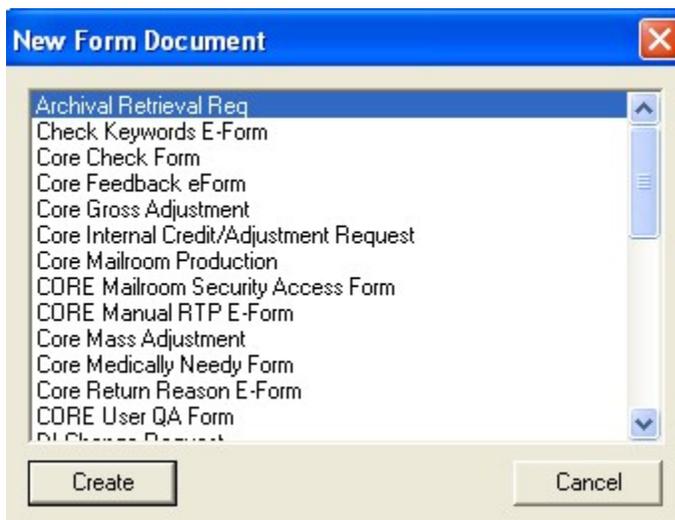
Journal Voucher Transfer (JV Transfer) - At times the IME may be sent notification that a payment received by another state entity was deposited to the IME account. In these cases Revenue Collections needs to create a reference for the document within OnBase to accurately record the funds that were deposited. These can be full or partial payments and may or may not contain a copy of the physical check. We do not need to complete any banking with a JV transfer.

- a) Once the document is identified as a JV Transfer it needs to be placed in the Provider Overpayment check logging queue. This can be done by notification to the Core helpdesk to have the document moved.
- b) Once the document is in the Provider Overpayment Check Logging queue the 'check' or payment needs to be logged. To do so you will complete the following actions:
- c) Select: Log check
- d) Enter the check date
 - 1) If no actual check was received with the document use the first date of the month as the check date.
- e) Enter the deposit date
 - 1) If there is no physical check; enter in the date received in OnBase.
- f) Enter the classification: You will enter in the classification that is applicable for the portion of the check that belongs to the IME. (if it's lien it's an 05, if not known a 23).
- g) Enter the payer's information. If unknown contact the sender.
- h) Assign a CCN: Enter the deposit date and a dummy number being sure that the number is not a duplicate. Please refer to the department sheets that track CCN's if you are unsure.
- i) Submit the information. The document will then move into the log adjustment queue to be worked.

Archive Retrieval Request Procedures - Use the following steps to request a document to be pulled from the archive room. In OnBase select FILE, NEW, and FORMS.



Then select ARCHIVAL RETRIEVAL REQ.



The following document will appear for you to complete:

DOCUMENT RETRIEVAL REQUEST (ARCHIVE)							
Archive Box Number	Imprinter Number(s)		Requestor	DCN	Unit	Reason	Date
	Start	End					
			CORETLITTLE		CORE		3/19/2009
						
						
						
						
						
						
						
						
						
						

The **Archive Box Number** is found in the yellow keywords box that is on the document you want to receive. It consists of 8 numeric characters.

The **“START” imprinter number** is the imprinter number on the very first page of the document. The imprinter number is found on the document itself. The imprinter number on a claim will look different than the imprinter number on a piece of correspondence. The imprinter number on a claim consists of 11 numeric characters. The imprinter number on a piece of correspondence consists of the 9 numeric characters following the word “batch”.

-Claim i.e. 090702 01534

-Correspondence i.e. Batch 000451238

The **“END” imprinter number** is the imprinter number on the very last page of the document.

9 characters (when requesting a claim) or 11 characters (when requesting correspondence) must be used in both the “start” AND “end” imprinter number fields. We (the mailroom) cannot send you just one page out of the document. All pages within the DCN must be kept together. We know it is sometimes hard to read the imprinter number. The first imprinter number on claims can be found by right clicking on the document you are wanting to have pulled and selecting “keywords”. Scroll down to the DIN. This is the imprinter number on the first page of the document. You will not be able to get the DIN on correspondence documents though. Try to read the imprinter number on the document the best you can. You can sometimes read the imprinter number easier on one of the attachments. The imprinter numbers within the document

are in numerical order. Please attempt to read one of the imprinter numbers on the attachments to try and figure out what the number is on the first page.

The **Requestor** automatically populates with the persons name that is completing the archive retrieval request form. No action is needed.

The **DCN** is found in the yellow keywords box that is on the document you want to receive.

The **Unit** automatically populates. The Unit is associated with the person that is completing the archive retrieval request. This is the unit that the document will be returned back to once it is pulled.

The **Reason** field should be completed by the person making the request. Give a brief reason as to why the document is having to be pulled.

The **Date** field automatically populates with the date that the archive retrieval request is being submitted.

Click SUBMIT at the bottom of the form once it has been completely filled out.

NOTE: Archive retrieval requests are printed every morning for the previous day's requests. These documents are pulled the same day the request(s) is printed. These documents are then routed to the individual units via internal route. The unit will receive them either the same day that they are pulled or on the first internal route the next morning.

Purging of Archived Documents - Archived documents are kept for 30 – 65 days. This all depends on the amount of room available in the archive room. We keep the current months documents in addition to the previous month's documents. An e-mail is sent to all IME Account Managers and IME Unit Managers 3 – 4 days prior to the day documents get purged. This is done at the beginning of every month. The e-mail identifies what documents are going to be purged and on what day.

Acronyms:

IME – Iowa Medicaid Enterprise

DHS – Department of Human Services

MCO – Managed Care Organization