MYNT Billing - Guide for Hospitals

This guide has been prepared for FYDO Hospitals that are also MYNT Billing clients.

Invoicing

The MYNT Billing team will invoice your private health fund patients two to three times per week. Please note that this excludes uninsured, third party, Workcover and overseas patients (unless requested).

In order for the MYNT Billing Team to generate invoices, the following steps must be completed by staff at your facility:

- 1. Ensure the Episode Status is **Discharged**
- 2. Complete Theatre Screen information accurately, including the following information at a minimum;
- a. Anaesthetic Type
- b. Time In Theatre and Time Out Theatre
- c. Item numbers/Code
- d. Other Services, if required, such as prostheses, disposables, surcharges
- e. Theatre Complete tick box checked

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It is imperative that facility staff ensure the accuracy of this information, as the MYNT Billing team does not have access to medical records to verify.

3. Ensure Episode is Coded and Grouped, by completing the **Diagnosis**, **Procedure** and **DRG** sections in the Coding Screen – see <u>Hospital Coding – FYDO Wiki</u>

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For many disciplines, coding may be impacted by pathology results, or awaiting doctor verification of items performed. If coding is on hold, please designate a **Theatre on Hold** reason (e.g. Pending Pathology, Awaiting Item Numbers, etc) in the Theatre Screen. (Additional reasons can be added in Settings > Theatre Hold Reasons.)

The MYNT Billing team will run a Billing Status Report for your site, once per week, to identify any episodes that cannot be invoiced and outline the reasons for this (e.g. waiting on coding).

Rejected Claims

The MYNT Billing team will review rejections daily, and strive to address any rejections within two business days. If we are awaiting information or action from your facility in relation to a rejection, notes will be recorded in the **Financial Notes** tab for the episode.

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Debtors

The MYNT Billing team will be responsible for following up with debtors. A weekly Debtors Report will be sent to the site to outline reasons for any claims outstanding greater than 45 days (e.g. issues with the claim or slower payments – for example some smaller funds, as well as paper-based claims, can take longer to be paid).

<u>Hospital Health Fund Fees - Importing DRG</u> <u>Fees</u>

FYDO now has the option to import DRG fees from an Excel file.

It is important to note that the file must be an Excel file, and must be set out in the same way as the sample template below.

Or click the link below to download a blank template:

DRG-Import-Example

Using the same column titles as can be seen in this spreadsheet example.

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Column headings need to be:

- A DRG
- B ChargeSD
- C ChargeIP
- D SSTrim
- E SSFee
- F LSTrim
- G LSFee
- H TRF

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The above layout reflects the content, and order of information, that is displayed in FYDO.

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If the file is not formatted in this way, with the exact column titles, the data will not be able to be imported into FYDO, or will upload into the wrong fields.

How to Format an Excel File for DRG Upload

Data from a Health Fund contract can be transferred into the relevant columns of the template, or a copy of a contract can be modified using the following steps:

- 1. Save a copy of the contract (do not edit the master copy)
- 2. Go to DRG tab or section in the contract
- 3. Remove any lines above the DRG header table so that there is only one header row
- 4. Delete any columns that do not contain the required information as per the images above
- 5. Ensure the names and order of all columns and the header row match the template exactly

How to Upload DRG File into FYDO

1. Go to Settings & select Fees Setup

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- 2. Choose your location from the dropdown menu (only applicable to multi-site users)
- 3. Select required Fund
- 4. Ensure Same Day Fees tab is selected and Click Edit

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- 5. Update Start of Current Fee and End of Current Fee dates
- 6. Click Save

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- 7. Click DRG Fees tab
- 8. Click Edit

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- 9. Click **More Actions** and select **Click to move all Current fees to Old** and follow instructions this step is optional, however it is recommended as it ensures that episodes prior to the new contract dates are billed at the appropriate rates, otherwise all unbilled episodes will be billed at the newly loaded rates
- 10. Click Save

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- 11. Click Edit
- 12. Click More Actions and select Import Fees

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13. Click Fee Type and select Current File

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- 14. Click Upload DRG Fees File and locate the relevant Excel file to be uploaded
- 15. Click Upload

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- 16. DRG items and fees will populate into the DRG Fees tab
- 17. Click Save
- 18. Select **Print** to print or download, then **conduct a spot check with the contract to ensure fees have populated correctly**

Note: If a DRG no longer exists in the new fees, but there was an old rate, the line will remain in the fees screen and Current will show as \$0 (Old will show the previous rate). If a DRG has a zero-dollar balance under the Current fees AND the Old fees, FYDO will automatically remove this line from the fees page, as it is no longer required.

Adding MBS Item Numbers - Hospital

Adding or amending an MBS item in FYDO for the purpose of updating descriptions, adding facility specific cosmetic codes or removing items that are no longer needed.

The item numbers are updated in FYDO with each National Procedure Bandings Update.

Facilities will be responsible for updating the Theatre Band (State) according to their relevant contracts.

- 2. Select **Items** from the General menu
- 3. Add all MBS Codes will update all items in your FYDO system according to the current National Procedure Bandings.
- 4. Use the **filters** to search specific categories or groups etc
- 5. Use the **Show Inactive** tick box to view any items that have been made inactive in the database
- 6. Use the **Export To** option to export the list that is shown on the screen to an Excel spreadsheet
- 7. Use the **Search** field to find a specific item number or key word to determine if the item is already in the system. All items that include the searched information in the description will also appear
- 8. If the required item number displays, **double click** anywhere on the line to open the information
- 9. If the required item number doesn't appear, and it needs to be added, click Add Item
- 10. Add the item number, or desired code, into the **Number** *NB*. *This field will never be editable after it has been created & saved*
- 11. Add the description for the item into the **Procedure Name** (*The Number & Procedure Name fields are both mandatory fields that are required to add an item*)
- 12. The **Notes** field is available for any notes that may be required that relate to the item. It has no effect on how the item number is billed or displayed & can only be seen by navigating to this screen
- 13. **Linked Procedures** give the ability to add ICD procedure code base items to link to this item number. This can make coding the ICD procedures easier. (Hovering over the for the explanation of this field at any time)
- 14. **Category, Group & Sub Group** are fields that will pre-populate when a real MBS item number is added. FYDO will look up all these values, from the MBS Schedule, and import them. These values will be updated whenever a new MBS update is loaded & there is no need to edit these manually
- 15. **Item Type** is a field that can help categorise the item being entered. (*NB. These Item Types* can be added by going to **Settings, Item Types** & clicking **Add Item Type)**. This field allows the user to allocate items to a group (e.g., cardiology, consults etc) and to run reports on the items that are grouped together by the category
- 16. **Qty on Hand** can be used in conjunction with the item type
- 17. Modal is not required for hospitals (this is a clinic related field)
- 18. **Rule** is used to determine the rules to apply step downs etc for doctor billing
- 19. **100% Rebate** is to be ticked when the Medicare benefit is 100%, rather than 85% for in room services and is only applicable for doctor billing
- 20. **R-Type** is to be ticked if the item requires a referral. NB. This only relates to radiology/imaging items for doctor billing
- 21. Stock Item is not required for hospitals (this is a clinic related field)
- 22. Ask Quantity is not required for hospitals (this is a clinic related field)
- 23. Use the following to ensure the item is classified correctly, according to the relevant banding & accommodation types:
 - Theatre Band (National) will be updated by FYDO automatically
 - Theatre Band (State)
 - Day Type will be updated by FYDO automatically
 - Patient Class will be updated by FYDO automatically
 - DVA Accommodation
- 24. Tick Same Day Accom Band 1 Override if the item number can only have a band 1

accommodation billed in conjunction with it, regardless of the anaesthetic type or length of procedure

- 25. Tick **Accom Item** if the item being entered is required to be billed as an accommodation fee, as per the health fund contract
- 26. Tick **Eclipse Code Mapping** if the code being entered requires mapping to be able to be sent via Eclipse for billing. E.g., COL1, PKG38 or D001
- 27. Tick **Item Excluded from PSG** to exclude the item from the IHC PSG/MSG segment when being sent via eclipse. E.g., for NIB endoscopy claims
- 28. Tick **Miscellaneous/ADA Code** if the item is required to show in the Miscellaneous code section for data submission, instead of in the MBS code section. Commonly used for dental codes
- 29. Tick **Timebase** if this item is required to be billed according to the time it takes. Ticking this box will alert the system to look in the Timebase Fees set up for the chargeable fee
- 30. Click Save
- 31. To **Deactivate** an item number, follow steps 1-4 above & click **Edit**
- 32. Un-tick the Active box & the word will change to Inactive
- 33. Click Save
- 34. To **Re-Activate** an item, simply tick the **Inactive** box again & click **Save**
- 35. To remove an item number all together click on the Blue Drop Down Arrow on the right of the screen (*as seen in the first image above*) and click **Delete item**
- 36. You will be asked to confirm that you want to delete the item. Click Yes

<u>Hospital Invoicing / Billing an Episode -</u> <u>Simple</u>

Once the episode is complete, an invoice can be raised to a health fund or patient. For an invoice to be raised, the episode needs to be:

- Admitted
- Discharged
- Theatre Complete tick box checked (depending on the facility requirements)
- Coding Grouped (depending on the facility requirements)
 - 1. Open the Appointments Screen and locate the required episode
 - 2. **Right Click** to reveal the menu & select **Create Invoice**
 - 3. The **Create Invoice** page will display with the following necessary information:
 - a. All patient information specific to the episode
 - Billing information including: Billing Type Theatre Times
 - c. Procedure Items being billed
 - d. Other Services being billed
 - e. The **Bill To** feature allows other services to be billed to the patient or a third-party company, even if the main invoice is being billed to a health fund. Selecting **Patient** from this dropdown will create a separate invoice/invoice number for the patient account

- f. The **Financial Notes** & **Episodes notes** fields will reflect notes that have been entered into the patients' Episodes screen.
- 4. As long as all required information has been previously entered into the **Theatre Screen**, there should be few reasons that anything on the Create Invoice page needs to be amended
- 5. Click **Proceed to see charges**
- The invoice information is displayed, including: Accounting Period (That the revenue will be applied to) Bill Type ECLIPSE transmission status
- 7. The Accommodation charges will be shown
- 8. The Theatre & Other Services Charges will be displayed
- 9. GST can be amended with a Right Click in the GST Field
- Custom Invoice Messages are able to be added. (Invoice Message Templates can also be added in Settings > Invoice / IFC Messages, so that they can easily be selected from the dropdown list)
- 11. Invoice template can be selected
- 12. **Print & Save** can be selected when the invoice isn't able to be sent via ECLIPSE & the user requires a printed or PDF copy of the invoice
- 13. **Save** can be selected when the invoice **is** able to be transmitted electronically via ECLIPSE & the user does not require a hard copy of the invoice

Once the user has selected Save for an invoice that can be transmitted electronically via ECLIPSE, they will then need to send this invoice by following the FYDO wiki instructions <u>Claiming Hospital – Not Yet Sent</u>

For a more detailed explanation of FYDO invoicing please see: <u>Hospital Invoicing / Billing an Episode Detailed</u>

<u>Hospital Invoicing / Billing an Episode -</u> <u>Detailed</u>

Once the episode is complete, an invoice can be raised to a health fund or patient. For an invoice to be raised, the episode needs to be Admitted & Discharged. Depending on the requirements that the facility has stipulated in System Configuration, the Theatre Complete tick box may need to be ticked in order to confirm the item numbers are correct for billing. And the episode may need to be Grouped in order for billing to be able to be done.

A simple invoicing & billing explanation can be found at: <u>Hospital Invoicing / Billing an Episode – Simple</u>

- 1. Navigate to the Appointments Screen
- 2. Use the **Search** field to locate the required episode or
- 3. Use the **Calendar** to select required date & **Theatre Tabs** to select required theatre
- 4. Locate required episode & Right Click to reveal the menu
- 5. Select Create Invoice

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- 6. The **Create Invoice** page will display with the following necessary information:
 - a. All patient information specific to the episode
 - b. The health fund being invoiced
 - c. **Billing Type** can usually be left as default. This allows FYDO to review the fees entered for the health fund & bill accordingly by **Casebase**, **Per Diem** or **DRG**
 - d. The Status of the invoice being billed: either Full Fee or Basic Fee
 - e. The Accommodation Type
 - f. The anaesthetic type being billed
 - g. The theatre times that the invoice will be based on
 - h. The Mode of Separation
 - i. The items being billed
 - j. The **Other Services** being billed
 - k. The **Re-order Item Numbers** tick box allows users to keep the item numbers in the order they have been entered in. However, if this box is checked, then FYDO will order the item numbers from highest to lowest banding
 - The **Bill To** feature allows other services to be billed to the patient or a third-party company, even if the main invoice is being billed to a health fund. Selecting **Patient** from this dropdown will create a separate invoice/invoice number for the patient account
 - m. The **Financial Notes** & **Episodes notes** fields will reflect notes that have been entered into the patients' Episodes screen.
- 7. As long as all required information has been previously entered into the **Theatre Screen**, there should be few reasons that anything on the Create Invoice page needs to be amended
- 8. Click **Proceed to see charges**
- 9. The **Accounting Period** date, which the revenue will be applied to, is displayed. (*The default date that is selected in this field is set in Settings > System Configuration*)
- 10. The **Bill Type** that has been used will be displayed
- 11. The invoice's ability to be transmitted via ECLIPSE will be shown with the tick box
- 12. The Accommodation charges will be displayed
- 13. The Theatre & Other Services Charges will be displayed
- 14. **GST** will be displayed if the fees for that item have been set up to include GST. Otherwise, users are able to calculate the GST amount by **Right Clicking** in the **GST Field**
- 15. Custom Invoice Messages are able to be added & the user is able to type the required messages. However, Invoice Message Templates can also be added in Settings > Invoice / IFC Messages so that they can easily be selected from the dropdown list
- 16. FYDO allows for multiple Invoice Templates to be added. A default template can be set, but if another template is required, it can be selected from the Template dropdown
- 17. **Print & Save** can be selected when the invoice isn't able to be sent via ECLIPSE & the user requires a printed or PDF copy of the invoice
- 18. **Save** can be selected when the invoice **is** able to be transmitted electronically via ECLIPSE & the user does not require a hard copy of the invoice

Once the user has selected Save for an invoice that can be transmitted electronically via ECLIPSE, they will then need to send this invoice by following the FYDO wiki instructions <u>Claiming Hospital –</u> <u>Not Yet Sent</u>

<u>Hospital Health Fund Fees - Same Day Fees</u> <u>Set Up</u>

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

- 1. Fees can be entered in **Settings > Hospital > Fees Setup ★**
- 2. For multi location databases, ensure the correct **Location** is selected
- 3. Use the ${\bf Fund}$ drop down to select the required health fund
- 4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees**
- 5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory*. *However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
- 6. The Same Day Fees tab contains the Same Day Accommodation Fees and the Theatre Banding Charges
- 7. Users are also given the ability to **Print** the health fund fees, for the selected fund
- 8. To edit these fees, click the **Edit** button
- 9. Once in edit mode, you will be able to amend the **Start of Current Fee** & **End of Current Fee** dates to indicate when the new contract fees apply
- Use the More Actions drop down to Click to Move Current Fees to Old Fees <u>before the</u> <u>new fees are entered</u>. This will replicate all the current accommodation fees into the Old Fees columns
- 11. Enter the new fees in the **Full Fee** column for the corresponding bands. (*C is for Type C procedures*)
- 12. Once all Full Fees are entered, use the **More Actions** dropdown, and select **Click to Move Charge into Full Rebate.** This will copy all fees from the **Full Fee** column over into the **Full Fee Rebate** (*Do not do this step for un-insured fees or for other 'funds' that don't attract a rebate*)
- 13. Depending on the contract agreement, facilities may need to add the **Full Fee** amount into the **Basic Fee** column. This can easily be done by using the **More Actions** drop down.
- 14. Repeat the same steps 10 > 12 for the **Theatre Banding Charges** on the right side of the screen
- 15. Click Save

For further information on how to set up fees, please visit our pages:

Other Settings Casebase Fees Casebase Multi Fees DRG Fees Overnight Accommodation Fees

Hospital Health Fund Fees - Other Settings

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The Other Settings tab allows the entry of the Banding Percentages Breakdown, along with more specific information regarding health fund contracts.

For more information on adding Same Day Fees, please see our page <u>Hospital Health Fund - Same Day Fees Setup</u>

- 1. Fees can be entered in **Settings > Hospital > Fees Setup ★**
- 2. For multi-location databases, ensure the correct Location is selected
- 3. Use the **Fund** drop down to select the required health fund
- 4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (See Same Day Fee Instructions to amend these dates)
- 5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory*. *However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
- 6. Select the **Other Settings** tab
- 7. Click Edit
- 8. Enter all details relevant to the particular contract (hover over the \bowtie for further details & information pertaining to the relevant field)
- 9. Enter the **Theatre Banding Percentages** to ensure the system calculates the percentage breakdown of the subsequent theatre items correctly. If there are old fees entered, ensure that the percentage breakdown is also entered in the **Old** column
- 10. Enter the **Casebase Banding Percentages** to ensure the system calculates the percentages breakdown for subsequent casebase items correctly. If there are old fees entered, ensure that the percentage breakdown is also entered in the **Old** column
- 11. Enter all Miscellaneous Fees relevant to the particular contract
- 12. Click Save

For further information on how to set up fees, please visit our pages:

<u>Casebase Fees</u> <u>Casebase Multi Fees</u> <u>DRG Fees</u> <u>Overnight Accommodation Fees</u>

Hospital Health Fund Fees - Casebase Fees

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The Casebase Fees tab allows the entry of any contracted All Inclusive Procedure Fees. For more information on adding Same Day Fees, please see our page <u>Hospital Health Fund Fees - Same Day Fee Set Up</u>

- 1. Fees can be entered in **Settings > Hospital > Fees Setup ★**
- 2. For multi-location databases, ensure the correct **Location** is selected
- 3. Use the ${\bf Fund}$ drop down to select the required health fund
- 4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (See Same Day Fee Instructions to amend these dates)
- 5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory*. *However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
- 6. Select the ${\bf Casebase\ Fees\ }{\rm tab}$
- 7. Click **Edit**
- 8. If entering an amended contract, use the **Actions** dropdown to select **Move to Old Charge** <u>before the new fees are entered.</u> This will replicate the Current fees across to the Old Fees columns
- 9. Use the bottom row to **add new items**
- 10. Use the \blacksquare to remove any items that are no longer required
- 11. Enter the item number in the **MBS** column
- 12. Enter the casebase fee, listed in the contract, in the **Casebase** column
- 13. If there is a procedure fee associated with the item number, it can be entered into the **Procedure** column
- 14. Select the relevant Type for the item being added.
 Standard will prompt FYDO to bill just the fee documented in the Casebase column & no accommodation fee will be added
 PerDiem-Proc will add an the relevant accommodation fee to the procedure fee PerDiem-Case will add the relevant accommodation fee to the casebase fee
- 15. The **DVA** column is where the DVA codes are added (e.g. the "**H**" codes etc.). NB. All DVA items, with an associated item number, will need to be entered with the item number in the MBS column & will need to be billed using the MBS item number. FYDO will then send the associated DVA code via ECLIPSE to ensure claims are transmitted successfully
- 16. Tick the **GST** box if the fee that has been entered is **inclusive of GST**
- 17. Tick the **Exclude Other Services** box if the other services/prosthesis are unable to have a charge raised when billed with the item number. E.g., If a contract stipulates that any prosthesis used is included in the casebase fee. *NB for this function to work, each applicable prosthesis code will need the* **Exclude fee when billing** tick box ticked.
- 18. Once all details have been entered click Save

For further information on how to set up fees, please visit our pages:

Other Settings Casebase Multi Fees DRG Fees Overnight Accommodation Fees

<u>Hospital Health Fund Fees - Casebase Multi</u> <u>Item Fees</u>

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The Casebase Multi Item Fees tab allows the entry of any contracted All Inclusive Package Fee for more than one item number. For example, a bundled fee for a colonoscopy & gastroscopy together. For more information on adding Same Day Fees, please see our page

Hospital Health Fund Fees - Same Day Fees Set Up

- 1. Fees can be entered in **Settings > Hospital > Fees Setup ★**
- 2. For multi location databases, ensure the correct Location is selected
- 3. Use the **Fund** drop down to select the required health fund
- 4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (See Same Day Fee Instructions to amend these dates)
- 5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory*. *However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
- 6. Select the Casebase Multi Item Fees tab
- 7. Click **Edit**
- 8. If entering amended prices, use the **Actions** dropdown to select **Move to Old Charge**, so that the fees listed in the current contracted fees can be moved into the **Old** fees fields, before they are updated
- 9. Enter the item numbers that coincide with the case base fee in the MBS columns
- 10. Enter the casebase fee amount in the **Casebase** column
- 11. Leave the **Type** as **Bulk**, unless there is a specific fund code that needs to be entered for those items. E.g., NIB codes COL1 or PKG38 etc., in which case, choose **Prefix** from the drop down
- 12. Selecting **Prefix** from the drop down will then allow the health fund specific code to be entered into the **Code** column *NB*. Only codes that have previously been added to Settings > Items are able to be typed in this section & they may require Eclipse Mapping
- 13. Selecting **AddOn** from the drop down will allow for a fee to be added to the **Fee** column. This would be used to add a surcharge fee when billing this combination of items to a health fund and would be outlined in the relevant health fund contract
- 14. The **DVA** column is used if there is a **"H" or other code** in the DVA contract that is relevant to the group of item numbers
- 15. Use the **Excl OS** column if the other services /prosthesis charges associated with the procedure are unable to be raised in conjunctions with the case base fee. *NB for this function to work the* **Exclude fee when billing** tick box will need to be ticked in each relevant prosthesis
- 16. Use the **GST** tick box if the fee is **inclusive of GST**
- 17. Use the \blacksquare in the Action column to remove any lines that are no longer needed
- 18. Click Save

For further information on how to set up fees, please visit our pages:

Hospital Health Fund Fees - DRG Fees

When new contracts are negotiated with health funds, amended fees need to be loaded into FYDO to facilitate a seamless IFC & Billing process.

The DRG Fees tab allows the entry of any contracted fees pertaining to DRGs. For more information on adding Same Day Fees, please see our page <u>Hospital Health Fund Fees - Same Day Fees Set Up</u>

DRG Fees are also able to be imported into FYDO from an Excel file. Please see our instructional wiki page below to find out how to do this: <u>Hospital Health Fund Fees – Importing DRG Fees</u>

- 1. Fees can be entered in **Settings > Hospital > Fees Setup**[⊥]
- 2. For multi location databases, ensure the correct Location is selected
- 3. Use the **Fund** drop down to select the required health fund
- 4. The **Start of Current Fee** date indicates the date that the **Current Fees** will be utilised from. Any episode from before the start date will utilise the **Old Fees** (See Same Day Fee Instructions to amend these dates)
- 5. The **End of Current Fee** date indicates the date that the **Current Fees** will expire. Users will still be able to create IFC's for admissions after the End of Current Fee date. However, the system will prohibit billing for episodes that fall after this date. (*This date isn't mandatory*. *However, it is a good way to ensure accounts aren't accidentally billed at outdated prices*)
- 6. Select the **DRG Fees** tab
- 7. Search for the required DRG or to update all fees click Edit
- 8. If entering amended prices, use the **Click to Move Current Charge into Old Charge** option so that the fees listed in the current contracted fees can be moved into the **Old** fees fields
- 9. Locate the required DRG in the **DRG Column.** They will be listed in alphabetical order. If adding a new DRG, a new line becomes available below the table to add the next DRG.
- 10. Add the applicable Same Day fee into the Same Day Rate column
- 11. Add the applicable Inpatient fee into the **IP Rate** column
- 12. Add the Short Stay Trim into the SS Trim column
- 13. Add the applicable Short Stay Fee into the **SS Fee** column
- 14. Add the Long Stay Trim into the LS Trim column
- 15. Add the applicable Long Stay Fee into the **LS Fee** column
- 16. Add the Transfer Trim into the TFR Trim column
- 17. Add the relevant Transfer Discount into the **TRF Disc** column
- 18. Tick the GST box (scroll right) if the fees are inclusive of GST
- 19. Click Save once all fees are entered

For further information on how to set up fees, please visit our pages:

Other Settings Casebase Fees Casebase Multi Fees Overnight Accommodation Fees