

Treatment Authorization Code

The purpose of the treatment authorization code is so the payer can recalculate the hipps code based on actual number of therapy visits in the episode. It is NOT needed when a patient is billed per visit, only when billed per episode. The treatment authorization code come from the OASIS.

If it is missing, go to **Billing > PPS > Edit PPS Episode**.

Pull up the patient and select the episode.

Make sure the TX code is showing.

If not, **Select a Different OASIS**.

If it still doesn't show, check the OASIS to make sure it's there.

Knowledgebase

<http://kb.barnestorm.biz/KnowledgebaseArticle50551.aspx>