

# ***Why am I getting Missing HIPPS Code or Blank Authorization Numbers errors on my RAP?***

## **Summary:**

Wrong dates result when dates are not synchronized in several screens used to build the RAP.

## **Solution:**

Please check the two Billing screens that are used for Medicare RAPs. The HHRG screen has a date for the OASIS, and the PPS screen has a date for the Episode From based on the 485 Cert From.

The Statement From date on the claim is usually pulled from the Episode Start on the PPS screen, but the HIPPS date is pulled from the HHRG screen. With a RAP for a recert date, the HIPPS date will be pulled from the date of the first visit in the daily screen.

The solution is to check the dates on the screens that are involved in building the RAP.

## **Billing HHRG Screen**

1. If this is a recertification assessment, see if the OASIS assessment is outside the 5-day window.
2. If you click "ignore SCIC" on the Billing HHRG screen, that causes that HIPPS and treatment authorization code to be ignored.
3. Verify that there are no future dates.

## **Billing PPS Screen**

1. Verify dates of the episode match the 485 Cert From and Cert To dates.
2. Verify that the dates cover a 60-day episode.
3. Extend the dates on the PPS screen to the original episode dates.
4. Avoid a gap in the dates (Episode Start and Episode End) from one episode to another.
5. Make Episode Start and Episode End dates consistent between Cert From and Cert To for a given episode.
6. Verify that there are no future dates.

## **Dailies Screen**

1. Do the Pay Source Summary report, the Client and Pay Source Report, the Electronic Billing Summary Report, which you probably normally do not print, show any pay code of just \*\* \*\* instead of, for example \*\* 02 Medicare \*\*? If the answer is YES, you probably have no Dailies for this client for this pay code for these dates.
2. Go to Daily and do a quick filter for this month and verify that there are entries with the Medicare pay code.

## **Billing Eligibility Screen**

- Is this client still really a Medicare client or is this client no longer a Medicare client? To verify this: Go to the Billing, Eligible Pay screen and verify client is still eligible for Medicare.