In order to update your PPS Tracking information so it's accurate for filing the Medicare Cost Report, please go through the following sequence. Some of these steps will only be done this one time, to correct the calculations and episode $Amounts.

(1) Codes > Other Basic Codes > County Codes > Click on **Verify CBSA Updates.**

This makes sure you have the most current wage indexes. You should see a message that all codes are up to date. If not it will let you know to update the codes - Update CBSA Wage Indexes.

(2) Reports > Billing > 14.03 PPTPRNT2 > Click on **Delete Old Episodes**

This removes episodes with a thru date over 90 days ago that have not had a RAP claim.

When that finishes select the **Search for Missing Episodes** tab and check the box for [X] Create Missing Episodes and [Check for Multiple PPS Payers]. Click the **Search for Missing Episodes** button. If there are episodes that print with the message "Duplicate Payers" then there is data that needs to be corrected before you can go any further. This problem is caused by having chargeable visits posted to more than one PPS payer for one chart number. This is not possible, since when a patient changes to/from Medicare/Medicare Advantage, it creates a situation which requires a new admission date, 485s, OASIS, etc. Determine which payer is correct, make sure the patient screen – payers tab is correct, and fix the visits that are not charged to the correct payer. You can use the screen at Employee Activity – Fix Payer/JobCd/Chart# to easily change a group of visits or supply charges. Then come back to this screen, check the box for [X] Create Missing Episodes and click the **Search for Missing Episodes** button. Repeat this step until you get a message that reports how many visits were checked with 0 episodes found.

(3) Billing > PPS Billing > RAP Claims

Make sure all RAP/NOA claims for the report time frame have been created.

(4) Billing > PPS Billing > End of Episode Claims

Make sure all episodes that ENDED in the year have been created. Set the Episodes Thru date to the end of the report year. Uncheck [ ] Print 485/VO Not Back. Click on each Medicare payer. Even if you have some episodes that have not yet been audited, go ahead and create a batch now for all those claims. If there is a reason for not sending these claims, after completing all the other steps, use the process in step (6) to cancel this batch.

(5) Reports (New) > Billing > 15.16 PPSCOST3 > PPS Cost Report > Click on Summary

http://kb.barnestorm.us/KnowledgebaseArticle50452.aspx

(6) If you created EOE claims in step (4) just for this report, now is the time to change the status on those episodes back to RAP no EOE. You cancel that EOE batch by going to Billing > PPS Billing > Review PPS Batches - click **End of Episode**, select that EOE batch, then click **Cancel All Episodes in This Batch**

(7) If you created RAP claims in step (3) just for this report, now is the time to change the status on those episodes back to OASIS no RAP. You cancel that RAP batch by going to Billing > PPS Billing > Review PPS Batches - click **RAP**, select that RAP batch, then click **Cancel All Episodes in This Batch.**

(8) 15.09 will give you the stats you need.

http://kb.barnestorm.biz/KnowledgebaseArticle50615.aspx

Medicare Cost Report

Knowledgebase
http://kb.barnestorm.biz/KnowledgebaseArticle50398.aspx