RESOLVING CRITICAL PNOT ERROR

Special Reminder of how to 'ARCHIVE' a visit

RESOLVING PNOT CRITICAL ERROR:

Scenario:

A provider accidentally selected a service authorization that has expired a month ago. After performing services, the provider is unable to submit claims. The provider saw a ***CRITICAL PNOT*** error (See screenshot below) under Edits & Errors category.
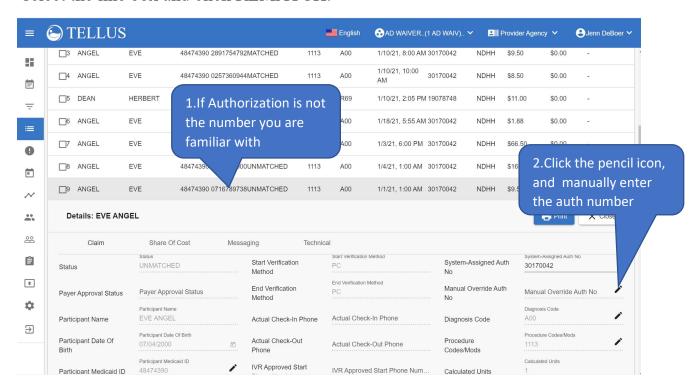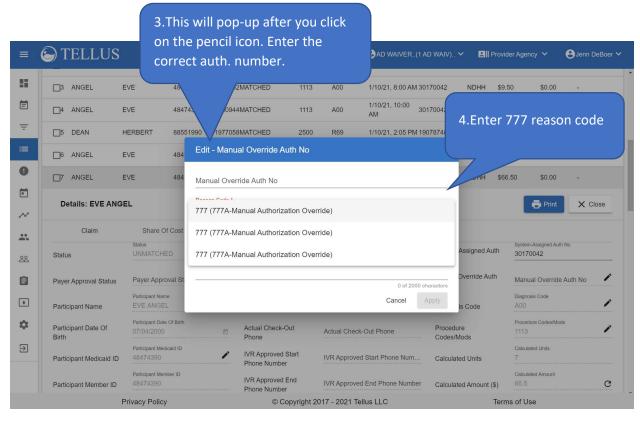

Until a permanent fix has been released, a work around is provided for providers to help them move forward to release their claims for submission.
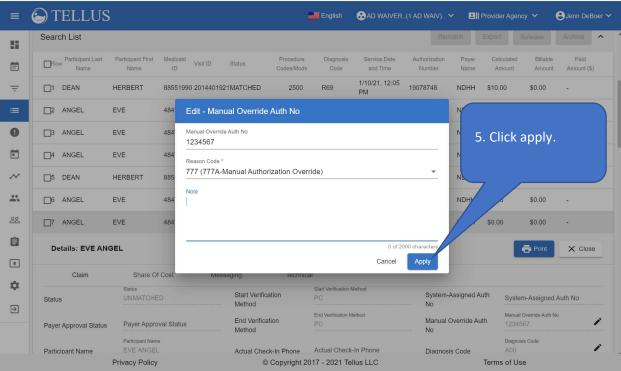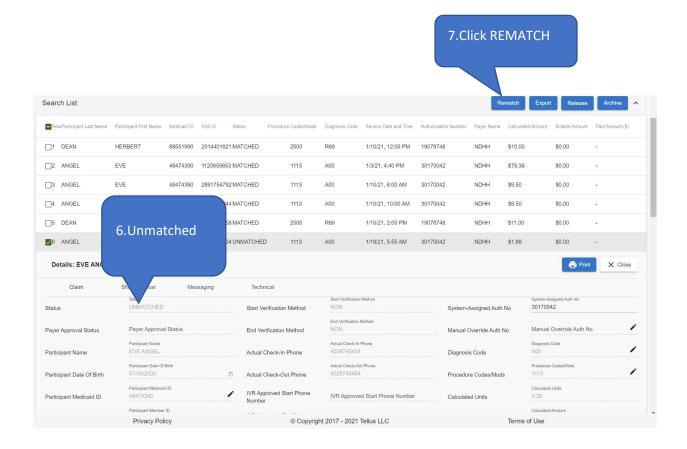
STEP 1.

If provider links the service authorization incorrectly to an expired one, there are two things you can do:

1.1 If the authorization number does not have any dashes or it is not the same auth#, click the line to open, enter that auth# in the manual override section, select the line box and click REMATCH.
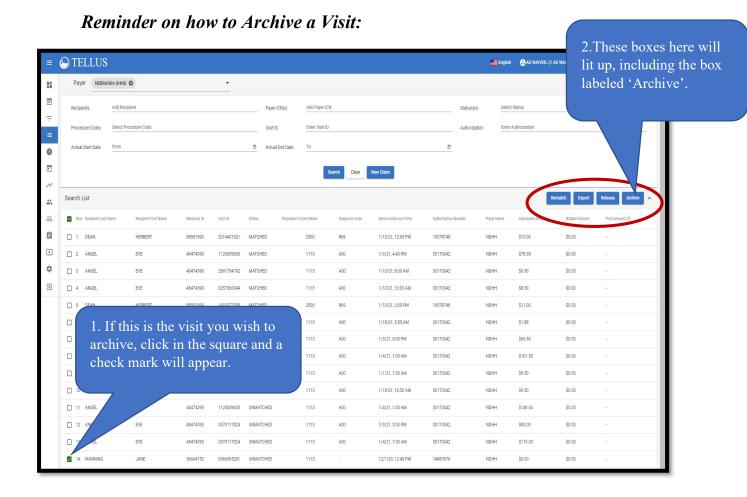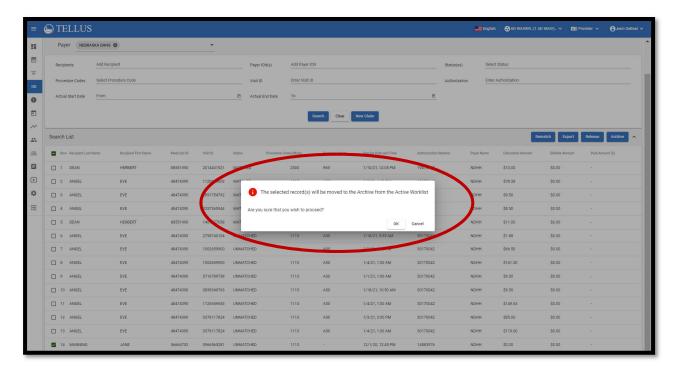
3. This will pop-up after you click on the pencil icon. Enter the correct auth. number.

4. Enter 777 reason code

5. Click apply.

TELLUS — First screenshot

□3	ANGEL	EVE	48	2MATCHED	1113	A00	1/10/21, 8:00 AM	30170042	NDHH	$9.50	$0.00	-
□4	ANGEL	EVE	48474	0944MATCHED	1113	A00	1/10/21, 10:00 AM	3017004
□5	DEAN	HERBERT	88551990	1977058MATCHED	2500	R69	1/10/21, 2:05 PM	1907874
□6	ANGEL	EVE	484
□7	ANGEL	EVE	484						HH	$66.50	$0.00	-

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Edit - Manual Override Auth No

Manual Override Auth No

Reason Code *

777 (777A-Manual Authorization Override)
777 (777A-Manual Authorization Override)
777 (777A-Manual Authorization Override)

0 of 2000 characters

Cancel   Apply

Details: EVE ANGEL   Print   X Close

Claim	Share Of Cost

Status — UNMATCHED

Payer Approval Status — Payer Approval St

Participant Name — Participant Name — EVE ANGEL

Participant Date Of Birth — Participant Date Of Birth 07/04/2000

Participant Medicaid ID — Participant Medicaid ID 48474390

Participant Member ID — Participant Member ID 48474390

Assigned Auth — System-Assigned Auth No 30170042

Override Auth — Manual Override Auth No

is Code — Diagnosis Code A00

Procedure Codes/Mods — Procedure Codes/Mods 1113

Calculated Units — Calculated Units 7

Calculated Amount ($) — Calculated Amount 66.5

Actual Check-Out Phone — Actual Check-Out Phone

IVR Approved Start Phone Number — IVR Approved Start Phone Num...

IVR Approved End Phone Number — IVR Approved End Phone Number

TELLUS — Second screenshot

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Search List

Rematch   Export   Release   Archive   ∧

Row	Participant Last Name	Participant First Name	Medicaid ID	Visit ID	Status	Procedure Codes/Mods	Diagnosis Code	Service Date and Time	Authorization Number	Payer Name	Calculated Amount	Billable Amount	Paid Amount ($)
□1	DEAN	HERBERT	88551990	2014401921	MATCHED	2500	R69	1/10/21, 12:05 PM	19078748	NDHH	$10.00	$0.00	-
□2	ANGEL	EVE	484
□3	ANGEL	EVE	484							N
□4	ANGEL	EVE	484
□5	DEAN	HERBERT	885							N
□6	ANGEL	EVE	484							NDH	3	$0.00	-
□7	ANGEL	EVE	484								$0.00	$0.00	-

Edit - Manual Override Auth No

Manual Override Auth No
1234567

Reason Code *
777 (777A-Manual Authorization Override)   ▼

Note

0 of 2000 characters

Cancel   Apply

Details: EVE ANGEL   Print   X Close

Claim	Share Of Cost	Messaging	Technical

Status — UNMATCHED

Payer Approval Status — Payer Approval Status

Participant Name — Participant Name — EVE ANGEL

Start Verification Method — Start Verification Method PC

End Verification Method — End Verification Method PC

Actual Check-In Phone — Actual Check-In Phone

System-Assigned Auth No — System-Assigned Auth No

Manual Override Auth No — Manual Override Auth No 1234567

Diagnosis Code — Diagnosis Code A00

1.2 If the authorization number has a dash or it is the same authorization you will need to go back to the schedule visit tab to manually reschedule the visits provider has incorrectly linked the service authorization with. As a provider, you will need to first archive the visits with incorrect service authorization.

NOTE: If the visit is reoccurring, you must cancel the entire series and reschedule reoccurring with the correct auth# starting with the first date of service completed and archived.
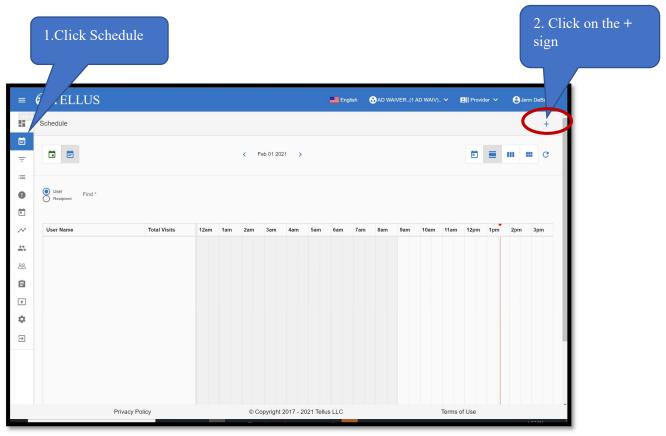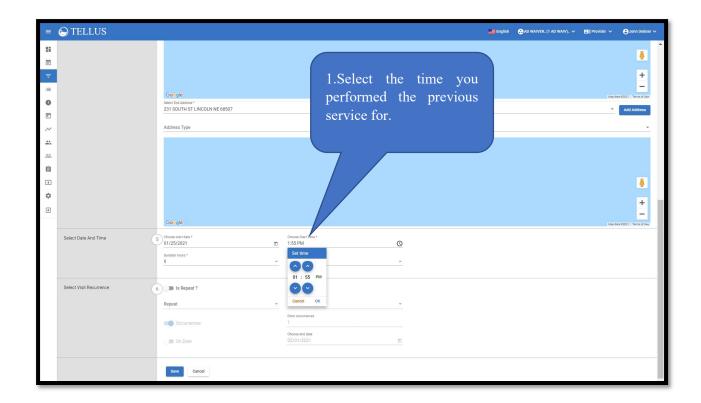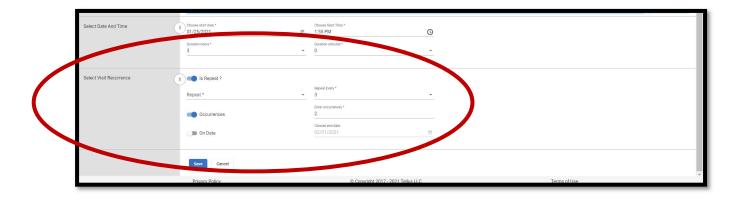
Reminder on how to Archive a Visit:

Step 2. Click on the box labeled 'Archive'

A message will prompt and ensure that you are certain you wish to archive your visit. If you are certain you wish to archive the visit, click **'OK'**. The visit will be archived. **You cannot bill for that archived visits.**

Step 3. Go to Schedule on the left-hand side of the panel

1.Click Schedule

2. Click on the + sign

Step 4. You will need to recreate the visit you just archived if it is not recurring.

NOTE: If the visit is recurring, you must cancel the entire series and reschedule reoccurring with the correct auth# starting with the first date of service completed and archived.

Step 5. Once you reached 'Select Date and Time' designated with a **5** on the visit screen, you will need to put in the date of service of the **PREVIOUSLY ARCHIVED** visit. (Remember, you are recreating the visit you selected the wrong service authorization for.)

1.Date must be changed to the visit date you archived.

1.Select the date you performed the previous service for.

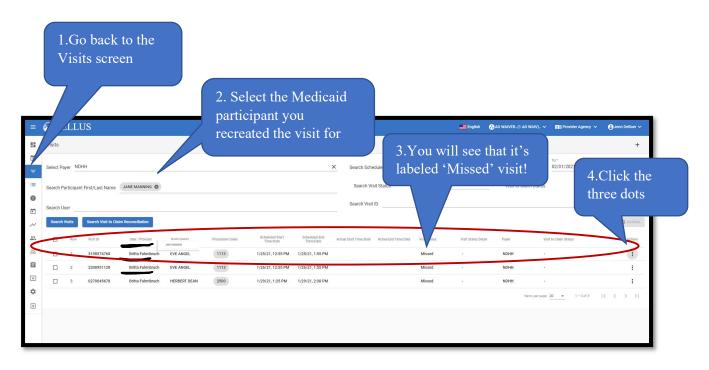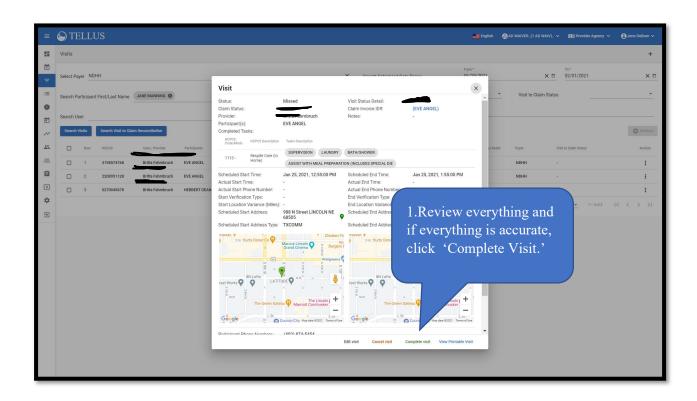1. Select the time you performed the previous service for.

Step 6. If this is a repeat visit, you can make your visit repeatable. *if recurring, then the entire series must be cancelled first and then reschedule everything back with the correct authorization.

Step 7. Go back to the Visits screen

1.Go back to the Visits screen

2. Select the Medicaid participant you recreated the visit for

3.You will see that it's labeled 'Missed' visit!

4.Click the three dots

Step 8. Once you click on the three dots

Step 9. Go back to Visits and review your resubmitted claims. It should now reflect '**Complete**' and visit to claims is indicated as '**Success**.'