Steps to Add or Reverse an Adjustment

Version 1.1 | Last Updated: March 14, 2025 | Process Owner: Revenue Cycle

Introduction

This document provides instructions for adding new adjustments or reversing existing adjustments in the patient accounting system. Adjustments are used to modify patient account balances for various operational and administrative reasons.

Common Scenarios for Adjustments:

- Processing insurance denials
- Correcting billing errors
- Applying charity care discounts
- Managing small balances
- Processing bankruptcy adjustments
- Handling non-covered services

Authorization Requirements:

Only staff members with appropriate system access and training should perform adjustments. Please consult your supervisor if you are unsure about your authorization level.

Detailed Process Steps

From within the patient's account:

1. **Navigate to Charging Screen**
   - Go to the "Patient Charging -- General" screen

Patient Charging - General

2. **Access Charge Entry**
   - Choose "Charge Entry"

Charge Entry

3. **Confirm Discharge Status**

- o A warning will pop-up that says "Discharged ---Proceed?"

DISCHARGED 09/26/24--PROCEED?

| Yes | No |

- o Click the "Yes" button to continue

4. Enter Service Date

- o Service date for adjustments should be the current date.

Service Date
03/05/25

- o When tabbing out of the service date field you will receive another pop-up warning that says "service date outside stay. OK?" Select "Yes" to proceed

Service date outside stay. OK?

| Yes | No |

5. Enter Adjustment Code

- o Tab over to the Item# field and enter the appropriate adjustment code for the adjustment you are trying to add/adjust

] | Item # | [

- o To view available adjustment codes, enter a question mark (?) in this field

Item	Description	Catalog #
03000631	ALCOHOL	
03000631	ALCOHOL LEVEL	
00099004	BAD DEBT RECOVERY	
00099001	BAD DEBT WRITE-OFF	
00099003	BALANCE TRANSFER	
00099033	BANKRUTPCY W/O ADJUSTMENT	
00099023	BCBS DENIAL ELIGIBILITY	
00099026	BCBS DENIAL MANAGED CARE	
00099029	BCBS DENIAL OTHER SEE NOTE	

Search: | Sort: Description

Items for Dept 400

More

- o See Section 8 below for a detailed list of adjustment codes and their uses

6. Enter Quantity

- o Tab to the "quantity" field and enter a quantity of **1**

Quantity
1

- o **Important:** Even when reversing an adjustment, the quantity should still be 1

7. Enter Adjustment Amount

- o Tab to the amount field and enter the amount of the adjustment

- o For credits to the account (reducing the balance), enter a negative amount

Amount
1.00-

- o To reverse a previous adjustment or add a charge adjustment, enter a positive amount

Amount
1.00

8. **Verify Description**
   - o Tab through the description field
   - o The description should not be changed on an adjustment
9. **Save the Entry**
   - o Press the green plus sign to the far right

   ✚

   - o The entered information should move to the box above the entry lines and all fields should clear

A/R Date:	03/05/25						Initials:	TH

Patient	Serv Dt	D...	Item #	Quantity	Amount	Description	Phy #	Phy Amt
10006188	03/05/25	400	9902:	1.00	1.00	BCBS DEN ELIG	000000	0.00

10. **Return to Previous Screen**
    - o Select the blue back arrow at the upper left corner of the screen

    ⬅

A/R Date:
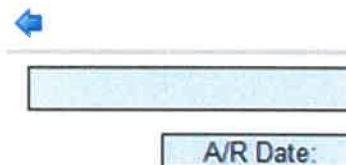
11. **Post the Charges**
    - o Select "Charge Posting"

Charge Posting

    - o Select the "Yes" button on the charge posting screen

    THIS PROCEDURE WILL APPLY ALL "UNPOSTED CHARGES" TO THE PATIENT ACCOUNTS...

    ARE YOU SURE YOU WANT TO DO THIS?   YES | NO

12. **Verify Posting Information**
    - o You will receive a pop-up box that indicates the number of "charges" and the total dollar amount being posted

o   Verify this information is correct and press "OK"

1 CHARGES POSTED FOR A TOTAL OF 1.00

| OK |

13. Navigate Away from Screen
o   Select the patient function screen to go back into the patient's account or the back arrow in the upper left corner to go back to the hospital base menu

Charge Functions	
Charge Entry	
Charge Review	
Batch Total	
Charge Posting	
Patient Functions	

Adjustment Code Reference Table

Code	Description	Purpose	Usage Guidelines
99002	SMALL BALANCE ADJUSTMENT	Used for balances due from patient less than $5	Cannot be used to adjust the $4 Medicaid copay
99003	BALANCE TRANSFER	Used to transfer balances (positive or credit) to another account	Requires documentation of the recipient account
99015	MEDICARE DENIAL TIMELY FILING	Used for timely filing denials from Medicare only	Requires denial documentation
99016	MEDICAID DENIAL TIMELY FILING	Used for timely filing denials from Medicaid only	Requires denial documentation
99017	BCBS DENIAL TIMELY FILING	Used for timely filing denials from BCBS only	Requires denial documentation
99018	COMMERCIAL DENIAL TIMELY FILING	Used for timely filing denials for all payers other than Medicare, Medicaid, or BCBS	Requires denial documentation
99032	CHARITY/INDIGENT CARE ADJUSTMENT	Used to adjust the account if/when the patient is approved for indigent care/501R	Requires approval documentation

Code	Description	Purpose	Usage Guidelines
99033	BANKRUPTCY W/O ADJUSTMENT	Used to adjust accounts when we are notified by an attorney's office that the account(s) were included in a bankruptcy	Requires bankruptcy documentation
99034	NON COVERED SERVICE GROUP CODE CO	Used for all payers, other than Medicare/Medicaid, to adjust denials that cannot be corrected and rebilled for payment (medical necessity, NCCI, etc)	Requires EOB/denial documentation
99035	NON COVERED LCD MEDICARE	Used for Medicare medical necessity	Requires EOB/denial documentation
99036	NONCOVERED LCD MEDICAID	Used for Medicaid medical necessity	Requires EOB/denial documentation
99037	MEDICARE NOT ENROLLED	Used to adjust claims with dates of service prior to the hospital's Medicare enrollment date	Requires management approval to use
99038	MEDICAID NOT ENROLLED	Used to adjust claims with dates of service prior to the hospital's Medicaid enrollment date	Requires management approval to use
99039	OLD CHARGE MASTER ADJ	Used to adjust account with charges prior to the charge master update to the correct pricing	Requires management approval to use

Verification and Troubleshooting

Verification Steps

After completing the adjustment process:

1. Return to the patient account summary screen
2. Verify the adjustment appears with the correct amount
3. Verify the account balance has updated appropriately
4. Document the reasoning and approval, if necessary, for the adjustment in the account notes

Common Issues and Solutions

Problem	Possible Cause	Solution
Pop-up window doesn't appear	System lag	Wait 10 seconds, then try again
Adjustment doesn't post	Posting step missed	Complete steps 11-12 to post charges